Medical Information Literacy and the Quality of the Medical Services

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Abstract

Information Literacy is the library operation which makes the library user able to search, retrieve, evaluate, select and use the information resources. Information Literacy is the capability of critical thinking; it is the basis of the continuing education and self-education of the professionals. This skill is more important for Medical Scientists, as they face the continuing change of their discipline.

The paper proves the significance of information literacy for the staff of the hospitals, as prerequisite of the qualitative services and the organisation of hospital libraries too. It uses comparative data of the state of the art of the Greek medical libraries and proposes the important items for the success of that innovative and cost-effective service.

Keywords

Information Literacy, Medical Literature, Medical Libraries, Library Management.
Definitions

**What is information literacy?**

Many definitions of information literacy have been suggested.¹ American Library Association (ALA, 1989) defines Information Literate person as the person who is able to recognize when information is needed and has the ability to locate, evaluate, and use effectively the needed information. Ultimately, information literate people are those who have learned how to learn. They know how to learn because they know how knowledge is organized, how to find information and how to use information in such a way that others can learn from them. They are people prepared for lifelong learning, because they can always find the information needed for any task or decision at hand.²

Similarly Burnham and Peterson (2005) define:

> health literacy is the ability to read, understand, and act on health information and the degree to which individuals have the capacity to obtain, process and understand basic health information and services needed to make appropriate health decisions.

What is more important in information literacy is the ability of critical thinking (Whitmire, 1998: 266-7, UNESCO)³. Problem-solving and decision-making are the different expressions of the same skill: Critical thinking. The descriptions reveal the common elements of both Total Quality Management and Information Literacy:⁴

- Learn how to learn.
- Continuous improvement of people, teams, organisations.
- Focus to customers needs.
- Team working.

¹ A lot of definitions have presented by Vezzosi (2006).
³ What is Information Literacy? (2004).
⁴ For a description of TQM see Asher (1996:18-22).
✓ Effectiveness and Efficiency.
✓ Continuous change process.

Why information literacy?

Good decisions depend on good information. Getting the right information is difficult. People must be able to evaluate and apply information, to find and use information in all forms. The importance of information literacy is so high that libraries develop interactive integrated courses even for distance learners (Fourie, 2001, ALIA, 2003). In the case of health care sector, the necessity of Information Literacy is important not only for the medical decision-making but for the managerial too. According to Willcocks (1997) the “ideal” effective clinical director is whoever has:

- The ability to develop teamwork;
- The knowledge, maturity, experience, and understanding of the organization;
- The clinical director’s skills, attributes in communication (internal and external), as leader of a team, in decision making, in problem identification and prediction, in the promotion of his/her directorate.

What is above described is the framework, which the administration establishes in order to guide the organization to innovation and qualitative services.

The discrete roles.

Why libraries?

Libraries are unique. They are one-stop shops: online, in person. It is the only place where people can have access to nearly anything on the web or in print as well as a personal service and assistance in finding it. If somebody knows how to use a library, he also knows how to learn for a lifetime. There is no such thing as good education without good libraries. (ALIA, 2003, Crawford and Gorman, 1995: 118-9, Mackenzie et al, 2002). What is needed more in this case, as a prerequisite is the operation of an active, innovative library.

Why librarians?

- In a world that information is rich, librarians are information wise.
-librarians are the ultimate search engines.
-Teach others how to critically evaluate information is a unique skill that librarian bring to a society suffering information overload.
-librarians provide more than facts. They provide the expertise and services that add meaning to those facts.
-special librarians provide critical expertise that help ... health and other officials make sound decisions based on sound information (ALIA, 2003, Vezzosi 2006).

So, the librarians who are placed to provide information are those who know the information literacy theory and practice. Brown (2004) refers the results of the cooperation between librarians and physicians. Among others, he found that after the librarian’s information Physicians:

**Changed their Decisions:**
- Choice of tests 51%
- Choice of drugs 45%
- Advice given to the patient 72%

**Ability to avoid:**
- Patient mortality 19%
- Surgery 21%
- Additional tests or procedures 49%.

The health care system is in a state of constant and rapid change due to the increase in scientific knowledge and rapid technological advances. This underlies the call for a fundamental shift in medical learning process with emphasis on supporting learners to learn. ... aim to develop independent learners who will become effective lifelong learning practitioners. Independent learning can be supported by utilising a range of learning activities such as problem-based learning, case-based learning, research projects and reflection on practice. Successful independent learning requires the learner to have well developed information literacy skills. (Shanahan, 2006)

The modern innovative organization supports the staff working in teams, encourages staff to make decisions, to solve problems, to take managerial risks. That’s a qualified criterion, which depends on the information and differentiates the organizations. This criterion is important for libraries and medical libraries.

**The Human Sector and the Greek Case.**
The complexity of the modern working environments is not unfamiliar to libraries. That exactly guides to the transition from a traditional hierarchical structure to a modern horizontal team working organization. The impact to the organization is great. The employees actively participate to the operation of the organization; they undertake responsibilities, make decisions and take the risk of their initiatives. The administration however has to support this attitude in order to achieve the best for the organization. The library, as team- based working has a double role to play; to achieve its organizational objectives and to fulfill users’s needs.

Some years before, there was a survey on the organization model of the Greek Medical Libraries and some interested results appeared. The more interested is that the libraries report that 0% of the administrations of the hospital propose changes, but 50-60 % make decisions on them. As you can see to the following diagrams, the staff proposes but don’t decides at all.
The choice “The staff as a Whole” used to declare a kind of organized structure of the staff, but as you can see, this choice took only 8%. According to my opinion, this percentage is determinant for the effectiveness and efficiency of the hospital libraries.

The changes of the services were proposed by:

- Library Director: 42%
- Members of staff: 50%
- Administration of the Hospital: 0%
- The Staff as a Whole: 8%

The changes of the services were decided by:

- Library Director: 17%
- Members of staff: 25%
- Administration of the Hospital: 0%
- The Staff as a Whole: 8%
The economy of knowledge requires the organizations to recognize the change perspective and to respond actively and fast. Townley (2001) refers that “Change is the order of today”

Hospital administration is absolutely absent from the library organization and services. They have proposed nothing but they decide! On the other hand, both library directors and staff members propose changes, but they don't decide. The organizational model is vertical hierarchy without staff participation to the decisions and the responsibilities. This model is away from the modern organization, which aim libraries to achieve the hospital goals and support the health–care staff and decision makers to the proper decisions.
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**Biographical Note**

*Anthi Katsirikou* is Librarian at the European Documentation Center of the University of Piraeus. She has been the Director of the Library of the Technical University of Crete since 1985, when this library established. She organized it, managed the resources, and developed the collection, the services, the technological infrastructure and the systems. She received her Degree in Library and Information Science (1982) and the Degree in Political Studies (1989). Now she is candidate PhD on library management and human resources. She was the organizer of the 20th IATUL International Conference (Technical University of Crete, Chania, Greece: May 17-21, 1999). She has participated in National and International Conferences and has issued articles at scientific journals on various aspects on Library management and a book on the same theme in Greek. She also teaches Library Organization at the LIS Dept. of the Technological Educational Institution of Athens. Her research interests focus on Innovation Management and Management of Change in libraries. She’s a member of IFLA, IATUL and ALA, as well as Treasurer of the Association of the Greek Librarians and Information Scientists.