(April, 2024)

Website: www.ijim.in ISSN: 2456-0553 (online) Pages 1-8

# STATUS OF MEDICAL COLLEGE LIBRARIES IN KOLKATA, WEST BENGAL: A **COMPARATIVE STUDY**

#### **Aheen Kumar Mandal**

Librarian

Government College of Nursing, Nil Ratan Sircar Medical College and Hospital, Kolkata-700014 E-mail: aheenmandal@gmail.com

and

### **Bapan Kumar Maity**

Librarian

Sammilani Mahavidyalaya, Kolkata-700094 E-mail: bkmaity84@gmail.com

**Abstract:** This paper shows notable imbalances in health science libraries among the services and resources. Enough infrastructures are not available in medical college libraries to provide better service to the medical practitioners. Here find out the status of medical college libraries regarding Information and Communication Technology in the present era. This article compared five medical college libraries among knowledge management, services and resources. Questionnaire based survey method has been taken to get effective results. Most of the medical college libraries are still lacking infrastructure and resources due to internet facilities. library automation software, library consortia, digital library facility, human resource etc. If the medical college libraries are to provide better services to the users, then need to take necessary action, improvement in library infrastructures and government funding.

Keywords: Medical college library, Information and communication technology (ICT), library consortia, library automation software.

#### 1.0 Introduction

A library, whether traditional or digital, is an essential part of every research and academic organization. A library should be a dynamic center that provides information exchange to promote available knowledge, not a static repository for information. Additionally, the special libraries acknowledge the values of Ranganathan's Law "Save the time of the user" and that of motto like "Right information, to right user at the right time ". Special Libraries exists to provide information pin-pointedly, exhaustively and promptly. For this purpose, the library should develop its own collection or repository of knowledge or should be able to depend on other sources of information. In this regard Information and Communication technology (ICT) has altered the conventional concept of libraries, posing a significant challenge to those who work there. Libraries have new opportunities to enhance their resources and services through ICT. In the twenty-first century, all general libraries, and medical libraries particularly are working to modernize their operations and activities to provide users with quick and efficient service. In order to update their knowledge and medical practitioners need accurate and timely information. Medical science is rapidly advancing in this era of knowledge. As a result, library professionals working in medical organizations face the issue of supplying the ever-growing demand for medical practitioners. Information and communication technology (ICT) is an essential part for any system to satisfy the needs of patients and providers and enhance the quality and safety of the clinical environment in today's information-intensive healthcare business.

## 2.0 Literature review

Pathan and Karisidappa (1989) assessed the health science library network and obtained a survey showing that 75% of libraries in India do not offer ILL services, indicating a lack of service ideas; MEDLINE is unknown to 68% of people; 38% continue to use closed access; 17.4% of people do not subscribe to any periodicals; 81% of libraries do not offer a bibliographic service; and 62% of libraries do not respond to reference queries from physicians. Das and Sing (2017) in their study found that newly founded medical college libraries are still in their early stages. An ICT infrastructure is required for library development. Most libraries lack electronic resources. To access e-resources, all medical libraries ought to be members of the medical consortium. Kumar

