






How Do MOHME-Affiliated Hospital Libraries Comply with the National Standards?

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Abstract

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Introduction: Hospital libraries have a special role in providing knowledge-evidence-based services to their users, including medical staff, patients, and their families. The present study aimed to evaluate the Ministry of Health and Medical Education (MOHME)-affiliated hospital libraries of Iran based on the national standard approved in 2021 by the National Standard Organization.

Methods: The present research is an applied study regarding its purpose and a descriptive survey regarding its method. The study's statistical population includes 213 hospital libraries of 60 universities of medical sciences affiliated with the MOHME of Iran. The data collection tool is a researcher-made checklist extracted from the national standard book of hospital libraries. SPSS software was used for data analysis.

Results: The obtained results revealed that, in common, less than 50% of the hospital libraries of medical universities in Iran complied with two components of the Organization and nine components of Resources Management standards: five components of Human Resources Management and four components of Physical, Environment, and Equipment Management.

Conclusion: MOHME-affiliated hospital libraries have fundamental weaknesses in the key components of Organization standard and Resource Management standards, i.e., human resource management and physical resource, environment, and equipment management, and do not comply with the standards. Therefore, taking practical measures by officials and stakeholders to improve the services, the quality of patient care, and, ultimately, the satisfaction of patients, their families, and users are essential.

Introduction

Hospital libraries aid hospitals in carrying out their fundamental mission, i.e., providing up-to-date information, affecting the diagnosis and prevention of diseases (1). The role of hospital libraries in providing healthcare information is significant in serving the information-seeking

public (2). Library and information resources were perceived as valuable, and the information obtained impacted patient care (3). The roles of librarians are diversifying to include management of electronic resources, user instruction and support, specialized research and clinical information search services,



and involvement in institution-level quality improvement (4).

Today, standards play an essential role in the lives of people and developed societies; through them, scientific methods replace traditional methods (5). Standards of hospital libraries ensure that they function effectively and efficiently in their role. In addition, hospital library standards are essential in the continuing medical education accreditation process, so accreditation organizations have adopted library standards, and librarians have been involved in the accreditation process (6). Additionally, standards of practice for hospital libraries and librarians make visible how the information work of hospital librarians is enacted in key practices where they support information systems project lifecycles toward improved patient safety (2,7).

Hospital libraries should evaluate the effectiveness of their services to ensure that they are meeting the needs of patients. They should collect feedback from patients and healthcare providers and use this feedback to improve their services (3). Evaluating the impact of library services on the quality and cost of medical care is essential in demonstrating the value of hospital libraries (8). Evaluating hospital libraries based on compliance with standards, such as the Medical Library Association's (MLA's) standards, can help ensure that they meet the needs of patients and healthcare providers (1).

Moreover, not following hospital library standards can lead to inadequate technology, accreditation issues, limited access to resources, lack of guidance, and reduced patient safety. Hospital libraries need to follow standards to ensure that they function effectively and efficiently in their role as providers of Knowledge-Based Information (KBI) resources (7).

Since this study was carried out in line with the announced mission regarding developing the national standard for hospital libraries, and on the other hand, the obtained results will be used in the action plan for managing and future evaluating medical sciences libraries in Iran, the importance of this study is worth noting.

Considering the emphasis on the existing and valid standards in the world regarding the independence of hospital libraries in terms of organizational structure and financial independence, as well as employing specialized librarians in the library and providing physical facilities for users (7,9,10), the present study aimed to evaluate MOHME-affiliated based on two crucial national standards of Organization and

Resources Management. Noteworthy, this study was conducted for the first time at the national level and evaluated all hospital libraries of medical sciences universities according to the national standard.

Methods

The current research is an applied study in terms of its purpose and a descriptive survey in terms of its method. The statistical population included 213 hospital libraries of 60 universities of medical sciences Type I, II, III, and newly established affiliated with the Ministry of Health of Iran. It should be noted that this typification is based on the annual evaluation of the research performance of Iran's universities of medical sciences, carried out by the Deputy of Research and Technology of the Ministry of Health, based on the ranking of the annual evaluation of the research performance of universities. The data collection tool was a researcher-made checklist, and the standards parameters were compiled based on the book of Standards for Hospital Libraries (11). Among the national standards, due to the importance of organizational structure, specialized staffing, physical space, and equipment of libraries, the standard of Organization and Resources Management, i.e., human resource management and physical resource, environment, and equipment management, were selected and examined.

