5.1 Findings

The research was conducted to find out whether the medical and the dental colleges in Karnataka state meet the standards prescribed by the RGUHS and professional library associations with regard to resources, services and practices in the libraries. The study has showed that there are many deficits and shortcomings in the resources available and services provided by the libraries supporting the medical and dental colleges which affect equally the students, teachers, clinicians, researchers and others involved in both health care training and health care delivery. The following is a summary of the major findings which is discussed under relevant heads.

5.1.1 Programmes supported

1. About 92 per cent of the libraries are part of private institutions. It includes 84 per cent medical college libraries and 97 per cent dental college libraries and all composite libraries.

2. Thirty-six per cent medical college libraries belong to undergraduate institutions and the rest 64 per cent are part of the colleges conducting both undergraduate and postgraduate programmes in medical sciences. Similarly, 35 per cent dental college libraries belong to undergraduate institutions and 65 per cent are part of the colleges conducting undergraduate and postgraduate programmes in dental sciences. All the composite libraries have supported undergraduate and postgraduate programmes in both medical sciences and dental sciences.
Sixty-eight per cent medical college libraries have also supported academic programmes in allied health sciences in addition to supporting the medical sciences programmes. Compared with this, 16 per cent dental college libraries have supported such programmes. All the composite libraries have supported the academic programmes in allied health sciences in addition to supporting medical and dental sciences programmes.

While the dental college libraries supported only certificate level programmes, the academic programmes supported in allied health sciences by the medical college libraries and composite libraries ranged from certificate level to postgraduate level.

Among the libraries which supported academic programmes in allied health sciences, the dental colleges supported a single programme of certificate level. While most of the medical college libraries supported para-medical programmes and often undergraduate programmes in allied health sciences, all the composite libraries supported several programmes in allied health sciences.

### 5.1.2 Collections

The average number of books held by a medical college library is 15091 i.e., 13 per user, whereas in a dental college library the number of books held is 3760 i.e., seven per user. In a composite library the average number of books held is 32390 i.e., 10 per user.

The average print journals subscribed by a medical college library were 128 whereas they were 43 in dental college libraries and 329 in composite libraries. There is a huge difference in the number of journals subscribed by the medical college libraries, dental college libraries and composite libraries.

There is a great deal of difference in the size of AVM collection in all the three types of libraries. The collection of AVMs in dental college libraries is relatively less when compared with other two types of libraries.

E-journals and e-books are not yet quite popular among the medical and dental college libraries. It is evident from the fact that except for two composite libraries none of the libraries have e-journals other than what is accessible under HELINET Consortium.
10. Taking membership of larger libraries like university libraries provides the libraries supporting medical and dental colleges to access the resources of such libraries. However, only 10 per cent libraries including 8 per cent medical college libraries, six per cent dental college libraries and 50 per cent composite libraries have membership of other libraries.

11. Inter-library loan (ILL) agreements are very relevant in case of libraries supporting medical and dental colleges as their requirements are wide and varied. ILL is very useful to access books which are not regularly required. Only 32 per cent medical college libraries, 13 per cent dental college libraries and 50 per cent composite libraries have ILL agreement with other libraries.

12. Library networks play a very important role in providing access to the collections of network members. While network membership provides an opportunity to share its resources with other network members and thus increase the effectiveness of the collection, network membership also allows a library to access the collection of other libraries in the network. Only eight per cent medical college libraries, three per cent dental college libraries and 25 per cent composite libraries were members of library networks.

5.1.3 Access

13. Classification and cataloguing hold key to effective use of the institutional collection. Ten per cent libraries including eight per cent medical college libraries and 13 per cent dental college libraries did not classify books and other non-serial publications. Ten per cent libraries have not maintained catalogue of the collection. Eight per cent libraries including four per cent medical college libraries and 13 per cent dental college libraries have neither classified nor catalogued the collection.

14. List of subject headings which is well recognized in the library profession is used only in 38 per cent libraries. This includes 48 per cent medical college libraries, 26 per cent dental college libraries and 75 per cent composite libraries.

