



AUA Staff Liaison	Emily Calvert, MSN, RN
Chair	Matthew Nielsen, MD
Terms of Office	Chair: 3-year term (non-renewable) Members: 3-year term, renewable once

Committee Makeup

The QIPS Committee consists of the Chair and approximately 12 additional members appointed based upon knowledge and expertise in the subject matter. The Chair recommends committee members. The staff liaison and Chair work to assure appropriate geographic and practice diversity. The Chair is appointed by the AUA President based on a recommendation from the Science & Quality Council Chair and approval from the AUA Compensation Committee.

Mission & Vision Statements

Mission: To foster quality urologic care through the development of quality improvement initiatives such as developing and testing physician performance measures, implementing initiatives on patient safety and other important and timely issues of concern to urology (including white papers) and monitoring federal quality programs and alerting AUA members of these initiatives.

Vision: AUA, as a recognized leader for quality initiatives in urology, will continue to promote the highest standards of urologic care while guarding patient safety.

Committee Meetings

The committee meets twice per year at AUA headquarters--once in the spring and once in the fall. There is email correspondence throughout the year; conference calls are scheduled on an as needed basis.

Time Commitment

Chair: 10-12 hours a week/ approximately 600 hours per year

Member: 30-50 hours per year

Qualifications/ Responsibilities

Chair: The Chair should have the ability to organize and motivate the committee towards common goals and work objectives, have a strong background in quality measurement and improvement, patient safety and health policy overall, and be able to coordinate the activities of the committee with the assistance of AUA staff. The Chair will oversee the committee's work in responding to government and private payor healthcare quality initiatives and direct the AUA Board towards an action plan for responding to public and private quality and safety initiatives. The Chair should also keep abreast of regulatory and legislative issues that could have an impact on quality, safety and related issues, such as payment, in urology practice. The Chair also needs to engage and work with other members and outside organizations (e.g., LUGPA, SUNA, NQF, AHRQ) who have knowledge of this field.



Members: Members should have knowledge of healthcare quality and patient safety issues, including measure development and reporting, federal quality programs, electronic medical records, and quality improvement. Members must be willing to serve on at least one committee panel (such as a white paper workgroup) and when appropriate be nominated to national quality organizations.

Recent Accomplishments 2020

1. The Measure- Evaluation Panel reviewed the AQUA measures using the National Quality Forum measure evaluation criteria and developed recommendations for the 2021 MIPS self-nomination.
2. A white paper focusing on reducing post-operative opioid prescribing in urology has been finalized and will be submitted for publication in *The Journal of Urology*. Two additional white papers around shared decision-making and CAUTIs are in process.
3. Two webinars have been planned to provide context for and promote the postponed QI Summit: *Opportunities to Improve Palliative Care in Urology*, which will be held in 2021. The two webinars are titled *Building a Primary Palliative Care Model in Urology* and *Creating an Educational Agenda within Urology around Palliative Care*.
4. QIPS members began working to develop a quality improvement repository. This repository will include descriptions of quality improvement initiatives that have been implemented so that practices can connect with, and learn from, one another.