

## Medical professionals seem to still take literature searching and its accuracies to be a “nice to know” skill and not critical: **Vasumathi Sriganesh**

**Vasumathi Sriganesh** is a librarian by training with excellent exposure to medical librarianship in her stint as Librarian at Hinduja Hospital and HELP. She is now CEO of QMed Knowledge Foundation, a successful entrepreneurial venture established by Vasumathi in 2007. Her passion for training medical professionals especially for searching the literature for evidence based medicine has not only brought her a name but also made QMed as one of the model entrepreneurial initiatives by an Indian library professional. Medical professionals have been highly benefitted from her 400+ training programmes conducted at prestigious medical organizations across the country. In 2013, she won the ‘International Clinical Librarians Conference Evidence into Practice Award’ for her outstanding contributions to bringing evidence into practice in the field of healthcare.



In this interview with **Santosh C. Hulagabali** for Open Interview, **Vasumathi** shares the candid stories of her journey from librarian to a successful entrepreneur. She talks on the worldwide scenario of entrepreneurial ventures especially in library profession; how important the literature search for evidence based medicine is and how QMed is working in this line. She also shares a detailed account on how she initiated QMed, the initial challenges she faced and how she overcame them. She gives valuable inputs as how library schools and information professionals should tap the entrepreneurial opportunities in the library domain and what necessary skills and efforts are needed to be a successful entrepreneur.

- **QMed Knowledge Foundation is one of the significant entrepreneurial ventures in Indian Library and Information Science (LIS) community. Indeed, your initiative is inspiring. Please share with us the journey of QMed?**

QMed Knowledge Foundation has a very interesting history. I first started QMed as a company, wanting to be a “consultant” in various areas of health information related to the IT space. So I

set up the company in February 1999 with a small team of three freshly qualified enthusiastic librarians. We did all kinds of things then – literature searches for doctors and pharma companies, data entry of library holdings for a medical college library, teaching doctors how to use the internet – especially for literature searching and more. A little later, with the help of a technology company, we even helped a number of medical entities set up their websites and would keep updating it for them. We worked for prestigious institutions – KEM Hospital, NIRRH, NIIH and more. We also took on the job of demonstrating SLIM software for Mumbai libraries and training them, in using it, once their libraries purchased the product.

In 2004, we came up with a very interesting product which we named “QMedLINKS”. We took a list of diseases and created subtopics for each – e.g. – for diabetes we would take causes, treatment and more. For each subtopic, we created hyperlinks to search strategies that we created – getting the most relevant results. We did a preliminary testing with many doctors and they all praised the product. We thought that we would sell this very easily and then make several more on various topics.

But that did not happen. It turned out that most people did not even understand what our offering was! We had put these on CDs and sold them. One doctor actually wanted to return it and put a stop payment to the cheque he gave us.

For some time before that, we had thought that we needed a non-profit set up and focus on training and teaching. This incident made us choose to do that. It took about three years for a final decision plus setting up of the Trust! And QMed Knowledge Foundation was set up in December 2007. *(Some pharma companies did give us work in this area and we created a number of products for them.)*

• **Before you initiated QMed, you started your career as librarian of Hinduja National Hospital and Medical Research Centre, Mumbai and later you worked with Health Education Library for People (HELP). How has this experience come handy to be an entrepreneur and initiate QMed?**

When I was the librarian of the Hinduja Hospital, we subscribed to MEDLINE on CD-ROMs. I used to help practically every doctor and resident doctor (junior doctors) with their literature searches. I read the user manual cover to cover, I read articles on how to search Medline and learned about user expectations by sitting with everyone who wanted searches. This “getting hands dirty” was the best experience as one learned what people needed and whether they could express it- right or not. I also learned that doctors did not know a lot of what I knew and assumed they knew! So in addition to helping them with searches, I would often teach small groups how they should search.

In HELP, while it was primarily for the general public, we encouraged doctors to come for MEDLINE searches. We had access to MEDLINE via an internet site (PaperChase). Again the one to one experience with doctors helped me learn a lot.

I must clarify here that for actually searching MEDLINE – it was my Library Science education that made it easy – since we had learned about thesauri and indexes and how they needed to be used in searching. I applied that theory to MEDLINE and learned the search techniques on my own. The doctors who came, gave me the “contexts” – the topics one could learn about, the user behavior and more.