15. Computerized catalogue has become a basic requirement in modern libraries. While computerization made cataloguing work easy for the library staff and
made search simpler, it added to the effectiveness of use of the collection. More than half (56.67%) the libraries did not computerize the catalogue of library’s holdings. It included 12 (48%) medical college libraries, 21 (67.74%) dental college libraries and one (25%) composite library.

16 Most of the libraries have catalogued only books. Seventy per cent libraries did not catalogue all the materials available in the collection. It includes 60 per cent medical college libraries and 87 per cent dental college libraries. Forty-eight per cent libraries did not catalogue the collection available in academic departments resulting in lack of awareness among user communities regarding the institutional collection spread across the campus. It reduces the chances of the student and staff communities using the collections available in various departments due to ignorance regarding the availability of the materials.

17 Computer facility is basic requirement in the libraries of medical and dental colleges to facilitate access of e-resources and for other academic activities. Adequate number of computers is essential in order to ensure adequate access opportunity to both students and staff. RGUHS Standards prescribed that the libraries should maintain one computer for every 20 undergraduate students and one computer for every five postgraduate students. None of the libraries met this quantitative requirement.

18 Campus-wide computer network connecting library to other departments in the college and hospital is essential. However, only 40 per cent medical college libraries, and 68 per cent dental college libraries had campus-wide computer network. Only 23 per cent of total libraries had both computerized catalogue and campus-wide computer network. While 75 per cent composite libraries had OPAC service in the academic departments, only six per cent dental college libraries had it in the departments.

19. Internet access facility in academic departments and workplaces provides convenience of access and increases the use of online resources. However, 40 per cent medical college libraries and 52 per cent dental college libraries did not have Internet connectivity in the academic departments and workplaces of the institutions.
20 About 78 per cent libraries did not allow access to e-resources outside the library. This, to a great extent has reduced the effectiveness of the e-resources as the user communities of the medical and dental colleges have been denied access from their offices, homes and hostels.

5.1.4 Collection development practices

21 A written statement on collection development is necessary to guide a library while selecting, acquiring and maintaining the collection. None of the libraries had maintained written collection development policy.

22 It is the primary responsibility of the library to make available a book required as soon as a user expresses desire to read the same. It demands the library to acquire books on regular basis. Even though this aspect has been stressed in the RGUHS Standards, 32 per cent medical college libraries and 16 per cent dental college libraries acquired books at intervals decided by the institutional administration. None of the libraries of the government colleges acquired books as and when there were demands.

23 Recommended textbooks should be available in adequate numbers so that the users can access them. The RGUHS Standards have prescribed to maintain recommended textbooks to students in the ratio of 1:10. Only 45 per cent libraries met this specification including 40 per cent medical college libraries, 52 per cent dental college libraries and 25 per cent composite libraries.

24. Only 34 (56.67%) libraries evaluated and updated collection. It included 52 per cent medical college libraries and 55 per cent dental college libraries. The libraries evaluated the collection without written collection development policy. Constituting faculty committee is one of the most appropriate means to update collection in academic libraries. This aspect has been prescribed in the RGUHS Standards. Only 27 per cent libraries constituted periodically expert committees to assess and update the collection. While 50 per cent composite libraries followed this approach to update collection, only 28 per cent medical college libraries and 23 per cent dental college libraries constituted faculty committees.
25 Written policy regarding replacement of old books helps a library to consistently replace old books and minimizes ambiguity while making decisions in this regard. Similarly, written weeding policy ensures weeding of unwanted collection and reduces biased decisions made during weeding of collection. The RGUHS Standards have prescribed the development of policies for replacement and weeding of the collection. No library found to have developed these policies.

26 While 35 per cent libraries weeded some books over a period of time, none weeded journal back volumes. All the libraries which weeded did so only when the books were too old or were beyond repair. Libraries did not weed for reasons of poor use. None of the government colleges weeded books.

