CHAPTER-6

Conclusion and Suggestions

The main objective of the medical college library is to acquire relevant health science literature and information, process, arrange and retrieve the needed information for timely utilization by different users. Although the objective of the medical library has remained unchanged, significant changes in both the user population and the means of access have taken place in the past few years. The emergence of information technologies and their use in the operation of library activities has paved the way for scientific management of medical science literature and their pinpointed retrieval and demand as well as in anticipation.

There is no easy way to organize a grand medical college library. Quality education is impossible without a quality library. You cannot have a quality faculty without a quality library. Library is a vital to proper exploitation of our intellectual resources. The library is essential to the maintenance of free access to ideas, and the function of untrammeled mind. In the absence of proper care, vigilance and organization, it will simply be an ornamental building and a store house of publications, and not a library or a center of knowledge.

Physical Facilities:

It is essential that the libraries are air-conditioned properly illuminated and ventilated. Basic facilities, such as a canteen, drinking water, toilet should be made available. Guide charts containing information in all sections of the library should be displayed at a prominent place. There should be separate reading room for staff and students, cubicles for research scholars. Each row of racks should have a guide
indicating the arrangement of books and journal's. Strict silence should be observed to make the atmosphere congenial to studies. Smoking should be prohibited for health and safety reasons.

**Library committee:**

The study reveals that most of the medical college libraries are governed by a library committee which is mostly composed of the officials of the concerned colleges. The functions of a library committee are to take decision for purchasing books, journals and other library equipment etc. binding of journals, weeding out publications and other routine work of the library. Although the medical college librarians are the convenors of the committee, they have very little say in the decision – making process. There is no fixed periodicity for holding the meetings. Though there is schedule for convening the library committee meetings at fixed intervals, this is hardly adhered to. Since the library committee is also empowered to select publication for purchase, the delay in holding meetings results in late approval of purchases and by the line of order are placed many of the latest publications go out of stock, thus creating an imbalance in the collection development leading to non – availability of the latest material in the library.

**Collection development:**

The study reveals that the collection of books of the medical college libraries is managed in a more sound manner, although they do not maintain a balance in acquiring publication in the various subjects required by their prospective users because of internet deficiency in the book selection process. The following actives are essential for collection development.

(a) A balanced acquisition policy should be adopted keeping in view the numbers of users in a particular subject. A record of visitor with their specialty
indicating the arrangement of books and journal's. Strict silence should be observed to make the atmosphere congenial to studies. Smoking should be prohibited for health and safety reasons.

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(a) A balanced acquisition policy should be adopted keeping in view the numbers of users in a particular subject. A record of visitor with their specialty
and demand should be maintained to help in a balanced collection of publications in different specialties.

(b) The library committee should formulate basic guidelines for collection development in the library keeping in view the aims and objectives of the concerned colleges. Thereafter, the libraries should be authorized to the guidelines issued by the committee. This will facilitate the constant flow of publications in the library as and when they are published or available in the market.

(c) From the users point of view, the majority of college library users complained that there is a great time lag between the publication of the journals and their receipt in the library. They have suggested that arrangements for airlifting be made to ensure speedy delivery of at least weekly publication. Efforts should be made to complete the missing issues of journals.

(d) There is a feeling among users that the periodicals sent for binding are not made known to them promptly and a lot of inconvenience is caused in searching the required material. It is suggested that multiple copies of the list of journals sent for binding be prepared and made available at the reference desk so that the time and energy of users as well as of staff can be saved. The process of binding should also be made expeditious for quick delivery of the bound materials. The majority of the users suggested that journals should be sent for binding during the vocation period of the medical colleges.

(e) A few users suggested that books and journals should be shelved properly and regularly as most after they are not found at their proper location in the shelves.
Manpower:

Reading materials may be in existence in a library but cannot be utilized by users unless there is adequate manpower to service and make them available. The library staff acts as a liaison between the health science information and the reader. The usefulness of a library and its collections depends on the initiative and efficiency of the library staff.

The study reveals that most of the medical college libraries are understaffed and are ill-equipped to cope with the responsibility assigned to them.

Finance:

The problem of inadequate finance is common to many medical college libraries in West Bengal. It is hard to keep pace with the onslaught of medical literature, but even to have the best of the lot in the way of monograph, periodicals, and pamphlets means larger budgets.

The standards for budgets for different types of medical libraries formulated by the MLAI in 1983 are;

"Till such time the library of a college, research and training institution, hospital or directorate has developed its basic collection, the Annual Recurring Expenditure should be at least 10% of the total budget of the institution. After the basic collection has been developed, the annual recurring expenditure should be a minimum 6.5% of the total budget of the institution. It also recommended that based on specific needs of the institution concerned adequate provision should be made for back volumes, reference tools, audio visual materials/equipment, standard books, etc. in the capital budget.

In relation to the document fund allocation, following proportion has been recommended irrespective of whether it is a college, institution, hospital or
Library services:

During the survey it has been observed that due to non-availability of mechanical device, financial constraints, lack of proper administrative structure and professionally trained staff most of the medical college libraries are restricting themselves to traditional and conventional functions. Frankly speaking, the concept of reference, documentation, and information service is missing. Very often a visitor may see a counter with a sign board 'Reference section' but, usually, it is without proper reference personnel. It can be said that some libraries are like rudderless ships sailing at the mercy of the winds.

The library is a service institution and whosoever comes to it, desires to have some service from it, either a loaning of a book, short term reference or a long term query of verification of citation or a bibliographical requirement. The nature of service also differs from library to library, but there are some services which are common and must be provided by all medical college libraries.