• **As a Librarian, you were selected for a couple of fellowships. You were supposed to stay in the US to study specific aspects of medical librarianship, but you could not accept this for personal reasons? How important this offer was for you and do you regret not accepting it?**

The US fellowship is a story I always feel sorry about. I got the news of winning it after I had left HELP, to start on my own. When I wrote to the body offering the fellowship and told them that I was now an independent consultant, they withdrew the offer and said that one had to work in a library to be able to avail of it. I must have cried for hours and days once I learned of the withdrawal. Interestingly, later I did apply again (after getting a confirmation from them that I could – as QMed was an institution – albeit a Pvt. Ltd. company) but I did not get selected for the same.

In the US, and the UK, there are librarian-entrepreneurs, and they are highly respected and are included for consideration for awards and invitations. But I think they need the entrepreneurs to have a company or such an entity, and not be an individual consultant, like I was, when I first left HELP

• **Sustaining an entrepreneurial firm for such a long period is itself an achievement. What were the initial challenges and how did you overcome them?**

The challenges are very much there even today! Let me share some of the challenges – of the early days, some regular and those that still exist today:

In the beginning it was about getting known. When you just start, you have nothing much to show. True in any new entity, but in my case it was about getting people to understand what I offered to do.

I had absolutely no clue about businesses and so many things were difficult – even deciding what directions to take was tough. And when people asked me about business plans, I would die of fright!

Money of course is a great challenge. As a salaried employee, one looks forward to the new month and the pay cheque. For entrepreneurs, it can often be a time to dread – having to make payments and money being short.

For QMed’s main activity, even today after so many years it is a challenge to have money freely flow in to make all payments and to give what I feel is a good salary to employees. This is because, our target audience – people from the medical field, seem to still take literature searching and its accuracies to be a “nice to know” skill and not critical. If QMed had all its weeks full with workshops, then we would probably be doing good. And, I have to add, that we almost always have to justify why we charge for our workshops! Institutions – especially the government bodies seem to struggle with deciding which budget to pay us from – since there is no budget for training!

• **How important literature search skills are for medical science students and practitioners. Is training to find updates and evidences not part of their health science curriculum (in India)?**

Literature searching is the most foundational activity for any research. In the medical field it is also important for practitioners to keep abreast in their field and to find the right evidence, in order to give their patients the best options for their healthcare. In the pre-internet days, because of the lack of easy availability of information resources, everyone understood the limitations and research was often based only on resources locally available. So was medical practice. But today there is a deluge of information. People “make do” with what they get in the first couple of pages of their search results, or struggle hard to find the literature they actually would like.

And yes – such training is not part of the health sciences curriculum in India, and most developing countries. In the developed nations, a lot of librarians are very well trained in these skills and offer help in their libraries. Medical students are exposed to such learning, But, I have learned that more needs to be done there too.

Recently I had conducted a two day workshop at an ICMR centre. Senior attendees said that this workshop was needed in all ICMR centres as people do not know these skills. That speaks of why there is a lacuna in the country. And yet – nothing has happened for getting more invitations across other centres. As I discuss with doctors it really turns out that this skill has not been prioritized. But I do not complain – there are so many problems like this in the country and in the world. One has to keep at it and not give up. While one works towards the results, one has to be ready for success as well as for no results in one’s career span. Results that one desires may happen later.

• **QMed is bridging this gap through training programmes. Your 400+ lectures in workshops held across India are testimony to it. How has the trainer in you emerged? Please share with us more details about your training programmes?**

As of November 2019, we have conducted more than 240 workshops and have delivered more than 425 lectures. I of course have done majority of these. The “trainer in me” has evolved in several ways:

First, I genetically have good teaching skills and aptitude – my father, grandfather and some other relatives were all excellent teachers. I am thankful for this inheritance.

I have always watched the faces of my audience, to figure out what seemed difficult for them. And then I have tried to make that part of my teaching easier and easier. For example, I found that many find it difficult to absorb how Boolean Operators work in searching. I tried different methods to teach these concepts and finally stuck to one that worked for a majority.

In the beginning, out of enthusiasm, I used to try and teach everything I knew, believing that I should not hold back anything. Later I learned that it was important to figure out “what should be most importantly taught” in a given session and stick to that. My colleagues and I went for a workshop on good presentation skills and the trainer told us that we should stick to teaching the “tip of the tip of the iceberg” of what we know. The rest – we can give handouts, have more information on our websites and maybe more training sessions. After this, my workshops were still better received!

Today, we have three of our courses online and we offer to help people who enroll, one full year of support by email or through online mentoring sessions.

