

Since the chancellor is involved in many activities at both campus and system levels and simply is not in a position to give direction to numerous specialty functions, the impact of the recommendation would be to lower the number of positions reporting to the chancellor by one.

The report also revealed the outpatient clinic serviced 56,276 patients for the period 1970-71, of whom 93 per cent were students.

The report suggested students should participate in the assessment of benefits received from each program, since student fees fund these programs.

According to a survey conducted in April, 1971, the University Health Center was rated excellent or good by 82 per

cent of about 900 respondents. Only 18 per cent rated it fair to poor.

The report noted the average stay in the University Health Center hospital is 2.7 days. The annual occupancy level for the 32 beds during 1970-71 was about 17.5 per cent. Summer occupancy was about 5.3 per cent.

The report suggested physical space at the center should be reallocated. "Since the hospital is greatly underutilized, a portion of this space should be allocated for other purposes such as offices or patient conference rooms," it said.

The report also recommended an over-all space utilization plan be developed by University Health Center staff "with outside assistance if necessary."

The University Health Center staff

gives medical care to UNL athletic teams, and an active medical research program is carried out in such areas as causes of athletic injuries, physical fitness and mental health.

The report also noted that "the basis for charges in some areas is questionable" and presents the sources of funding.

The expenditure for "athletic medicine" for 1970-71 was \$84,038, the entire sum funded by the Athletic Dept. The expenditure figure is topped only by that for the clinic and hospital (\$336,760 funded by \$286,530 from student fees and \$50,230 from patient charges) health education (\$87,145; funded by \$35,370 from student fees and \$51,775 from the general account) and the pharmacy (\$103,555; \$99,936 from student fees.)

The report noted further that the physical therapy expenditure for 1970-71 was \$26,881. Student fees provided \$25,191 of the funding, but the report said "a considerable amount of physical therapy effort is involved with the Athletic Dept., yet the major funding source is student fees."

The report recommended budgeting for University Health Center programs be developed in accordance with the new organization structure and charges be made to users as appropriate. Budgeting for these programs should then be done individually and should include a review of recipients of major benefits from a program and charges made accordingly.

The report also compared the cost per 1,000 students at five Big Eight universities with the cost at UNL. From the exhibit, the Universities of Colorado and Kansas apparently expend greater amounts per 1,000 students than UNL, Oklahoma, Kansas State and Missouri spend lesser amounts.

The report also noted collections of student accounts receivable is a relatively costly effort. It costs about \$2,500 to collect \$225,000 (about 1 per cent), and the Health Center writes off \$4,000 to \$5,000 a year in bad debts.

University Health Center accounts receivable and collection activities, the report suggest, should be centralized in the bursar's office. Under this plan the University Health Center would have to supply the bursar with information on student accounts receivable. Outpatient services would be provided on a cash basis.

The Board of Regents recently urged establishment of a Student Health Task Force to study the University Health Center activity. The 10-person force has been formed and has met a few times, but so far has been concerned with defining its job.