# International Journal of Information Movement Vol. 8 Issue XII

Website: www.ijim.in ISSN: 2456-0553 (online) Pages 1-8

(1993) in his paper examines the impact of modern technologies on medical libraries and ends with the challenges by librarians to implement these technologies. It also makes recommendations for the necessity and steps involved in bringing these technologies to health science libraries. Pathan (1978) found that it is now imperative that India make significant efforts to provide practitioners and other health professionals with reliable, timely, and relevant information. The only way to achieve this is to start a specialized programme in medical or health science librarianship. Darling observed that if candidates with particular training are sought, responsibility increases, and the standing of librarians naturally rise. Waris, Vasanthakumar and Nagaraja (2013) found in their paper that the union government formed a number of committees to examine the issues and look for workable solutions for implementation of medical libraries in India. Here highlights two committees and their recommendations. They are (i) the Bhore Committee; and (ii) the Sankaran committee. The National Medical Library in New Delhi was established based on the recommendation of the Bhore committee. The 1981 Sankaran Committee Report strongly recommended the development of an efficient library and information science network for the country, which became known as the HELLIS network, as cited by Rajesh Kumar Bhatt. The expansion and advancement of medical libraries is directly connected to the overall growth and development of the institution. Siddamallaiah and Butdisuwan (2009) said that in their paper that without social networks, technology helps libraries become more strengthen and improves resources and services to satisfy the maximum information needs of all the health professionals in the country. .... HELLIS (Health Literature, Library and Information Services) is a consortium that is still relevant today for inter-country collaborations, experiencing development processes together, working together on research projects, and exchanging findings. This technique saves money for regional health development and speeds up the information revolution. DIXIT (1995) in his paper said that the results of the survey show notable imbalances among the services and resources offered by the various kinds of HSLs (Health science Libraries). The imbalance found in this survey can be attributed to lack of funding and non-availability sufficient professional and non-professional staff to operate the libraries; unsatisfactory communication at institutional level; and the need for improved library services. He also said that the kind of services offered varies from library to library, but certain services are common and need to be provided by all HSLs. Therefore, it is recommended that all libraries offer the following core services: lending and consultancy of documents; reference service; bibliographical service; current awareness service; selective dissemination of information service; MEDLARS/MEDLINE search facilities; and photocopy/reprographic services. Trivedi (2007) writes in his research article, nowadays one of the biggest problems in health science institutes is knowledge management. Health science practitioners frequently work with evidence-based medicine and problem-based learning. The Health Science Librarian plays an important role in clinical practice decision-making. The paper focuses on the principles, tactics, elements, and obstacles of knowledge management, with a particular emphasis on health science institutions. Satija (2013) founds in his research article, information is all around us, and it is the most important and common entity in the world next to matter and energy. .... It is captured as electromagnetic waves, electrical pulses, or graphic visuals in both audio and visual formats. Its numerous physical, economic, political, and social attributes and functions are listed in the article. In terms of national development, information has grown to be a valuable and limitless resource. To live effectively having access to sufficient and reliable information. But for it to be applied effectively needs knowledge. Information might be all heat and smoke without any light, without knowledge.

## 3.0 Scope of the study

The study is delimited to the medical college libraries in Kolkata area. The libraries of only those Allopathic Medical Colleges are included which have been approved by the National Medical Commission (2019) to run MBBS course of study and other degrees under the supervision of The West Bengal University of Health Sciences. Present study is based on five medical college libraries namely- Nil Ratan Sircar Medical College Library (NRSMCL), RG Kar Medical College Library (RGKMCL), Medical College Library(MCL), College of Medicine Library(CMC), Calcutta National Medical College Library(CNMCL).

#### 4.0 Objective of the study

- 1. Identifying the status of medical college libraries is one of the primary goals.
- 2. To assess the condition of the materials available in medical college libraries
- 3. To be familiar with the IT setup in the medical college library
- 4. To research medical college libraries' infrastructure
- 5. To learn about the library automation software.

(April, 2024)

# International Journal of Information Movement Vol. 8 Issue XII

(April, 2024)

Website: www.ijim.in ISSN: 2456-0553 (online) Pages 1-8

### 5.0 Short history

1. Nil Ratan Sircar Medical College

Address: 138, AJC Bose Road, Kolkata, West Bengal, 700014.

Sealdah Medical School was established on 1873. In 1948 the name was changed to Campbell Medical College. In 1950, the College was renamed in honour of Sir Nil Ratan Sircar, a renowned educationist, social activist, freedom fighter, and alumni of this institution.

2. RG Kar Medical College

Address: 1, Khudiram Bose Sarani, Kolkata, PIN-700004

R. G. Kar Medical College was established in 1886, as the Calcutta School of Medicine, making it one of India's oldest medical colleges. On May 12, 1948, the institution adopted its present name in remembrance of Dr. Radha Govinda Kar

3. Medical College (Also known as Calcutta Medical College)

The William Bentinck committee suggested in 1833 that a medical college be established "for the education of the natives." Consequently, a new medical college, known as the Medical College Kolkata was established on 28th January 1835

4. College of Medicine (also known as Sagar Dutta Medical College)

Address: Kamarhati, Kolkata - 700058

In a strategic location of Kamarhati, this is the entry point to North Kolkata.