• **What is the trend in imparting health information services to the medical community in other countries (especially the developed countries)? How are librarians and entrepreneurs working there in this area?**

Most developing nations have the same set of problems that we have. As far as I have observed, in the more developed nations, health sciences librarians go through lots more training specialized for this area. They offer training and mentoring sessions in their libraries and also put up online learning resources created by them in their library portals. I know some librarians who have retired from their jobs or left their jobs after a couple of decades of experience and offer consulting services in literature searching and more. I am not sure how much they do and how well it pays them.

• **In 2018, you started an online course in partnership with Mediknit. How are these courses being conducted and what is the response?**

We started one online course with Mediknit in 2018 and in October this year we added two more. Mediknit is a Bangalore based venture run by a doctor and a pharmacist and their team. They have several online courses, in partnership with many medical associations. Mediknit made it easy for us to start our online courses, by giving us a platform, doing all the video recordings, and importantly collecting money from participants, giving them receipts and having all the online management facilities. In the first year, one medical association subscribed to the course for all its members. This year the Manipal Academy has taken our courses for 1000 faculty and students,

across three institutions. Then there are several individuals who have also enrolled. We have had some really excellent feedback from many of these people and hence believe that the courses are doing and will do very well. We on our side commit to continuous improvement and will work towards interacting with those enrolled and asking for suggestions to do more.

• **How to educate a common man/ public? Is QMed working in this line?**

QMed did start doing some work in this area. We have given a few lectures in offices and in public spaces, to sensitize public about how to productively search online for health information. But we realized that there are many challenges in doing this, and have not focused heavily on this. We do have this activity in our plans, once we reach a certain level of operations with our online courses.

Educating the public right now means, we can only educate the internet users, and for the most part – English speaking internet users. Then, explaining our offering to them can be a challenge, because I have noticed that their expectations are different – they would often look for advice or suggestions on choosing the best doctors, choosing the right hospitals or choosing the right treatment. They need to understand that our role is by and large to help them find all the information they need, to discuss with their doctors and make their plans. Also, in this kind of approach, the public has to realize its own responsibility. Medicine is not an exact science, and one has to either trust the doctor or do online research, discuss with the doctor and take some decisions *and be responsible for those decisions*.

This – I feel – very few in our country are ready for. I may be very wrong, but we do not have the funding to spend time and energy to understand the scenario better, or to do lots more work with the public. Again, I also feel that once we work lots more with the health care community, this is a job we may want to do *with them* so that it is a collaborative effort. Time will show us the way!

• **Indeed, fund raising is a challenging task. It needs a whole lot of continuous efforts. How is QMed working on it?**

This is my favourite question and I love people who ask me this!

Many do not realize how tough this task is. So, for a major part I have used my own savings and my family has contributed funds for me to carry out activities. We charge for our workshops, but what we raise through them is small. We have done crowd funding activities through online portals. For the last six years, we have raised about \$40000 through GloblaGiving – a US based crowd funding site. We have also raised funds through an Indian site – ImpactGuru – for short periods.

Fundraising is actually a full time job, but we cannot afford a full time fund raising personnel.

Fundraising involves getting to know a donor well, getting to know how to use technology well for this purpose; it requires very creative communications and lots more. Then there are income tax and legal areas that we need to watch out for. A lot of my time goes in handling several of these aspects.

• **As per your experiences, which areas of the library domain have more entrepreneurial opportunities and how to tap them?**

I will answer this exactly based on my observation and experiences, and will claim that I may not be able to address all opportunities. I will also state that that entrepreneurial – has to be thought of as a single person doing freelance or consulting activity, or having an established entity with a team – small or large.

I guess libraries need extra help in areas like converting their catalogues into online records. An institution may need help with relocating libraries, library planning and more. These days I do get requests for advice on the right set of journal packages or databases to subscribe to. At a higher level librarians can offer training and consulting in more areas of research, after of course going through such training.

In the health sciences field, in foreign countries, I am aware of librarians who offer to do literature searches for those who author systematic reviews, because this type of searching requires a lot of expertise and time. If one explores there should be several opportunities. But what librarians need is not just the domain expertise, but good communication skills, management skills and lots of confidence, - all that is required in any business – whether for profit or not-for-profit. In India, Mr Satyanarayana of Informatics (India) Ltd. has of course demonstrated the highest achievement, in selling information products and creating some too.