5.1.5 Services

27. Long hours of functioning of the libraries leads to increased use of the library facilities. RGUHS Standards wanted the libraries to function for at least 12 hours on all days. While 82 per cent of the total libraries worked for 12 hours on weekdays, only 68 per cent dental college libraries worked for 12 hours on weekdays. Thirty per cent of the total libraries including 55 per cent dental college libraries did not open on Sundays and other holidays. Only 10 per cent libraries including 12 per cent medical college libraries and three per cent dental college libraries worked for 12 hours on Sundays and other holidays.

28. The RGUHS Standards specified six minimum services to be provided by every library. The minimum services included document lending, in-house reading/reference facility, photocopy service, OPAC, reference service, and literature search service. Only 10 per cent of the libraries including eight per cent medical college libraries, 10 per cent dental college libraries and 25 per cent composite libraries provided all the six minimum services.

29. Even though all the libraries had lending service, only 63 per cent libraries lent books to undergraduates students. While 84 per cent dental college libraries lent to undergraduates, only 40 per cent medical college libraries and 50 per cent composite libraries lent to undergraduates. Thirty per cent libraries
neither lent to undergraduates nor worked even for one full shift on Sundays and other public holidays

30. Literature search service is an essential service in the medical and dental colleges. It has direct impact on the use of Internet-based literature. It was found that 76 per cent of medical college libraries and 84 per cent of dental college libraries did not provide literature search service. Thirty-eight per cent of libraries did not train users in literature search. Thirty-three per cent of libraries neither conducted search service nor trained users on self-search service. This is in spite of all the libraries having e-resources.

31. Thirty-three per cent of libraries including 32 per cent of medical college libraries and 39 per cent of dental college libraries did not provide even general orientation which introduces a new user to the library facilities and services.

5.1.6 Facilities

32. RGUHS Standards prefer the libraries supporting medical and dental colleges to be housed in independent buildings. Only 40 per cent of the libraries have been housed in independent buildings. It included 48 per cent of medical college libraries, 39 per cent of dental college libraries, and all the composite libraries.

33. Only 73 per cent of libraries had seats to accommodate minimum 30 per cent of the total number of students, the limit prescribed in RGUHS Standards. Separate rooms are essential for library staff to function efficiently. Indian Standard IS 1553 1989 (Bureau of Indian Standards 1989) which deals with primary elements of library buildings has specified the rooms required in the academic libraries. The study found that while 12 per cent of libraries could not provide a separate room even to the head of the library, 62 per cent failed to provide separate room to the professional next to the head of the library. Only 57 per cent of libraries had separate technical section and 62 per cent of libraries had the information centre. While few medical college libraries and composite libraries failed to provide rooms required for various purposes, most of the dental college libraries failed to provide rooms specified in the Indian Standard. While 19 per cent of dental college libraries failed to provide room even to the head of the library, 87 per cent failed to provide separate room to
the professional next to head of the library. Only 38 per cent dental college libraries had separate technical section. The information center has become an integral part of the library service in medical and dental colleges and the professional regulatory bodies have prescribed availability of such facility within the library. It was found that only 48 per cent dental college libraries had information centre in the library premises.

34 Libraries are expected to provide certain basic amenities like drinking water, wash basin and toilet facilities. While few libraries did not have one or the other facility, 26 per cent dental college libraries did not have toilet facility.

35 Alternative power supply is essential for the libraries located in places which witness regular power failure and power cuts. Alternative power supply ensures uninterrupted service. Even though power failure is very common in Karnataka state, 20 per cent medical college libraries and 48 per cent dental college libraries did not have source of alternative power supply.

36 Security measures to prevent theft and fire accidents are essential part of library planning and management. While more than half (51.67%) libraries did not even fix wire fabric on the library windows and ventilators to prevent theft of the collection, 60 per cent libraries did not have fire extinguishers in the library premises. While only 17 per cent libraries had deployed fire warning system to avert fire accidents, only 33 per cent libraries had emergency exit.

5.1.7 Budget

37 Preparing annual budget allows the library to plan and propose its expenditure in the forthcoming year. Budget helps the libraries to utilize allocated funds efficiently and properly plan spending. While 42 per cent of the total libraries did not prepare annual budget, 52 per cent dental college libraries failed to prepare it. None of the libraries which prepared the annual budget had written policies regarding assigning responsibility for the preparation of budget.