The West Bengal government established it in 2010 and started M.B.B.S. courses from 2011 to reduce the lack of doctors in the state.

5. Calcutta National Medical College (also known as Chittaranjan Hospital)

Address: 32 Gorachand Road, Beniapukur, Kolkata, West Bengal 700014

The Calcutta National Medical College was founded in 1948 as a result of the merger of the National Medical Institute (Estd 1921) and the Calcutta Medical Institute (Estd 1907), at 32 Gorachand Road, Calcutta-14.

### 6.0 Methodology

The methodology used for the present study is questionnaire-based survey. A carefully constructed questionnaire has been created for the survey with various aspects and arranged accordingly to get better results.

- a) Information about the Library
- b) Physical arrangement of resources
- c) Structure and Organization.
- d) Services and facilities
- e) Nature of computerization, software, networking etc

#### 7.0 Data analysis

This section consists of data analysis and discussion.

Table 1: Year of Establishment and Status of the Institution

Sl No.	Name of the College Libraries	Year of establishment	Status
1	NRSMC	1873	Government
2	RGKMC	1886	Government
3	MC	1835	Government
4	CM	2011	Government
5	CNMC	1948	Government

All are government medical colleges, as shown in Table 1. Three medical colleges were founded before freedom of India according to the table and two medical colleges were established after freedom. All colleges must adhere to National medical Commission (2019) standards (formerly Medical Council of India).

Table 2: Courses Offered

Sl.No.	Courses	Number of Colleges	Percentage
1	MBBS	5	100%
2	PG	5	100%

According to Table 2, all colleges provided the MBBS programme and also offered Post Graduate (PG) courses out of five colleges.

Website: www.ijim.in ISSN: 2456-0553 (online) Pages 1-8

**Table 3: Library Collection** 

Name of the	Books	Journals	E book	E journal	CD ROM
Medical College					
Library					
NRSMCL	30891	110		239	350
RGKMCL	36563	100		243	943
MCL	23521	106		238	
CML	8791	126			250
CNMCL	23980	150		235	

Library collection is essential part for the existence of a library. The collection is developed, maintained and managed as per the respective library system. Documents that have been acquired are included in the library collection to help present needs of user community in Health Science Libraries. The total collection include books, journals, e-books, e-journals and other type of material are shown in table 3. Table 3 provides information on the collection of five medical college libraries. The RGKMC library has the largest collection of books i.e.36563, followed by NRSMCL which has 30891 books out of the five. Collection of books of different medical college libraries shown in pie chart (Figure-1) below

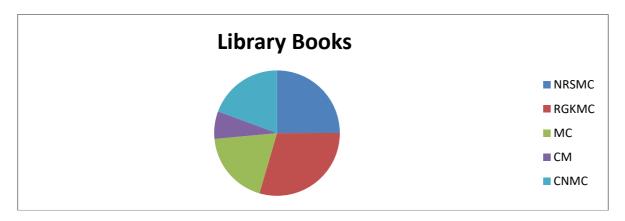


Figure- 1

The biggest collection of books is at RGKMCL then NRSMCL, CNMCL, MCL and CML respectively. The print journals have shown in bar chart and pie chart respectively. Here column chart 2 (Figure-2) show clear differences at nominal margin of print journal of different medical college library but pie chart 3(Figure-3) not clearly understands the difference. CNMC library has maximum collection of journals i.e. 150, followed by CM library which has 126 journals.

