Global Journal of Applied, Management and Social Sciences (GOJAMSS); Vol.23, December 2021; P.24 – 37 (ISSN: 2276 – 9013)

INFLUENCE OF PERCEPTION AND USE OF MEDICAL INFORMATION RESOURCES ON JOB PERFORMANCE, JOB-SPECIFIC TASK AND NON-JOB-SPECIFIC TASK PROFICIENCIES OF MEDICAL DOCTORS IN TEACHING HOSPITALS IN SOUTH-WEST NIGERIA

VINCENT E UNEGBU
Professor, Department of Information Resources Management
Babcock University, Ilisan-Remo, Ogun State, Nigeria

&

CLARA CHINYERE OKORO
Professor, University Librarian,
Babcock University, Ogun State, Nigeria

&

CHIOMA EURIEL UZOHUE
Department of Information Resources Management
Babcock University, Ilisan-Remo, Ogun State, Nigeria

Abstract
The study explores the joint influence of perception and use of medical information resources on job performance, job-specific task and non-job-specific task proficiencies of medical practitioners in teaching hospitals in South-West Nigeria. The study adopted the survey design to investigate six teaching hospitals in the South-western Nigeria. Multi-sampling was used to administer 391 copies of questionnaire to the medical practitioner but 390 were returned for data analysis, making the response rate to be 99.7%. Data obtained were analyzed using inferential statistics (simple linear regression). Findings revealed that perception of medical information resources (MIR) and use of medical information resources jointly influenced job performance, job-specific-task and job-specific-task proficiencies of medical practitioners in university teaching hospitals in South-West, Nigeria. It was, therefore, recommended that for medical practitioners to success in achieving optimal job outcome, these factors (perception of medical information resources and use of medical information resources) should be put into consideration by the management of the teaching hospitals in university teaching hospitals in South-West, Nigeria. Nonetheless, the management must bear in mind that the medical practitioners can still be proficient in their job and non-job specific tasks even when they do not utilize medical information resources.

Keywords: Job performance, job-specific task proficiency, non-job-specific task proficiency, Perception of medical information resources, use of medical information resources, University Teaching Hospitals, South-West Nigeria

Introduction

Job performance is associated with the behaviour and outcomes/actions that employees exhibit in workplace which can be evaluated in terms of the extent to which it contributes to organizational effectiveness (Onukwube, Iyagba & Fajana, 2010). The behaviour aspect denotes the action people exhibit to accomplish a work whereas the outcome aspect explains about the consequences of individual job behaviour (Campbell, 1990). In other ways, job performance is related to the extent to which an employee is able to accomplish the task assigned and how well the accomplished task contributes to the fulfilment of the organizational goal. The need to ensure optimal performance form medical practitioners cannot be overstated. Medical practitioners are required to have job knowledge, skills/ ability and experience to

ensure that they make accurate diagnoses, prescribe the appropriate medications for diseases, perform thorough patient examinations, and adhere to professional standards and guidelines which are the fundamental job responsibilities assigned as a part of job description.

The crux behind job performance is the ability to handle job task through prerequisite technical knowledge and experience that will bring about quality work outcome and innovative ideas. Medical practitioners, in effect, play critical roles in delivering high-quality healthcare and promoting people's well-being, especially patients. Medical practitioners are responsible for conducting health evaluations of patients, running diagnostic tests, prescribing drugs, developing care plans and playing vital roles in providing health and wellness advice to patients, according to Okoro and Okoro (2009). Hence, they need to be well-informed, well-versed, and capable of carrying out their responsibilities successfully in their workplaces with the skills acquired from available, accessible and current medical information resources. World Health Organization (WHO) (2016) attested that the provision of quality care is dependent on the availability of a sufficient number of competent, committed and motivated health professionals working in a system with sufficient resources. Medical practitioners have to conform to their professional code of conduct and standard to ensure no harm is caused to patients. It is important that medical practitioners ensure that care for patients is effective and safe.

