

MEDICAL PSYCHIATRY UNITS

Improving their organization, focus, and value

1. Psychiatric morbidity in hospital inpatients is associated with longer lengths of stay, higher medical costs, and more rehospitalizations. *[dit proefschrift]*
2. Medical psychiatry units improve patient outcomes and reduce costs. *[dit proefschrift]*
3. Standardization of medical psychiatry unit designs is necessary to advance the evidence base on their costs and effects. *[dit proefschrift]*
4. For setting admission criteria for medical psychiatry units, the competence level of the available nurses is more relevant than that of the available doctors. *[dit proefschrift]*
5. Present research into medical psychiatry units does not inform their appropriate organization as it fails to link aims, design, and outcomes. *[dit proefschrift]*
6. The distribution of resources during the coronavirus crisis is based on illness acuity rather than on costs and effects.
7. Quality documents and indicators are dictated by the interests of stakeholders.
8. Network care is an ineffective solution for the problems caused by healthcare fragmentation.
9. The case for integrated care for mental and physical health is as much about equal opportunities as it is about economic opportunities.
10. A meat tax is an excellent instrument to promote health and offers a quick way out of the nitrogen crisis.
11. In terms of return on investment, the Netherlands should invest in Italy's economic preservation rather than in the preservation of the Royal Dutch Airlines.