38 The RGUHS Standards stipulate institutions to allocate six to seven per cent of the revenue budget towards annual budget of the library. Ninety-seven per cent libraries refused to disclose institutional revenue budget. It indicates...
inconsistent and unacceptable practices of the medical and dental colleges in allocations towards library budget

39. The RGUHS Standards prescribed that the libraries should develop written policies for distribution of budget among the books and journals and required the libraries to spend on books and journals in the ratio of 30:70. While no library had developed written policies for the distribution of funds, spending in 40 per cent libraries did not conform to the requirements of RGUHS Standards.

40. None of the 18 libraries which provided the details of money spent towards the professional development of staff spent two to five per cent of library’s annual budget, the limit set in the RGUHS Standards. Except for one dental college library, all the libraries spent less than 1 per cent of the annual library budget.

5.1.8 Staff

41. The staff structure provided in the RGUHS Standards required the medical and dental colleges to have minimum 14 library staff in various categories. The study found only 18 per cent libraries having 14 staff. While 12 per cent libraries had just one to two staff, 50 per cent libraries managed with less than 8 staff. Nearly quarter (22.58%) of dental college libraries had only one to two staff and altogether, two-third (64.52%) of dental college libraries had less than four staff. While only 24 per cent medical college libraries had 14 staff, none of the dental colleges had 14 staff.

42. The RGUHS Standards stipulated the appointment of minimum four professional librarians in the medical and dental colleges. Only 16 per cent medical college libraries had four professional librarians. While none of the dental college libraries and composite libraries met this requirement, 52 per cent dental college libraries had only a single professional librarian.

43. RGUHS Standards had prescribed the appointment of five qualified assistants holding bachelor degree in library science. Even though 17 per cent libraries had employed minimum five assistants, most of them did not possess the qualification prescribed. Eighty per cent libraries did not have even a single...
assistant who possessed the qualification prescribed. None of the libraries had five assistants with prescribed qualifications. While twenty-three per cent dental college libraries did not appoint even a single assistant, 64.52 per cent of the dental college libraries had only one to two non-professional assistants.

44 Even though 67 per cent libraries had reported that they had provided either mediated search service or self-search training or both, only 45 per cent libraries had staff trained for this task. Sixty-one per cent dental college libraries had reported of providing search service. However, only 26 per cent had the staff trained to conduct searches.

45 Service of professional staff should be available during the working hours of the library. This aspect is specified in RGUHS Standards. Only 37 per cent libraries had the professional staff available during the entire opening hours of the library.

46 The RGUHS Standards preferred the heads of the libraries of medical or dental colleges to possess Ph.D. or postgraduate diploma in health sciences librarianship (PGDHL) or any equivalent certificate. Heads of only five per cent libraries met this requirement. The RGUHS Standards prescribed that the professionals heading the libraries of medical and dental colleges should be selection grade librarians who possess minimum of 16 years of work experience in the professional field. Heads of only 48 per cent medical college libraries, 29 per cent dental college libraries and 25 per cent composite libraries had the experience prescribed.

47 While heads of 45 per cent libraries did not attend seminars or conferences at all during their professional career, those attended had attended very few seminars or conferences. Even though heads of 55 per cent libraries attended seminars and conferences, only 22 per cent presented papers. Heads of only three (5%) libraries, one each from medical college libraries, dental college libraries and composite libraries had published papers in peer reviewed journals.
48 Heads of only 33 per cent libraries have taken the membership of professional library associations. However, most of them have taken the membership of only local associations. Very few had the membership of national bodies.

49 The RGUHS Standards prescribed the appointment of professionals on the UGC/AICTE pay scales. As per this requirement, the medical and dental colleges should appoint head of the library on the pay scale of selection grade librarian, another librarian next to the head of the library on the pay scale for senior grade librarian, and two more professionals on the pay scale for librarian. None of the libraries met the requirements of RGUHS Standards with regard to the appointment of professional librarians on the pay scales prescribed. While heads of three (12%) medical college libraries were placed on the pay scale for selection grade librarian, heads of none of the dental college libraries and composite libraries were placed on the pay scale prescribed. Among three medical college libraries where the heads of the libraries were placed on the pay scale prescribed, professional next to the head of only one library was placed on the pay scale prescribed for that position. No library was found to be having two more professional librarians placed on the pay scale for librarian.