• **Why do we not see more entrepreneurial success stories (like yours) in Indian LIS domain? Is our LIS curriculum is responsible as curriculum of many of the LIS schools lack entrepreneurial components? Or are there any other angles to it?**

I certainly will not blame the curriculum alone, while stressing that the curriculum needs revision every year. It is an irony that India produced Dr. S.R. Ranganathan, the founder of the library movement, and yet librarianship is just not one of the chosen career options, nor is it a well-known one. I think any entrepreneurship in the LIS domain will happen when schools focus heavily on getting every teacher and student to exploit its library and services fully. Then these students – as they grow up understand the importance of having excellent / highly capable librarians and informaticians available to them in their academic world as well as professional world. When there is a demand, then the supply increases. In the meantime, librarians need to work on themselves too. Whether they go into entrepreneurship or not, they need to understand and value it.

I remember in my early days of being an entrepreneur, a senior librarian introduced me to another, saying “She is an entrepreneur – which means pots of money”. I was quite shocked. I have never seen pots of money from my work till date; in fact I have invested more money into the profession than I have received. I have no regrets about it though. Yet another remark I hear is “You are lucky – you do not have a boss to contend with / you can take leave when you like / you get to travel so much...” and more.

Librarians need to understand that all this is one side of the coin and the other side is the much tougher side. I have not seen such attitudes in the western world, about entrepreneur librarians. So, while our courses may need to do more, that alone will be totally inadequate. The entire profession needs to work on understanding entrepreneurship and also the education system needs to be revamped in terms of what libraries and librarians can and should do. Only when people know what qualified and excellent librarians can do, will there be a demand for that kind of work.

One more point I would like to add is that today anyone who studies LIS courses needs to be prepared for non-traditional library roles too – both as employees or entrepreneurs. My own colleague – Ms Fatima Shaikh has become much more of a technology expert and single handedly handles our QMed website and also helps a lot with planning our online courses. It is not a crime to not work in a library, with an LIS degree. One can apply the learning from LIS in so many different areas – in research, in Archive management, and website management to name a few. I am sure there will be several opportunities for entrepreneurship, if one diversifies.

• **What’s your message to library and information science schools/teachers in view of instilling the entrepreneurial skills among the students?**

I would say – understand and study about entrepreneurship better, and then come together and infuse the needed attitudes and skills among the students. Importantly, do not make entrepreneurship sound as if it is a “money making” activity. Money is important of course but making money as an entrepreneur is not easy.

• **Your appeal or advice to those practicing library and information professionals who wish to be an entrepreneur?**

All I would say is- be ready to learn a lot. Be ready to diversify. Be ready for hard work, sacrifices, struggles, rejections and more. Be ready to go back to employment if required. But most importantly enjoy all the learning – that is something you get far more of in entrepreneurship than in a job! Count every blessing.



- I think there is need of a special and active association of/for LIS entrepreneurs to have a formal and common platform to discuss on entrepreneurial issues and thus generate a revived awareness among the LIS community? What is your say on this?

This would be great, and honestly I was not even aware that there is such an interest. If there is a group – even an informal one could definitely make a great difference

- How can one be associated with QMed if he/she wishes to learn what you teach and support your initiatives to spread the knowledge?

For those in the health sciences fields, one can register for our “online courses” and automatically get the benefits of “Friends of QMed” as well. Information about both is available on our website –Our blogs are also a source of learning. If anyone else needs to be associated, one has to get in touch with us and find out what we can do for each other.

- In your entire entrepreneurial journey, how crucial was the role of your family, LIS professionals and your QMed support team?

Very crucial. My family has obviously been a pillar, both with financial as well as other forms of support – being proud of QMed’s achievements. The QMed team – every individual over several years has been a source of support. I am in touch with most of them even today.

- Indian and international LIS entrepreneurs you admire and follow?

Satyanarayana of Informatics (India) Ltd.; Tasneem Gadiwala - Knowledge Management and Library Consultants (KMLC). I have not personally kept in touch with her work, but have learned about some good success stories from her website; Carol Lefebvre. She is in the UK. She has worked for the Cochrane Collaboration and is an expert in database searching. She is now an entrepreneur. I have no idea how her entrepreneurial venture is succeeding, but she is full of knowledge and a great teacher.



**Note** • All the answers/ opinions expressed in this interview/document are of the interviewee.



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**Credits** • Vasumathi Sriganesh's photo: <https://www.qmed.ngo/> • Document design- Santosh C. Hulagabali



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