The checklist consists of two main standards: Organization and Resources Management standards.

1. Organization standard, including eight components of having a mission, vision, and strategic plan, compilation of general goals based on the vision, developing operational goals, library independence, diagnosis, evaluation, analysis of users' needs, having a policy to access library services, existence of independent library budget, and compilation of the cost description of the annual budget of the library in a written form.

2. Resources Management standard including two section: I) Human resource management, including seven components of having human resources working in the library according to the standard, presence of computer expert in the library, presence of clinical librarian, number of librarian of the post-graduation plan course, number of trainee librarians, and number of contract or part-time librarians; II) Physical, environmental, and equipment resource management, including 16 components of placement of the library, providing services to patients and their families, compliance with the necessary standards

against unexpected natural disasters, observing the necessary standards for the disabled, having the number of seats according to the standard, library size compliance with the standard size, proportionate allocation of space based on the standard, existence of fire extinguishing equipment, library signage for users in different sections, special space for the disabled, compliance of library service hours with the standard, compliance of working hours of the library reading room with the standard, necessary measures to make the library environment attractive, compliance with the amount of light in workstations and study tables, compliance with noise level in workplaces, and library air conditioning in accordance with the standard.

Accordingly, the checklist was sent to all Iran's universities of medical sciences through an official letter from the Center for Development and Coordination of Scientific Information and Publications of the Ministry of Health of Iran. The letter was then referred to the Director of Scientific

Resources and Head of the Central Library through each university's Vice-Chancellor of Research and Technology. After completing the checklist by the head of the library, it was returned to the Ministry of Health through an official letter attached to the relevant documents or through an organizational email. The data obtained from the evaluation checklist of parameters and components were provided to the researcher, and then the researcher entered the data into SPSS software for analysis.

In addition, the validity of the checklist was carried out by specialists in medical library and information science, who participated in developing hospital library standards.

Results

The present study evaluated 213 hospital libraries from 60 universities of medical sciences of different types universities. Accordingly, descriptive statistics related to the evaluated libraries are presented.

Table 1. Frequency distribution and percentage of studied hospital libraries

Type of hospital	Type I n=86	Type II n=83	Type III n=37	Newly established n=7	Total n=213
	N (percent)	N (percent)	N (percent)	N (percent)	N (percent)
General	6 (14.6%)	15 (36.6%)	15 (36.6%)	5 (12.2%)	41 (19.2%)
Specialty	59 (93.7%)	4 (6.3%)	0	0	63 (29.6%)
Super specialty	21 (19.3%)	64 (58.7%)	22 (20.2%)	2 (1.8%)	109 (51.2%)

As shown in Table 1, most of the libraries in the general hospital are jointly related to Type 2 and Type 3 universities, 15 (36.6%). In addition, most of the libraries in the specialty hospital related to Type

1 universities, 59 (93.7%), and most of the libraries in the super specialty hospital related to Type 2 universities, 64 (58.7%).

Table 2. The evaluation of the organization components in the MOHME-affiliated hospital libraries

Organization standard	Compliance with hospital library standards (n=213)	
	Yes Number (Percent)	No Number (Percent)
Having a mission, vision, and strategic plan	194 (91.1%)	19 (8.9%)
Compilation of general goals based on the vision	193 (90.6%)	20 (9.4%)
Developing operational goals	182 (85.4%)	31 (14.6%)
Library independence	144 (67.6%)	69 (32.4%)
Diagnosis, evaluation, and analysis of users' needs	181 (85%)	32 (15%)
Having a policy to access library services	179 (84%)	34 (16%)
Existence of an independent library budget	52 (24.4%)	161 (75.6%)
Compilation of the cost description of the annual budget of the library in a written form	92 (43.2%)	121 (56.8%)

As shown in Table 2, among the hospital libraries, the highest compliance with the Organization standard related to having a mission, vision, and strategic plan component, with 194 (91.1%) libraries, compilation of general goals based on the vision, with 193 (90.6%)

libraries, and developing operational goals, with 182 (85.4%) libraries. Conversely, the least compliance with the Organization standard related to the existence of an independent library budget component, with 52 libraries.