50 While heads of 75 per cent of composite libraries and 32 per cent medical college libraries were placed on any one of the three pay scales (i.e., selection grade librarian, senior grade librarian, and librarian) prescribed by the UGC/AICTE for library professionals in colleges, only 10 per cent dental college libraries placed them on any of the pay scales prescribed. The professional next to the head of the library was placed on one of the three pay scales prescribed in 50 per cent composite libraries and eight per cent medical college libraries. None of the dental colleges placed professional next to the head of the library on any of the pay scales prescribed by UGC/AICTE. The government and private colleges equally failed to implement UGC/AICTE pay scales to professional library staff.

51 Heads of 86 per cent libraries received special leave to attend seminars and conferences, 72 per cent received TA/DA to attend such programmes, and 64 per cent were given representation in institutional academic committees.
though some of the professional librarians who were placed on the UGC/AICTE pay scales, and also received few benefits which are given to the teaching faculty, did not get the right to vote in the university senate elections.

52 Only 57 per cent library heads who were placed on the UGC/AICTE pay scales got promoted to the next level as per the norms prescribed.

53 Only 20 per cent libraries had maintained job manual. While all the composite libraries had reported of maintaining such a document, only 24 per cent medical college libraries and 6 per cent dental college libraries had maintained it.

5.1.9 Administration

54 Only 12 per cent libraries reported of formulating the statements of mission, goals and objectives. Four statements received by the researcher were examined and were found to be prepared as a formality. They did not offer goals which are measurable.

55. Heads of 13 per cent libraries reported to an authority other than academic head of the college.

56 Only 68 per cent libraries had library advisory committee including 76 per cent medical college libraries, 61 per cent dental college libraries and 75 per cent composite libraries. Eighty-eight per cent of the library advisory committees were headed by the institutional head or another competent authority who had full knowledge of the academic programmes of the college and understood the requirements regarding library services. Only in case of 58 per cent dental college libraries, the library advisory committees had head of the library as member-secretary. Students got representation in the advisory committees of only 34 per cent libraries.

57. Only 76 per cent libraries had conducted annual stock verification. It included 72 per cent medical college libraries, 87 per cent dental college libraries and 50 per cent composite libraries.
Only 13 per cent libraries framed written policies regarding loss of books. While loss of books was allowed in 71 per cent libraries, loss of prescribed limit i.e., five books per thousand circulated was allowed in only 18 per cent libraries. While all the government colleges allowed loss of certain number of library books, only 47 per cent private colleges allowed loss.

While staff of 60 per cent medical college libraries were not penalized at all for loss of library books, staff of 28 per cent medical college libraries were penalized for loss of every book. Similarly, though staff of 39 per cent dental college libraries did not hold the staff responsible for loss of books, 35 per cent held them responsible for loss of books.

Performance evaluation is important for the libraries to identify the deficiencies and then determine what needs to be done to correct the deficiencies. Only 23 per cent libraries evaluated performance.

Collection of statistical data about library activities on regular basis is crucial to find the quality of the library. The collected data helps to make informed decisions. However, only 27 per cent libraries collected statistical data. While all the composite libraries collected the data, only 32 per cent medical college libraries and 13 per cent dental college libraries collected it.

### 5.2 Testing of the hypotheses

**Hypothesis 1**

*More than half of the libraries do not meet even 50 per cent of the specific measures prescribed in the RGUHS Standards*

The RGUHS Standards has provided both descriptive and prescriptive standards. Forty-eight prescribed standards had been identified to assess the quality of libraries. Tabulation of the responses (Table 94) have shown that only six libraries i.e., 10 per cent of the total libraries have met more than 50 per cent of the prescribed measures. Hence, this hypothesis is accepted.