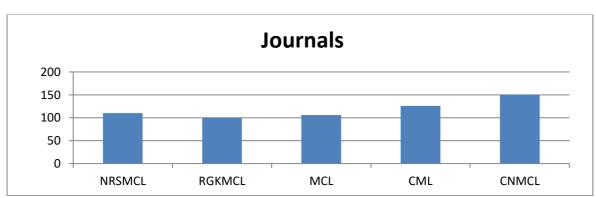


Figure- 2

Vol. 8 Issue XII (April, 2024)

Website: www.ijim.in ISSN: 2456-0553 (online) Pages 1-8

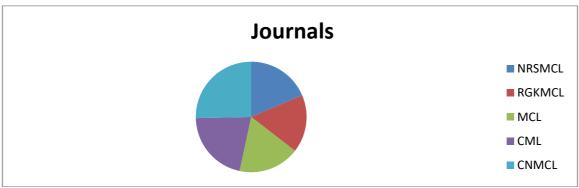


Figure- 3

It is observed that during the present information era print resources are dominated by electronic resources and health science libraries are still depending on print resources. The data collected in Table 3 shows that no ebooks are there in all five medical college libraries and next column provide the information about e-journal where four medical college libraries have e-journals but CM Library has no e-Journals. RGKMC Library has maximum collection of e-journal i.e. 243 followed by NRSMC Library has 239 e-journal, MC Library has 238 e-journal and CNMC Library has 235 e-journals. E-journals show in a column chart 4(Figure-4) for understands the clear picture below:

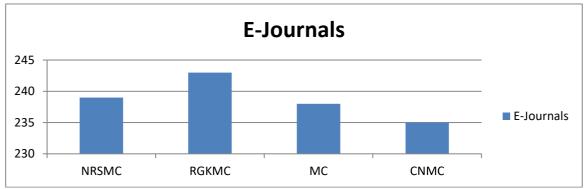


Figure- 4

According to the results of our study, all the medical college libraries have a connection to the National Medical Library that allows them to access e-journals through the ERMED consortium. The collections of CD ROMs are available in the libraries of three medical college's viz. NRSMC, RGKMC, and CM. Most libraries have an adequate IT infrastructure to use the available e-resources. But surprisingly no library facility for users to access e-resources.

Table 4: Classification and Cataloguing Schemes Used by the Libraries

Schemes	Number of Libraries
DDC	5
AACR2	0

The classification scheme is the most important technical services in the library because classification aims to arranging documents at any helpful sequence. And the cataloguing is holding record of a library and is the guide to the identification and location of each item on the shelves. In this study five medical college libraries adopted classification scheme for organizing their information resources. But most libraries still do not adopt any cataloguing code. Table 4 demonstrates that the DDC is used to classify books in all libraries. Five libraries did not use AACR2 for cataloguing of books.

**Table 5: Library Software Used for Automation** 

Name of Medical College Library					
Name of Software NRSMCL RGKMCL MCL CML CNM		CNMCL			
KOHA ↓	0	0	0	1	0

## International Journal of Information Movement

Vol. 8 Issue XII (April, 2024)

Website: www.ijim.in ISSN: 2456-0553 (online) Pages 1-8

LIBSYS	0	0	0	0	0
SOUL	0	0	0	0	0

Library automation software is being used in libraries for carrying out maximum library operations. In order to obtain jobs like acquisition, cataloguing, circulation and e-resource management, computerized operations are being performed through library software. Integrated Library Management Software is important for automation in medical college libraries for better services to users. But Table 5 shows that only one college library (i.e.CML) is using the software for automation out of five libraries that is KOHA (Open Source Software). Others four medical college libraries didn't use any type of library automation software.

**Table 6: Availability of Internet Facility** 

	Availability of Internet Connectivity	Number of Libraries	Percentage
	Yes	5	100%
ſ	No	0	0%

Table 6 indicates that 100% libraries with internet connectivity to access the resources. The students use the internet for scanning the available literature, accessing reading material recommended by their teachers, sending and receiving e-mail. The students respond that they use the internet to get information for patient; this shows the rising numbers of internet users in this area.