Every medical college library had photocopier for the users. But there is no uniformity in rates charged for supply of photocopies with regard to the supply of photocopies of reference, the users desire that photocopying facilities should be made available at cheaper rates and without loss of time.

Reference service in the libraries should be provided by properly qualified and trained library staff. Health clientele has shown much dissatisfaction an accurate restriction of access to the periodical section prevalent in some libraries. They are of the opinion that this is not the proper way to curb the unfortunate practice of removing page from bound volumes of periodicals. One has to wait for quite long for getting journals because of this restriction which in any case did not prevent some users from mutilating the journals. It would be
rather appropriate to introduce some other effective measures such as stricter checking proper vigilance etc. However, the open access system should be continued. A few medical college libraries are having the closed system. It is therefore, suggested that all the libraries be requested to have open access as it would chance the utilization of medical science literature, after all, publications are acquired by the libraries for use and not keeping them intact.

Regarding various indexing and abstracting journals, they have suggested that 'Index Medicus' and 'Excerpta Medica' be procured by air mail to save time.

User suggested the following methods which are given according to their preference.

(a) Librarian helping individual users on their particular project;

(b) Extensive special guides on how to use stacks, reading rooms, and other documents of the library.

(c) Librarian giving classroom demonstration to assist in proper use of the library.

(d) Conducting library tours for new comers.

**More Trained Stuff:**

To cope with efficient acquisition and distribution of the accumulating medical literature, trained stuff is very essential. The medical college managing committee provides only are professional in each of the libraries. Obviously, this is inadequate, especially in shifting libraries, even in normal time. With the reorganization work on hand there is little time to train assistants or to guide and help staffs and students to the desired extent in the use of library and literature.
Special Training for Medical College Librarians:

While the techniques of routine procedures do not very much between the medical and general library the nature of the service varies due to the difference in the kind of material and type of clientele with which each has to deal. The medical college librarian would be able to render better service if he were familiar, in addition to library techniques, with medical resource and their use in medical education and research with bibliographic organization and documentation in the field, with current trends in medicine, with medical terminology and so on. For this purpose the librarian need an advanced stages of library training those who desire to become medical librarians are provided with special syllabus, given opportunities to attend lectures on medical history. Recent progress surveys, etc. and given practical observation in the libraries for special method of literature searches and documentation work, it would be quite sufficient for the candidates to build and by further reading and experience. Library professional should be familiar with the concerned subject, current trends of research and development activities in the domain of medical sciences.

Co operation:

The absence of excellent but none – too – easily accomplished bibliographic control, word wide documentation, etc. would be less keenly felt in media if fuller cooperation among librarians and libraries in much smaller areas, such as a city, a state or country could be achieved. Cooperation can be attested at the acquisition as well as distribution phase. While there is no question about libraries individually acquiring student texts, essential reference works, and periodicals the acquiring of costly sets, advanced and highly specialized
material, and none-too-often used works should not be undertaken by the individual library; here, cooperative purchase would be beneficial, especially when budgets are limited, stock-in-service small, and duplication in to be avoided.

**Computer Internet:**

Medical libraries should enhance resources and improve their services with the help of information communication technology (ICT) to serve their users in a more effective and efficient manner. Networks and consortia have been developed to assist the library professionals in resources sharing, interlibrary loan and providing continued education programmes both for health care providers the serve and for themselves also. The recent developments and application in the field of ICT has changed the whole world into a global information village. The impact of computer and ICT can be seen the retrieval of information from the unlimited number of records without loss of line. Most of the users are using internet facility for their information requirement. Most of the users suggested that library should be computerized and Local Area Network (LAN) should be established at an early date by the each library. The use of CD-ROM's for resource sharing facility should be encouraged by the libraries.

**Recommendation for improvement:**

(1) Medical college libraries need highly skilled and specialized librarians. All libraries should be headed by a professional librarian. In addition, attractive scales, appropriate incentives higher official status should be offered to attract qualified professionals.

(2) The medical college libraries must be supported with adequate budgets to improve their collection services, equipment, and furniture.
(3) All medical college libraries need a collection development policy to guide the proper and systematic growth of the collections in all formats.

(4) Intensive and comprehensive training programs for professional and support staff should be offered on an ongoing basis. Training should focus on providing information services and applying, and using the latest information technology. In addition, professionals should be encouraged to attend conference, workshops, seminars, and internship abroad to keep abreast of new developments.

(5) Medical college libraries cannot continue to use traditional work methods. These libraries must automate their operations and services with currently available technology. All medical college libraries in West Bengal should be connected to the internet to provide electronic access to remote and widely distributed electronic information.

(6) In addition to basic information services, medical college library should provide bibliographic instruction, current awareness service, and access to full text medical journals and MEDLINE, available freely over the internet.

(7) To strengthen resource sharing, a cooperative national network of all medical college libraries should be established.

(8) Library hours should be increased to provide information to the potential users.

(9) Certain uniform standards in the field of collection, development, physical facilities, classification and cataloging, manpower, budget and services should be developed according to the present environment.

(10) There should be a functional library committee which makes rules, regulation for the overall development of the library as well as library staff.
(11) To establish good rapport between the user community and library personnel, a proper paradigm for the same, should be developed.

(12) In the first changing information technology environment there is a need for users’ orientation. Each organization should make it a point to design and update the user manual and user orientation training periodically.
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Network among Medical College Libraries and Other Related Organization: A Model