Medical practitioners in university teaching hospitals carry out essential duties towards their patients by assessing patients' conditions, making the right diagnosis, prescribing the right medications and explaining to patients the advantages, disadvantages and the risk of treatment. The manner in which the medical practitioners perform these duties could make a difference in the treatment of patients. There are however, indications in existing literature showing poor performance of medical practitioners which is reflected in medical negligence and errors exhibited in form of misdiagnosis of illnesses, wrong treatment plans, wrong drug prescriptions and non-adherence to professional procedures and guidelines in a clinical setting (Babatunde et al, 2016; Dieleman & Harnmeijer, 2006; Iloh et al, 2017). Medical errors interfere with the quality-of-care patients receive from their physicians. This can hinder the attainment of desired level of performance at workplaces leading to poor performance of medical practitioners. This is buttressed by the personal observation of the investigator in a hospital in Nigeria.

The construct of job performance of medical practitioners can be classified into job-specific-task-proficiency and non-job-specific-task proficiency. The former describes the ability of medical doctors in the non-technical aspects of their jobs while the latter refers to the proficiency of medical practitioners in their technical duties (Jankingthong & Rurkkhum, 2012). Hence, medical practitioners are expected to be evaluated based on job-specific and non-job-specific task proficiencies. They are also expected to perform well in these areas to attain the organizational goals and objectives. JSTP is what people do at work to improve organizational effectiveness and employee's performance levels. To put differently, job-specific task proficiency constitutes factors such as creativity and innovation, quantity, job experience, work quality, competencies, training and professional growth. In other words, poor performance of medical practitioners in the aforementioned tasks reflect poor performance in technical task. JSTP is what people do at work to improve organizational effectiveness and employee's performance levels. To put differently, job-specific task proficiency constitutes factors such as creativity and innovation, quantity, job experience, work quality, competencies, training and professional growth. In other words, poor performance of medical practitioners in the aforementioned tasks reflect poor performance in technical task. NJSTP is complementary to JSTP of medical practitioners in the accomplishment of organizational objectives (Jankingthong & Rurkkhum, 2012). It is important to identify, recognize and address the issues relating to the NJSTP of medical practitioners in the workplace. To put differently, NJSTP entails taking on additional roles in order to complete job tasks. Factors such as maintaining personal disciplines to achieve results, educating patients on health concerns, communicating effectively with professional colleagues and patients, cooperating with professional peers in groups to achieve required actions, and participating in an

interdisciplinary committee to promote organizational objectives are all measures of NJSTP in the medical practices.

Some variables can be used to explain, determine and improve the job performance of medical practitioners in the teaching hospitals, notably amongst these variables are perception and use of medical information resouces. The use of medical information resources (MIR) can enhance job-specific task proficiency, non-job-specific task proficiency and job performance of medical practitioners. It is expected that MIR should exhibit qualities such as usefulness, currency, timeliness, accessibility, relevance, accuracy, reliability and adequacy. These measures of perception of quality of MIR are motivators that could attract or distract the use of MIR by medical practitioners. However, when these qualities are perceived to be lacking, the medical doctors would be handicapped in their effort to make use of information resources at work. This situation can impede their performance on the job and as well as the utilization of the MIR to acquire more information and knowledge that will enhance job performance.

Several variables have been linked to poor job performance of employees in the past, but few have linked poor performance of medical doctors to perception and use of medical information resources as pointed out in earlier studies (Haliso & Aina, 2012; Wahab, Shamsuddin, Abdullah & Hamid, 2016; Yamson, Appiah & Tsegah, 2018). Idiakheua and Obetoh (2012) argued that, when medical practitioners are dissatisfied with MIR in the library, the zeal to use the library in carrying out work activities might reduce thereby leading to undesirable behaviours such as poor library attendance which affects the level of performance. In a situation where medical practitioners do not make optimal use of MIR; the job duties might suffer thereby reflecting in medical negligence and errors, depressed quality and quantity of work outcome. In addition, the extent of utilization of MIR by medical practitioners have been adjudged to be poor as established by the works of Gakibayo, Ikoja-Odongo & Okello-Obura (2013), Ojo and Akande (2005).