**Table 7: Computer Facility for Students** 

College Name	Computer Facility Available (Yes/No)	Number of Computer
NRSMC	Yes	41
RGKMC	No	0
MC	Yes	50
CM	Yes	35
CNMC	No	0

In traditional library systems, users have to spend more time for searching a small piece of information. But at present it is a fact that, libraries and information centers have to provide speedy and pinpointed information required by the users. That's why computers are being used for almost all library operations to save the time of users and the library staff as well. It ensures the library services are more effective. Table 7 shows that only three medical colleges viz. NRSMC, MC, CM provide computer facilities for medical students and two medical colleges viz. RGKMC, CNMC didn't provide any computer facility for students.

**Table 8: Human Resource** 

Name of College Libraries	Librarian	Other Staff	Total
NRSMCL	5	3	8
RGKMCL	3	3	6
MCL	3	4	7
CML	3	0	3
CNMCL	2	3	5

Library personnel are considered an important part of the library to provide maximum services to its users. The problem of shortage of staff in libraries is common in Indian context. The study as shown in Table 8 reveals the condition of the staffing position. Table 8 overall it has assessed that indicates maximum human resource used by NRSMCL i.e. eight, out of which five technical staff and three non-technical staff followed by MCL i.e. seven out of which three technical staff and four non-technical staff and minimum human resource used by CML, only three technical staff.

Table 9: Library consortia

Tuble 3: Elbi di y cons	oi iiu
Name of College Libraries	Availability of Library consortia (Yes/ No)
NRSMCL	Yes (ERMED)
RGKMCL	No
MCL	Yes (ERMED)
CML	Yes (ERMED)

# International Journal of Information Movement

Vol. 8 Issue XII

(April, 2024)

Website: www.ijim.in ISSN: 2456-0553 (online) Pages 1-8

CNMCL
-------

According to Merriam-Webster's Collegiate Dictionary, a consortium refers to "an agreement, combination, or group (as of companies) form to undertake an enterprise beyond the resources of any one member". (Merriam-Webster's Collegiate Dictionary, 2001. The term was initially used in the fields of science and education during 1950s and 1960s. "Consortia" is a plural form of "consortium" but is often used in a singular form. It is an association of institutions and organizations of a similar nature that work together to provide and service common things for the benefit of their users. Consortia give new opportunities to libraries to provide immediate access to information. A library consortium is a virtual repository of information and resources.

The term "library consortia" describes cooperative, coordinated, and collaborative efforts among libraries with the aim of sharing information resources. Table 9 shows that only three medical college libraries i.e. NRSMCL, MCL and CML have available ERMED library consortia and the other two libraries have no library consortia out of five medical colleges.

**Table 10: Digital Library Facility** 

Name of College Libraries	Digital Library Facility (Yes/No)
NRSMCL	Yes
RGKMCL	No
MCL	No
CML	Yes
CNMCL	No

Academic health science libraries have been offering digital reference services to meet the information-seeking needs of busy students, faculty, and health care professionals. But in this study Table 10 shows that only two medical college libraries i.e. NRSMCL and CML provide digital library facilities. Others do not provide that facility in the library.

#### 8.0 Conclusion

Information and communication technologies (ICTs) are well-known facts that are integral to libraries and information centers, particularly medical college libraries. Health care organizations need to have medical libraries for the advancement of medical science. Inventiveness is increasing daily. Therefore, in order to effectively and efficiently disseminate the most recent knowledge among the medical communities, the library experts of the medical organization should be well-versed in the most recent technology. According to the survey, newly founded medical colleges libraries are still in their infancy. Infrastructural support for ICT is required for the growth of the libraries. One of the crucial elements in ICT is training application. As a result, planning should be required before implementing ICT in libraries. Most libraries are lacking in resources. Maximum Medical college libraries do not have any integrated library management software like KOHA, LYBSIS, SOUL or E-Granthalaya. To access the online materials, all medical libraries must be members of the medical consortium like ICMR's ERMED- India, National Medical Library Consortium, New Delhi, HELINET of Rajiv Gandhi University of Health Sciences, Karnataka, Indian Medlars Centre (17th MEDLAR Centre), provided information services to medical research community. It produced two resources: (1) A bibliographic database - IndMED and (2)A portal - medIND (medind.nic.in/), HELLIS network. All libraries should have access to enough hardware, dependable library software, and sufficient funding to upgrade their facilities.

