



MULTIDISCIPLINARY RESEARCH

Prof. Rajani Shikhare

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Publisher	:	Anand Prakashan, Jaisingpura, Aurangabad.(M.S) Cell : 9970148704 Email: anandprakashan7@gmail.com
©	:	Author
Typeset At	:	Anand Computer Aurangabad.
Edition	:	December 2020
ISBN No	:	978-93-90004-07-2
Cover Design	:	Aura Design Mumbai.
Printed At	:	Om Offset Aurangabad.
Main Distributor	:	Anand Book Depot Jaisingpura, Aurangabad - 431004
Price	:	₹ 120 /-

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Global and International Evidence - Based Library Activities and Demand of Health Librarians

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Abstract:

The health care knowledge base, recorded in the literature on healthcare, is vast and ever increasing and changing. Via developments in medical science and technology, health care is being revolutionized. Today, doctors are striving to bring research into practice and are constantly relying on technology to bring evidence to the bedside to boost patient safety and efficacy. Today, considering the value of evidence-based practice, health librarianship is considering higher importance in many centers. Responses vary, but more 'information specialists' tend to be against 'clinical information scientists' who may be qualified in both clinical and data disciplines. But adjusting to the transition is not necessary. Even as we have increased our role in the health community as value-added educators and information providers, there is a need to continue education and training in various aspects: conferences, short courses, seminars, etc. are relevant. Conferences can be conducted at the national level in order to increase access to health care and the recognition of health librarianship.

Keywords: medical librarianship, health science librarians, evidence-based medicine (EBM), clinical librarianship, India, etc.

1. Introduction:

Due to the abundance of information, the position of the medical librarian has become increasingly complex over the past few decades, and the way information is now digitized, libraries are becoming more and more interactive.

The additional issue now is that clinicians need details, but no data at all. They need data from research of high quality. The data is available, but there might be no time for them to search effectively. The librarian must take on the task of leaving the library to meet the clinicians themselves, in order to meet their needs. A clinical librarian must be able to communicate with other health professionals efficiently and have the ability to identify a need and respond quickly with sufficient support for information. Today, evidence-based medicine (EBM) expands the role of the librarian beyond literature recognition to be active in the practice and teaching of literature content filtering and critical assessment. Such operations enable librarians to acquire specialist knowledge of medical terminology, etc. This is the only way any of these drastic changes can be met. The new position of the clinical librarian as an instructor, using evidence at the 'point of treatment' as the basis of practice^[1], The change in approach that has taken place in medical practice is reflected. The EBM's growing focus calls for the incorporation of clinical experience with the best external evidence available. Therefore, librarians are interested in part of the advancement of bringing science into practice, presenting information to the bedside that provides clinical problem solving, with the latest, accessible, up-to - date external evidence from rigorous research, scientifically appropriate and relevant to the problem at hand. Additionally, by showing other health care workers or students how to scan for EBM themselves, the librarian was considered to be an educator. For health librarians, how and why information is shared between patients, health care professionals, managers, evaluators, and planners is also of interest. Today, given the importance of evidence-based practice, in many centers, health librarianship is given higher priority. Responses differ, but there seems to be more towards 'clinical information scientists'- 'information specialists' who may be qualified in both clinical and data disciplines.

But it is not necessary to adapt to transition. Even as we have increased our position as value-added educators and knowledge providers in the health community, we need to continue education and training in various facets: conferences, brief courses , workshops, etc. In the knowledge age, librarians have to move into the clinical setting and to stop doing so is likely to reject our future.^[2]

2. Hospital / Health / clinical / medical Librarianship Changes: International Science:

A decade of transition in medical librarianship took place in the 1980s. A literature review reveals that, until the mid-1980s, clinical medical librarianship had not been studied from a historical perspective.