**Hypothesis 2**

*Medical college libraries perform better than the dental college libraries in meeting the RGUHS Standards*
Four per cent of the medical college libraries met less than 25 per cent of the specific measures prescribed in RGUHS Standards. When compared with this, nearly 10 per cent of the dental college libraries met less than 25 per cent of the specific measures. While 36 per cent of the medical college libraries met more than 40 per cent of the specific measures, about 23 per cent of dental college libraries met 40 per cent criteria. Twelve per cent of medical college libraries met more than 50 per cent of the specific measures. However, only 3 per cent of dental college libraries met 50 per cent of the specific measures. These results prove the hypothesis to be correct. Hence, the hypothesis is accepted.

**Hypothesis 3**

*The private college libraries meet the standards more than the government college libraries*

Table 94 shows that 80 per cent of libraries which are part of the government institutions have not met even one-third of the specific measures as against 31 per cent in case of private college libraries. Only 20 per cent of the libraries in government sector met 40 per cent of the measures and none of them met 50 per cent of the measures. As compared with this, 23 per cent libraries in private sector met 40 per cent measures and 11 per cent met at least 50 per cent of the specific measures. This proves the third hypothesis to be correct. Hence, this hypothesis is also accepted.

**Hypothesis 4**

*The operations of libraries supporting the medical and dental colleges are not based on written policies*

Written policies are essential to maintain consistency in library practices. The RGUHS Standards prescribe framing of policies for library operations. This aspect was verified through a question (Question 49). The libraries were asked regarding the written policies for collection development, replacement of old books, weeding of the collection, loss of books, preparation of library budget, distribution of budget between books and journals, manual of job description, library’s mission, and goals and objectives. The responses of the libraries indicated that only 20 per cent libraries had framed manual of job description (Table 81), 12 per cent had written statements about the library’s mission, goals and objectives (Table 82), 13 per cent libraries had written policy for loss of books (Table 89). None of the libraries had developed written...
policies for other areas required. Hence, the hypothesis regarding the development of written policies is accepted.

5.3 Suggestions
The present study has showed that while few libraries have performed relatively well in terms of resources and services, many have not performed well. As the libraries are increasingly trying to improve their image as service institutions, users expect the libraries to understand their requirements and provide the best service that is possible. It is not just about how much money is allocated or spent on staff or information resources, it is also about increasing the effectiveness of the library through acquiring materials which are really needed. It is also about understanding new requirements through application of different approaches.

The problem of improving the performance of a medical or dental college library cannot be solved either by the library or college administration alone. The institutional administration and the library staff have to work together to understand the problems relating to the library and to make it a powerful force in the institution which effectively contributes to both academic and health care programmes. There are also other important players including the regulators of medical and dental sciences education, and the health sciences library profession who are directly and indirectly responsible for performance of the libraries in medical and dental colleges. A close co-ordination and co-operation among all these four groups can change the quality of libraries. The study has offered suggestions to each of these groups based on the findings and observations.

5.3.1 Role of college administration
Institutional administration plays very important role in the performance of a library, both directly and indirectly. While it is directly responsible for providing the building, resources, staff, and funds, its attitude towards the library and library staff influences practices of the library. The following suggestions have been offered to the institutional administrations to implement:

1. The allocation of space for different services and activities, space layout, size of different rooms, adopting new technology, future expansion, security aspects and overall ambience should be kept in mind while planning a library building. Whether it is an independent building or part of a building, the planning process of the library including decisions regarding its location
should be made by an expert team which also includes experienced library professionals. Decisions regarding the designing aspects of medical and dental college libraries in India, especially in the private sector, are generally made without involving library professionals. Often the managements and the architects even do not know that the librarian has an important role to play in the library building plan. It is important for both the management and the architect to understand that the library building planned with the advice of library experts helps to minimize the lacunae in library’s plan otherwise would have occurred. The library professional will be able to advise the architect regarding space requirement and functional aspects. It is also advisable that the architect assigned with designing a library either as part of a building or independent structure should consult the Indian Standard IS 1553 to understand the basic elements of library building.