Also, scholarly authorities Ekere et al (2016) argued that poor perception of MIR among medical practitioners could lead to poor job. Moreover, several studies have interrogated separately, the roles of perception and use of information resources on job performance, job-specific and non-job-specific task proficiencies (Ekere et al, 2016; Ndosi &Newel, 2010). None of the reviewed studies considered the joint influence of perception and use of medical information resources onjob performance, job-specific and non-job-specific task proficiencies of medical doctors which suggests that there is a gap to be explored. On this premise, the researcher aims to investigate the perception and use of medical information resources as predictors of effective job performance of medical practitioners in the University teaching hospitals in South-West, Nigeria. Therefore, this paper seeks to examine the perception of medical information resources, job-specific-task-proficiency, and non-job-specific-task-proficiency among medical practitioners in teaching hospitals in South-West Nigeria.

Literature Review

Numerous works have been done on perception and use of medical information resources in relation to performance of employees in the work places. However, there is a dearth of information on the joint influence of perception and use of medical information resources and job performance, job-specific-task-proficiency, and non-job-specific-task-proficiency of medical practitioners. Elnaga (2012) examined the impact of perception on work behaviour and also attempted to provide some viewpoints, and empirical results to understand the relationship between perception and workplace behaviours. The author acknowledged that individual differences are important in studying organizational behaviour and employees' management. Individual differences have a direct effect on behaviour. The study concludes by asserting that perception may increase or decrease the cognitive abilities and the different skills in the enhancement of job activities. In another research, Mohanty and Mohanty (2014) examined employee perception on work-life. The findings showed that perception factors such as long working hours, heavy workload impacts on employee performance increase the intention to leave or stay on the job. On the contrary, Agha, Azmi and Irfan (2017) examined work-life balance among university and school teachers

in Aligarh. Findings of the study revealed that while work interference with personal life and personal life interference with work had a negative relationship with job satisfaction, work and personal life enhancement had a positive relationship with job satisfaction. Work and personal life needs to be integrated and balanced by organizations through work-life balance initiatives.

Pandey and Singh (2014) conducted a study and found that most of respondents were satisfied with library resources and services. It also discovered that books were perceived as the most
commonly used resources and they agreed of using different types of printed and e-resources resources available in the library. Kosteniuk, Morgan and D'Arcy (2013) examined the information sources that family physicians (FPs) most commonly use to update their general medical knowledge, to make specific clinical decisions, and the information sources FPs found to be most physically accessible, intellectually accessible (easy to understand), reliable (trustworthy), and relevant to their needs. Medical textbooks were the most popular information source for family physicians' (FPs') for clinical decision-making purposes and updating of FPs' general medical knowledge. In a similar study, Wallace, Beckett, and Sheehan (2014) examined pharmacists' use and perception of UpToDate which a source of information for providing specific patient care recommendations and evidence-based information for clinical decision making at point of care. The study revealed that most respondents who used or had heard of UpToDate indicated willingness to change a treatment plan based on UpToDate recommendations (77%). Many believed that UpToDate is updated weekly (31%) or monthly (49%) and that all articles undergo external peer review (51%). however, many pharmacists may hold misconceptions regarding the updating and peer review processes of UpToDate.

Also, Thiele, Poiro, Scalzo and Nemergut (2010) examined the speed, accuracy, and confidence in Google, Ovid, PubMed, and UpToDate. The result found that, physician opinion of these sources of information has been extensively acknowledged to improve patient's care and more satisfied with the accuracy of information retrieved and ease of use of the resources. In a related study, Chakroborty (2014) examined the use the internet and electronic resources for medical science information of Sylhet Division, Bangladesh. The results showed that all the respondents used internet frequently because the faculties were provided with internet connection for accessing online journals, downloading software or text, chatting, discussion, E-mail services and for finding related references. It was also revealed that the researchers and students of medical colleges are getting quality information through the internet. The analysis reveals that 72.2% of internet users always find useful information on the internet. Forty-two % of respondents believed that quality information is available on the internet.