Gertrude Lamb described a discrepancy between what medicine taught about good patient care as a discipline and the information that was actually applied to patient care. She pioneered the notion of librarians who engaged in clinical rounds to recognize and fulfill information needs relevant to current cases, seeing an opportunity for medical librarians to better make the connection. In 1971, at the University of Missouri-Kansas City (UMKC) School of Medicine, Lamb established the first clinical medical librarian (CML) programme and continued her efforts at Hartford Hospital and the Connecticut Health Center in 1974. Cimprl summarized the reasons why clinical library services were offered: 'to provide physicians and other health care team members with information quickly; to influence clinicians' information-seeking actions and develop their library skills; and to create the position of the medical librarian as a valid member of the health care team.' In a 2000 *Annals of Internal Medicine* editorial, Davidoff and Florence, despite a focus on evidence-based medicine and advances in technology and information sources, saw the same literature-practice disparity as that found by Lamb in the early 1970s. They introduced a national initiative to train, certify and pay for a new career of 'information specialist,' qualified in both health and information disciplines, based on the experience of clinical librarianship, with the potential to increase the quality of care as well as its cost-effectiveness. An encouragement to librarians already seeking ways to better incorporate knowledge into the clinical context has been seen in the 2000 '*Annals of Internal Medicine*' editorial^[3].

Guise echoes the need for clinical librarians to develop 'a high degree of clinical expertise that supports their ability to communicate, efficiently scan, and-crucially interpret medical literature' on rounds. Thus, as compiled from different recent writings on clinical librarianship, the current profile is:

- Experience of experts
- Being interested as part of their job in a technical team
- Attend rounds of bedside or clinical meetings where particular patients have been discussed; hold diaries
- Contribute to schooling for continuity

- Making an impact on patient care
- Provide the physician with quality filtered, case relevant data in support of clinical decision-making
- In a time based nature, it may be crucial
- It may be a tool to help physicians improve the quality of healthcare services (particularly in emergency medicine , for example)
- Provide immediate replies at the 'point of care' to information requests.
- Define a clinical problem.

Probably one of the most groundbreaking ideas to be implemented into health sciences libraries has been clinical librarianship. The principles behind it continue to inspire librarians in the health sciences and direct goals. It pushes the hospital librarian into a more active role in patient care, beyond the support and service role.^[4]

3. Changes in the essence of Medical Literature worldwide:

The use of indexes and abstracts has been promoted by health science librarians for as long as these items have been available. With the launch of Medlars online (Medline), more than twenty years ago, the National Library of Medicine pioneered online access to literature. The Cochrane collaboration is a network of health care experts, clients, and scientists whose key objectives are to create and distribute comprehensive analyses of the impacts of health care interventions.^[5]

Today, the internet has greatly expanded the amount of medical knowledge that is available electronically. The internet helps the medical profession and patients to provide more decision-making knowledge and this might lead to better medical options and results. To justify individual clinical decisions with explicit reference to proof, doctors need clinical information. However, the extraction and analysis of new and applicable information from databases and the Internet remains a challenge without the assistance of skilled clinical and medical librarians. The health care librarian will bring to the health care field experience in the collection, planning, and distribution of systematic reviews.^[6]

4. Changes in Health/Medical Librarianship: National Arena:

In India, the history of medicine is also ancient. Students from distant lands found their way to India's Nalanda and Taxila universities to study medicine even before the Royal College of Surgeons came into being. In the past two decades, the country has undergone so many innovations in the fields of health,

education and science. In 1911, ICMR was established. In 1934, the Medical Council of India came along as a glimmer of hope. In 1956, the All India Institute of Medical Sciences (AIIMS) was established. Medical libraries have thus emerged in medical schools and colleges and function as a bridge between the resources of medical information and the users of the medical community in which they operate.^[7]

The need for health knowledge workers is realized by implementing the recommendations of the National Knowledge Commission, which emphasized the important role played by different types of libraries, including biomedical libraries, in promoting knowledge sharing among user groups. In addition, in view of the Ministry of Health & Family Welfare , Government of India, the demand for medical librarians with expertise and experience in library automation will be highly in demand to build the digital medical library infrastructure in all medical colleges.^[8]

In order to improve the healthcare industry, the Pradhan Mantri Swasthya Suraksha Yojana (PMSSY) was announced in 2003 to expand medical education facilities, create AIIMS as institutions and upgrade Govt. Institutions of Medical Schools.