Table 3. The evaluation of the human resources management components in the MOHME-affiliated hospital libraries

Human resources management standard	Compliance with hospital library standards (n=213)	
	Yes Number (Percent)	No Number (Percent)
Having human resources working in the library according to the standard	175 (82.2%)	38 (17.8%)
Presence of computer expert in the library	56 (26.3%)	157 (73.7%)
Presence of a clinical librarian	55 (25.8%)	158 (74.2%)

According to Table 3, among the hospital libraries, the highest compliance with the Human Resources Management standard related to having human resources working in the library according to the standard, with 175 (82.2%) libraries. On the other hand, the least compliance with the Human Resources Management standard related to the presence of clinical librarians, with 55 (25.8%) libraries, and the

presence of computer expert in the library, with 56 (26.3%) libraries.

Moreover, 108 (50.70%) hospital libraries had non-librarian staff, 21 (9.85%) hospital libraries had post-graduation plan course librarians, 5 (2.34%) hospitals had trainee librarians, and 35 (16.43%) hospital libraries had contract or part-time librarians.

Table 4. The evaluation of the physical, environmental, and equipment resources management components in the MOHME-affiliated hospital libraries

Physical, environmental, and equipment resources management standard	Compliance with hospital library standards (n=213)	
	Yes Number (Percent)	No Number (Percent)
Placement of the library	123 (57.7%)	90 (42.3%)
Providing services to patients and their families	72 (33.8%)	141 (66.2%)
Compliance with the necessary standards against unexpected natural disasters	143 (67.1%)	70 (32.9%)
Observing the necessary standards for the disabled	88 (41.3%)	125 (58.7%)
Having the number of seats according to the standard	183 (85.9%)	30 (14.1%)
Library size compliance with the standard size	180 (84.5%)	33 (15.5%)
Proportionate allocation of space based on the standard	89 (41.8%)	124 (58.2%)
Existence of fire extinguishing equipment	199 (93.4%)	14 (6.6%)
Library signage for users in different sections	157 (73.7%)	56 (26.3%)
Special space for the disabled	27 (12.7%)	186 (87.3%)
Compliance of library service hours with the standard	212 (99.5%)	1 (0.5%)
Compliance of working hours of the library reading room with the standard	167 (78.4%)	46 (21.6%)
Necessary measures to make the library environment attractive	145 (68.1%)	68 (31.9%)
Compliance with the amount of light in workstations and study tables	131 (61.5%)	82 (38.5%)
Compliance with noise level in workplaces	109 (51.2%)	104 (48.8%)
Library air conditioning following the standard	100 (46.9%)	113 (53.1%)



Based on Table 4, among the hospital libraries, the highest compliance with the Physical, Environmental, and Equipment Resources Management components standard related to the compliance of library service hours with the standard, with 212 (99.5%) libraries, the existence of fire extinguishing equipment, with 199 (93.4%) libraries, and having the number of seats according to the standard, with 183 (85.9%) libraries. In contrast, the least compliance with the Physical, Environmental, and Equipment Resources Management standard related to the special space for the disabled, with 27 (12.7%) libraries providing services to patients and their families, with 72 (33.8%) libraries, observing the necessary standards for the disabled, with 88 (41.3%) libraries, and proportionate allocation of space based on the standard, with 89 (41.8%) libraries.

Discussion

The present study aimed to evaluate MOHME-affiliated hospital libraries of Iran based on the two standards of Organization and Resources Management extracted from the book of Standards for Hospital Libraries in Iran.

According to the results obtained from the evaluation of hospital libraries, in the components related to the standard of the Organization, more than 90% of the libraries in the component of having a mission, vision, and strategic plan and compilation of general goals based on the vision, and more than 85% of the libraries in the component of developing operational goals, 85% in the component of diagnosis, evaluation, and analysis of users' needs, 84% in the component of having a policy for access to library services, and more than 67% in the component of library independence acted based on the standard. Khosravi et al.'s study (12) concluded that hospital libraries in Iran could use indicators such as the clarity of the mission, the goals of hospital libraries, and the existence of appropriate mechanisms to monitor the organizational structure, consistent with this study's results. Seemingly, observing common components in the strengths of hospital libraries, following a protocol and instructions based on national standards by the Ministry of Health, is one of the thought-provoking points of this research's findings.