2. The college administration should ensure appointment of adequate staff for various positions so that library functions efficiently and provides the services desired by user communities.

3. It is important for every college to develop its own formula to calculate the number of staff required in libraries. Staff formula should be based on the actual requirements and developed in consultation with library staff.

4. Institutions need to recognize the role of qualified and competent staff in developing quality libraries. It is necessary for the institutions to appoint talented and well-trained professionals for senior positions.

5. Attracting talented and committed staff demands attractive pay packages. The administrations of the colleges should study the prevailing pay structure for library staff in government and aided institutions and implement the same.

6. Penalizing library staff for loss of books indicates institutions not trusting library staff. Institutional administrations should not penalize library staff unless and until it is proved that the loss is caused only due to negligence on the part of library staff.

7. Quality and comprehensiveness of the collections is an indicator of total library quality. Institutional administration should consistently fund collection updating. While it permits regular purchase of the latest books and other materials in all the relevant subjects, the administration has very important
role in ensuring proper evaluation mechanism which ensures of acquiring only relevant materials

8 Library is a spending department. Quality and size of the collections, services and staff depends on the fund allocation. It is important for the institutional administration to ensure that a fixed portion of its annual recurring budget is allocated for the library to meet its revenue expenditure.

9. Developing policies for various library activities leads to consistency in practices. Even though library staff are responsible for many of such policies, the administration should exert pressure on the library staff to frame written policies and strictly adhere to such policies.

5.3.2 Role of library staff

A library can achieve quality only through the staff who are committed to attain quality. It does not require the staff to put in too much effort to develop a good library, they need to just put into operation the already well-established principles of library administration. Often the library staff get obsession with emerging library technologies and forget the basics of library management. The following suggestions have been offered to the library staff:

1. The head of the library need to work closely with the administration. It is necessary to take the institutional administration into confidence and win its support while making important decision irrespective of whether such decision affects the institution financially or otherwise.

2. Head of the library need to be well qualified, skilled and experienced. While knowledge of the latest technology is essential, the head of the library should have sound knowledge of the principles of management.

3. Libraries should base their activities on written policies. The library staff are directly responsible for the development of written documents including mission, goals, collection development, weeding, budget preparation, fund distribution, job manual, etc. Most of the libraries do not have these policies and they perform without clear aims and guidance. Written documents are part of scientific management methods and the library staff should develop written policies.

4. Classification and cataloguing are essential to allow easy access of the institutional collection. While it is important to catalogue materials available
in different formats, it is equally important to catalogue all the collection spread across the institution

5 Orientation is the basic service necessary to introduce new users to the library resources, services and its policies. Similarly training on computers, literature search are essential to enable the users to access e-resources. Current awareness service and selective dissemination of information bring awareness among the users of available information and results in increased use of information resources. Such services bring users closer to the library staff.

6 The professionals need to update themselves on the latest trends in library profession. They also need to be involved in research and professional activities. It benefits them individually as they gain knowledge. It also helps the institution when they apply the gained knowledge to improve library services.

7. The change in relation to the library standards depends on how successfully the librarians themselves are able to use the standards. The change also is linked to the interest of head of the library who is responsible for implementing the standards.

8. Library co-operation is a wonderful means to improve access to information resources. Using alternate sources depends on the initiatives and liaison capabilities of head of the library. Inter-library loan (ILL), taking membership of other libraries, and joining library networks are good practices towards access to more information with less cost.

9 Library staff have very important role in acquiring new technologies to provide services effectively. Automation of in-house operations, extending OPAC in every academic department helps to increase the use of available resources. Online journals and books have great advantages over print materials. Library staff should take the initiative to add more e-resources to the library collection.

10 Quality of the collection is very important in a library and the library staff have vital role in maintaining quality of the collection. While the staff should take the help of subject experts to ensure acquisition of only relevant and good information materials, they should periodically evaluate the collection so that the quality is maintained.
11 Performance assessment of collection, facilities and operations should be part of the library management. Such practice helps identify the deficits. Both subjective and objective methods which are generally followed by the libraries should be utilized for assessment purposes. Maintaining statistics of both inputs and outputs is essential for this purpose and the libraries supporting medical and dental colleges should maintain statistics.