#### 9.0 Refrences

- Bhatt, Rakesh Kumar. (1995). History and Development of Libraries in India. New Delhi: Mittal i. Publications.
- Das, Rumi & Singh, Sanjay Kumar. (2017). Application of Information and Communication ii. Technology (ICT) in the Medical College Libraries of Assam. International Journal of Library and Information Studies, 7(4), 172-175.
- Dixit, R.P. (1995). Health Science Libraries in India-Their Resources and Services. The iii. International Information & Library Review, 27(2), 129-142.
- Kumar, R.P. (1993). Application of modern technologies in health science libraries in India: a iv. survey. Aslib Proceedings, 45(3), 63-67.
- Majid Pathan, A. (1978). Education for Medical Librarianship in India, *International Library* v. Review, 10, 187-203.

# International Journal of Information Movement Vol. 8 Issue XII

Website: www.ijim.in ISSN: 2456-0553 (online) Pages 1-8

- vi. Majid Pathan, A. and Karisidappa, C. R. (1989). The health sciences library network for India. *International Library Review*, 21(3) 411-439.
- vii. Meena, P. C. (2018). Relevance of Ranganathan's Five Laws of Library Science in Present ICT Rea. *Ascent International Journal for Research Analysis*, III(II), 16.1-16.5.
- viii. Moghaddam, Golnessa Galyani and Talawar, V.G. (2009). Library consortia in developing. countries: an overview. *Program: electronic library and information systems*, 43(1), 94-104.
- ix. Saini, Anju. (2017). Library consortia: an overview. *International Journal of Digital Library Services*, 7(4), 119-123.
- x. Satija, M.P. (2013). Information: nature, importance and functions. *Annals of Library and Information Studies*, 60, 128-133.
- xi. Siddamallaiah, H.S. and Butdisuwan, Sujin. (2009). HELLIS Network–Not Just a Consortium of e-Resources. *DESIDOC Journal of Library & Information Technology*, 29(5), 12-17.
- xii. Sen, B. K. (2008). Ranganathan's five laws. *Annals of Library and Information Studies*, 55, 87-90.
- xiii. Tripathi, Aditya and Lal, Jawahar. (2016). Library Consortia: Practical Guide for Library Managers. Elsevier, 1
- xiv. Trivedi, Mayank. (2007). Knowledge Management in Health Science Libraries. *The Electronic Journal of Academic and Special Librarianship*, 8(2), 1-15.
- xv. Waris, Abu, Vasanthakumar, M. and Nagaraja, A. (2013). Medical librarianship in India: a review of historical developments and current perspectives. *International Journal of Library and Information Studies*, 3(2), 56-66.
- xvi. https://www.nrsmc.edu.in/pages/4 access on 12.01.2024
- xvii. <a href="https://en.wikipedia.org/wiki/R">https://en.wikipedia.org/wiki/R</a>. G. Kar Medical College and Hospital access on 12.01.2024
- xviii. <a href="https://www.rgkarmch.in/">https://www.rgkarmch.in/</a> access on 12.01.2024
- xix. https://www.medicalcollegekolkata.in/main/page/about\_us access on 12.01.2024
- xx. https://en.wikipedia.org/wiki/Medical\_College\_%26\_Hospital,\_Kolkata\_access on 12.01.2024
- xxi. <a href="https://comsdh.org.in/history.html">https://comsdh.org.in/history.html</a> access on 12.01.2024
- xxii. <a href="https://en.wikipedia.org/wiki/College\_of\_Medicine\_%26\_Sagore\_Dutta\_Hospital">https://en.wikipedia.org/wiki/College\_of\_Medicine\_%26\_Sagore\_Dutta\_Hospital</a> access on 12.01.2024
- xxiii. <a href="https://www.cnmckolkata.com/history.php">https://www.cnmckolkata.com/history.php</a> access on 12.01.2024.

(April, 2024)