A number of reports, however, suggest that health science library practitioners can also develop their knowledge of information and communication technology (ICT) and communication skills. Another analysis of the techniques and methods adopted in the libraries of the medical college in the southern Karnataka plateau districts shows that whatever ICT infrastructure is available in most libraries is insufficient. In 2006, Soudbakhsh & Farzin clarified that medical libraries and information centers are undergoing a major revolution in their practices and facilities, leading librarians to feel that they need to learn new knowledge and skills in addition to their conventional activities. A survey of Andhra Pradesh medical college libraries also revealed that most medical college libraries are not automated and that librarians (36.36 percent) do not have computer application training. Therefore, as proposed by Srinivasulu & Reddy in 2010, more emphasis needs to be put on the management of human resources. In addition, there is an urgent need, according to Bhutt in 2012, to prepare, introduce and build ICT infrastructure to be prepared to face the challenges ahead of them.^[9]

Where the library has succeeded in embracing the most current innovations. Following thorough research, the SGPGIMS library has been found to provide IT-enabled services and resources, but it needs to improve its collection and services. Students in their library have reacted positively to the implementation of IT and want to have more enhanced services. Students should be equipped with a sufficient number of systems and access to e-resources round-the-clock.^[10]

Therefore, medical library and information science (MLIS) practitioners should learn expertise and skills in information technology in order to cope with the information challenges of the 21st century and to meet the growing and evolving needs and requirements of users more effectively and efficiently and to keep pace with the ever-increasing technological changes.^[11]

The evidence-based library practice and health librarianship in India, however, is still to be considered and there is a need for development in the medical library infrastructure. It is a privilege for medical librarians that India will host the 2017 schedule of the 12th International Congress on Medical Librarianship (ICML) in New Delhi.

5. Evidence-Based Librarianship of Health Librarians and their role:

In 1997, for the first time, Eldredge identified the emergence of the idea of Evidence Based Librarianship (EBL). As with the evidence-based practice campaign, EBL started in the medical arena in the USA and Canada under the auspices of the Medical Library Association, and in the UK under the Health Libraries Group¹⁸. The movement centered on evidence began as evidence-based medicine (EBM) and was overshadowed by a much wider movement known as evidence-based health care. From the EBM and EBHC motions, EBL adapts its core features. In the real world sense of delivering programs and collections by controlling budgets and resources, librarians run their libraries. EBL thus comprises a science that is applied rather than theoretical. With librarianship, EBM shares the aim of applying the latest scientific science to the urgent, realistic need to provide patients with reliable, compassionate medical services. In responding to clinical concerns, the extensive usage of EBM tools makes it essential for knowledge specialists to establish experience in their proper usage. This paper highlights the strengths and limitations of EBM services by discussing their use in addressing complex clinical questions and general care management questions, and provides data specialists with some basic information on how these resources can be integrated with primary literature to improve their effectiveness.^[12]

Indeed, librarians in the evidence-based movement have played a central and critical role. In the literature of the Health Sciences Library, the knowledge specialist position has been well defined. Usually, information specialists now refer to a person with a detailed understanding of both the field of health care and the search and evaluation of information, who, as part of a health care or research team, employs the combination of expertise.^[13]

Some of the most extensive evidence-based library and information practice (EBLIP) work emerged in countries like Australia, Canada, Sweden, the United Kingdom and the United States. The International Conference on Evidence-based Library and Information Practice, held every two years since 2001, has strengthened the global interest. The Seventh International Conference on EBLIP held in 2013 in Canada had an International advisory committee representing 14 different countries. In 2006, as a major development in this field, an open source journal "Evidence-based Library and Information Practice" was launched at the University of Alberta in Canada ([http://ejournals.library.ualberta.ca / index.php / EBLIP/](http://ejournals.library.ualberta.ca/index.php/EBLIP/)) in 2006. It offers librarians and other information practitioners a platform to discover findings that can lead to professional practise decision-making.^[14]

6. Studies Dmpnstrating Merit in EBC Medical Librarians:

Many studies have shown the importance of supplementing the information in doctor's heads with information provided to the point of treatment from the written literature. In 1943, earlier Janet Doe performed a survey of the ailing Army Medical Library, which in 1956 culminated in the construction of the new National Library of Medicine, USA.^[15]