12 Library staff should maintain a very cordial relation with both the students and faculty. The collections and services should be developed in accordance with the requirements of patrons. It is simple and the best method to improve the quality of libraries.

5.3.3 Role of university and health councils

1. The RGUHS should ensure that its standards for library services in medical and dental colleges are implemented in both letter and spirit. Mere meeting the quantitative requirements towards number of books, journals and other resources is not what actually the quality is all about. It requires the RGUHS to have more criteria which accurately reflect the quality of libraries.

2. Mere developing standards and circulating them to the colleges does mean the standards are implemented. It requires thorough evaluation periodically by the university's local inspection committees. RGUHS should ensure that the visiting teams assess the libraries in the medical and dental colleges strictly against the requirements of RGUHS Standards.

3. The university should consider including experienced health sciences librarians from reputed institutions in its local inspection teams. Such members will be able to assess the quality of libraries more meaningfully.

4. The university should constitute an advisory committee which periodically comes out with changes to be incorporated in the standards for libraries.

5. One element which is considered fundamental to the success of standards is participation of all the constituencies who use or affected by the standards during their development. The RGUHS should engage the managements/administrations of the colleges in the development of library standards so that the standards become more acceptable to them.

6. For last many years, the Medical Council of India (MCI) and Dental Council of India (DCI) have not changed considerably their requirements with regard
to library facilities in medical and dental colleges. The existing minimum requirements are confined to space, number of books and staff and such standards cannot be expected to contribute to the growth and development of good libraries. Even though information and communication technologies have changed and become indispensable in modern libraries, the MCI and DCI have not included any statement with regard to these changes. These councils have no specific requirements for the libraries supporting postgraduate programmes. The MCI and DCI should issue fresh standards which help to create high quality libraries in institutions conducting postgraduate medical education.

7 This study found that many libraries failed to meet even the minimum requirements of the MCI and DCI. It indicated that the teams constituted by these bodies to inspect the libraries have not been able to identify the shortcomings appropriately. Both MCI and DCI should develop comprehensive standards with more specific criteria that reflect the quality of libraries. What equally important is to ensure the implementation of the standards through strict assessments.

5.3.4 Role of health sciences library profession

1. The professions of both academic librarianship and health librarianship have their contribution in improving the quality of libraries. They need to conduct regular training programmes on quality management practices, best practices, latest trends in academic and health sciences librarianship, performance evaluation and latest information and communication technology.

2. Developing standards is an important step towards improving library quality. It is necessary on the part of associations of health sciences library professionals to engage all the stakeholders of libraries whom the standards affect, especially the institutional administrations/managements and user communities in the standards development process. The associations need to work with the university to bring the institutional administrators and management representatives to contribute to the development of standards so that they cooperate and support to implement standards.

3. The purpose of library standards is to improve the quality of libraries. They should include statements aimed at both the managements and library
professionals. The RGUHS Standards (2006) lay emphasis on institutional managements in terms of resources, infrastructure, staff, budget and other aspects and demand less contributions from the library staff, even though staff have important role to play in implementing the standard. It is very important on the part of the profession to place more emphasis on the role of library staff in attaining quality by including more statements with regard to staff responsibilities.

4 Even though there is a trend in library profession to propagate descriptive statements, such statements seldom can be used in assessment of library quality. RGUHS Standards need more quantitative statements. Instead of specifying absolute figures, the statements regarding collections, staff, budget and other aspects provide formula similar to Clapp and Jordan formula for adequacy of collection development and Ranganathan’s formula for the number of library staff.

5.4 Conclusion

The assessment of the libraries supporting the medical and dental colleges in Karnataka has indicated that the shortcomings exist in all the libraries in many areas. Such shortcomings are not limited only to the collections, infrastructure and other resources. They are equally prevalent in services and practices of libraries. While it is important for the libraries to adopt the emerging technologies to provide effective services, it is equally important to follow what are traditionally practiced by good libraries. It is necessary for all of them to keep assessing their performance through different means and improve the quality in what they do.