On the other hand, in the standard of the Organization, in the two components of the existence of an independent library budget and compilation of the cost description of the library's annual budget in a written form, less than 50% of libraries observed

these two components. Given the global standards underscoring the importance of hospital libraries' autonomy in both organizational structure and financial independence, coupled with the necessity for a specialized librarian (7,9,10), these elements significantly impact the quality of services provided by hospital libraries. Consequently, the findings indicate that in those mentioned two influential components, most libraries do not operate according to the standard, indicating the common fundamental weakness in the library administration, overshadowing the provision of library services. A study by Gharaei (13) found that most libraries' proposed and received budgets do not match, and 61.6% of the libraries need to consider the received budget sufficient to meet the needs of the library. Similarly, Ilali et al. (14) concluded that none of the investigated libraries have an independent budget, which is consistent with the present study. One of the reasons for failing to comply with these standards can be the governmental and hierarchical structure of libraries and their dependence on the parent organization to provide funds.

Based on the results of the hospital libraries evaluation, in the standard of Resources Management, i.e., Human Resources Management, in the five components of the presence of a clinical librarian, presence of computer expert in the library, number of librarians of the post-graduation plan course, number of trainee librarians, and number of contract or part-time librarians, less than 50% of the libraries complied with the standard. Notably, the role of the clinical librarian in evidence-based treatment and medical processes is crucial (15). Saberi et al. (1) concluded that the status of hospital libraries studied in Hamedan, Iran, could be more favorable in standards, which are related to human resources, confirming this study's results on the importance of qualified and specialized librarians. Correspondingly, Aitken et al. (4), Brettle et al. (16), and Yaeger and Kelly (15) emphasized that clinical librarians have specialized skills in retrieving relevant and up-to-date clinical information for healthcare professionals, aligned with the present study results. Bigdeli et al. (17) have addressed the need for technical staff in hospital libraries and considered the lack of technical staff as a challenge. Therefore, regarding the absence of a computer expert in most of the studied libraries and the close relationship between the duties of the information technology expert and the database search systems, their study's findings align with this study. In contrast, more than 50% of hospital libraries



complied with the components related to the Human Resources Management standard, including having human resources working in the library and the number of non-librarian staff, inconsistent with some studies (1,13,14).

The findings of the hospital libraries evaluation in the standard of Resources Management, i.e., Physical, Environmental, and Equipment Resources Management, in the four components of providing services to patients and their families, observing the necessary standards for the disabled, proportionate allocation of space based on the standard, and special space for the disabled, less than 50% of libraries observed this standard. This shows little or no attention to providing services to patients and disabled users regarding space and facilities. According to Ebrahim Ghuchi et al.'s research (18), only a small percentage of the libraries followed the standard regarding their buildings and facilities, while there should be enough space for the library personnel, specialized library staff, and patients, aligning with this study. Hashemian et al. (19) concluded that only 28.5% of the libraries of Tehran, Iran, and Shahid Beheshti Universities of Medical Sciences were designed for the library, which is generally in line with the present study. Remarkably, disabled people have the same rights as other users, so hospital libraries have a fundamental weakness regarding the standards of physical resources and facilities. Regrettably, no study was found regarding compliance with the necessary standards for the disabled.

Conclusion

Evaluating MOHME-affiliated hospital libraries based on the national standard indicates that most hospital libraries in Organization components of having a mission, vision, and strategic plan, compilation of general goals based on the vision, developing operational goals, and library independence, have strengths and performed desirably. Besides, in Human Resources Management, components of human resources working in the library and the number of non-librarian staff most libraries comply with the standard. Similarly, in the physical, environmental, and equipment resources management components of

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compliance of library service hours with the standard, existence of fire extinguishing equipment, and having the number of seats according to the standard, most libraries comply with the standard. Therefore, hospital and library managers are expected to maintain these achievements persistently.

Conversely, most hospital libraries, in the vital components of financial independence of libraries and cost description of the annual budget (Organization standard), employing specialized and skilled staff in providing library services (Human Resource Management standard), and allocating suitable space according to library duties to the users and disabled (Physical, Environmental, and Equipment Management standard), have fundamental weaknesses and do not comply with the standard. Therefore, libraries, hospitals, and parent organization managers must take crucial measures to solve non-compliance problems with the abovementioned standards. Importantly, realizing these standards increases the quality of library services and patient care and ultimately leads to the satisfaction of patients, their families, and service recipients.

Declarations

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Conflicts of interest

The authors declared no conflict of interest

Ethical statement

The current research is extracted from the Master's thesis; therefore, all ethical principles have been observed.

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Authors' contributions

All authors participated in all stages of this study.

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