Recent studies have shown the importance of patient care information and highlight the library and librarian's role in promoting this revolution in information. Librarians are now becoming more integrated into patient safety and quality enhancement programs and into testing and clinical teams at some centers. This study also found that responses to clinical questions can be provided more easily and effectively when clinical librarians are active in delivering information in patient care settings. For several hospital and university librarians, important positions in teaching evidence based practice (EBP) are of importance. Out of 4,520 respondents in a large-scale critical incident survey of doctors and residents at 56 library sites serving 118 hospitals in the USA and Canada, 75 percent said they certainly or potentially treated patient care differently using library-acquired information. The findings were tested in relation to four methods

of knowledge access: (i) requesting assistance from a librarian; (ii) conducting a physical library search; (iii) searching the website of a library; or (iv) searching for library services on an administrative intranet. Both library access strategies have consistently had positive ties with clinical results, showing that library facilities have a positive effect on the quality of patient care. Studies also show that medical librarians, able to recognize suitable tools and work with various dynamic interfaces, can support the efforts of clinicians to practice EBM by offering time and experience to express the clinical problem and identify the best evidence.^[16]

Therefore, the introduction of EBL and Information Practice and the leadership role played in its creation by health science librarians seemed to be the ideal way to demonstrate the practical importance of connecting research to practice.

Moreover, librarians also play a part in maintaining a health care institution's electronic information services. Librarians and their support staff for health care technologies select what journals are to be written.^[17]

7. Challenges before health Librarians:

The increasing amount of biomedical knowledge that challenges health care practitioners to remain current is the ultimate reason for the information specialist profession. Davidoff & Florence pointed out that this information exists with inconsistent indexing and accessibility in fragmented formats and takes time, domain awareness, retrieval, and critical assessment abilities to communicate the best of it to the point of treatment. The futuristic vision of medical libraries by Lindberg & Humphreys suggested a marked increase in electronic information but also more in-context work by librarians to 'improve efficiency; reduce the risks associated with inefficient or incomplete retrieval of available data, and to do community outreach.'^[18]

The differences in skills and expertise between those learned at library schools and the requirements of librarians working for health librarians have been established in several studies. Librarians need to develop skills to learn how to conduct report and monitor clinical research. Plutchak acknowledged that libraries have a great deal of work to do in making research items available and usable for our library users and ourselves. Despite the growing abundance of research and scholarships, it continues to be a challenge to connect research to practice.^[19]

8. Education and Training for Librarians working in the Health Sectors:

Internationally, a variety of studies show the efforts made by prospective or early career health information practitioners towards educational and professional growth opportunities. It also measured the extent to which health science librarians are engaged in research. Another study by Akers, et al., describes the registry of ORCID (open researcher and contributor ID) as a librarian primer by assigning unique 16-digit author identifiers that enable automatic links between researchers and their academic activities. In addition, a study by Pearce-Smith also found that a journal club is an efficient method for librarians aimed at improving evaluation skills and helping to adapt research to practice.^[20]

The present research suggests several steps to be taken for health library professionals in India in the light of the above studies:

- The Medical Council of India (MCI) should partner with the Library Associations to work together and coordinate training programmes for health librarians.
- An apprenticeship programme can be used as part of a curriculum to visit medical libraries, hospitals and health care facilities in order to learn their study, patient care and terminology requirements.
- In academic and medical libraries, e.g., AIIMS and the National Medical Library (NML), New Delhi, international conferences on EBL and information practice for health librarianship should be held from time to time.
- E.g. knowledge of anatomy and physiology, roots and definitions of medical terminology, project management skills, literature finding skills, knowledge of evidence-based practice, testing methods and epidemiology. The curriculum should be intended to establish some subject knowledge applicable to the health sector, in particular for non-science background students.

9. Conclusion:

In the future, knowledge will become increasingly the currency of healthcare and our ability to access, understand and perceive it at the level of individuals and communities will be a key determinant of our healthcare system's future success.'

It is also obvious that in the health care field, the value of library and information services is very well known worldwide. Employees of Library & Information Facilities are important for healthcare and underpin decision-making

in clinical and management. The services you provide help workers, patients and their families to access the best information and data in order to achieve high-quality treatment and progress in health. Professionals in health libraries and information need to remain a step ahead, and the need has never been greater right now.

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