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## **Risk stratification in Dutch primary care: a promising approach to manage population health**

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## Stellingen

behorende bij het proefschrift getiteld

### **Risk Stratification in Dutch Primary Care** *A Promising Approach to Manage Population Health*

1. The use of electronic medical records data from primary care in Population Health Management approaches is very valuable, especially if primary care acts as gatekeeper (*this thesis*).
2. The effect of tailor-made approaches based on patients' individual risks has proven its value in reducing hospitalization and subsequently high healthcare costs (*derived from Soto-Gordoa et al., Health Serv Res 2019; 54(2):466-473*).
3. Assigning risk scores to individuals based on analysis of primary care electronic medical records is an easy and practical way to perform risk stratification on a large scale (*this thesis*).
4. Efficient risk stratification tools can be used to successfully select appropriate patients for specific interventions such as care management programs (*derived from Freund et al., Popul Health Manag 2012; 15(2): 119- 124*).
5. As *risk stratification* and other terms such as *population segmentation* are now used interchangeably, studies contributing to a generalized definition of the term *risk stratification* will be of great scientific and practical value (*this thesis*).
6. The registration of social problems in primary care should be emphasized and stimulated (*this thesis*).
7. Enrichment of primary care data with social determinants can add great value to risk stratification approaches in primary care (*derived from Shadmi et al., BMC public health 2011; 11(1), 1-8.*).
8. Differences in health outcomes between ethnic groups, indicate the great potential of ethnicity in risk stratification algorithms (*derived from Uitewaal et al., Eur J Public Health 2004; 14(1):15-8.*).
9. The success of risk stratification algorithms only reaches as far as the trust healthcare professionals put into such models (*derived from Wagner et al., J Am Board Fam Med 2019; 32(4):585-595*).
10. As *the Bible* says that anything is possible for those who believe, and I believe that in ten years risk stratification can be implemented on a large scale in Dutch primary care, 2033 should be a great year for the health of our population.
11. A cross-Atlantic move on your seventeenth, can have great implications for your personal and professional development; you might even end up writing a dissertation (*personal experience*).