Studies have shown that when employees perceived that they are frustrated and dissatisfied on the job, this can lead to increase in anti-social job behaviours (Luthans, Stajkovic, & Locke 2010; Spector, 2008). Hence, it is obvious that negative perception may discourage the use of medical information resources in the library and as such reduce the level of performance. Ally Sornam, Priya, and Prakash (2013) studied the faculty perception on Library facilities in Autonomous Arts and Science Colleges in Tamil Nadu, India to survey user's perception on information resources and services. The results of the study revealed that the faculty has a low perception of the library collections, services, ICT facilities, and manpower and infrastructure facilities of libraries in these colleges. Aberese-Ako, Dijk, Gerrits, Arhinful and Agyepong (2014) examined how perceived injustice in policy and organizational matters affects the morale of frontline health workers and the consequent effects on the attitudes and efficiency of workers in providing public hospitals with maternal and neonatal health care. The findings of the study showed that most workers perceived injustice in distributive, procedural and interactional dimensions at various levels in the health system. Iwhiwhu and Okorodudu (2012) in their study found out that poor state of information resources and inadequate services provided by the library staff, together with their poor approach to work leads to unsatisfied users. According to them, users' perception on satisfaction about library information resources is a way by which users judge the adequacy of library information resources and services rendered to their users. The satisfaction of library users is reflected by how users feel after using the

information tools and facilities and their desire to return to the library when they need information next (Ikenwe & Adegbilero-Iwari, 2014).

The negative perception of medical information resources could be seen in perceptions of usefulness in terms of relevance of content, availability, accessibility and how current the MIR are in meeting the information needs of medical practitioners. the study of Ikolo (2020) investigates doctor awareness and perception of the information resources and services in the Delta State University Teaching Hospital (DELSUTH), Oghara. The study revealed that the doctors are mostly aware of the availability of medical textbooks 64 (97%), while, the doctors are least aware of e-journals, conference and seminar papers 3 (4.5%) respectively. The study also found that although the doctors perceived information from information resources to be of clinical value and 37 (56%) of the doctors agreed that the information they received from the library provided new knowledge and 36 (54.5%) of the doctors agreed that information received from the library was not always relevant, accurate and current. This implies that majority of the doctors perceive that the information resources and services are inadequate.

According to Ijiekhuamhen, Aghojare and Lerdinand (2015), the level of using the library depends on users' satisfaction with the available information resources and services rendered to them. Users' satisfaction could be considered as the satisfaction users derive from the library by using the various types of information resources and services to fulfil their information needs for their various daily activities. Thus, the availability of quality information resources and services in libraries may have a significant influence on users' satisfaction. When users are satisfied with library information resources, they not only come back but speak well of the library to other users. It is therefore important to investigate users' level of use of information resources in order to assure that users' information needs are continually being met. Use of medical information resources in the context of this study is the extent to which medical information resources make use of these resources. Research conducted by Ogunyade and Obajemu (2006) studied the use of information resources in selected health science libraries in Lagos, Nigeria. They investigated the information sources used by health care professionals in the course of their research and their relevance in the national health system. In one of their findings, it showed that printed textbooks and journals were heavily used in the conduct of research, clinical practice and health professional's education. The findings further showed that printed textbooks and journals were the principal sources of information followed by audio-visual resources. In a similar study, Brennan et al (2014) explored qualified doctor and medical students' use of resources for accessing information and to determine what is used and why. Many information resources exist to support evidence-based clinical decision-making. The findings revealed that doctors utilized wide range of specialized information resources to generate information for healthcare services to satisfy their information and work needs. Ajuwon (2015) examined internet accessibility and use of online health information resources by doctors in training healthcare institutions in Nigeria. This study revealed that the internet is a popular source of health information for health care practitioners and also an important mechanism for collaboration and interaction between individual medical practitioner or research groups for health information dissemination and transformation of medical care. The study further revealed that, medical doctors accessed high quality, current and relevant health care information from the internet to transform their skills proficiency in diverse ways such as teaching of organs, diagnosis of diseases and medical examination.

Objectives

The specific objectives of the study are to:

1. determine the influence of perception of medical information resources on use of medical information resources will not jointly influence job performance of medical practitioners in University teaching hospitals in South-West, Nigeria.
2. examine determine the influence of perception of medical information resources and use of medical information resources will not jointly influence job-specific-task-proficiency of medical practitioners in University teaching hospitals in South-West, Nigeria.

3. ascertain determine the influence of perception of n medical information resources and use of medical information resources will not jointly influence non-job-specific-task-proficiency of medical practitioners in University teaching hospitals in South-West, Nigeria.

Research Hypotheses

The study sought to provide answers to the following research hypotheses:

1. Perception on medical information resources and use of medical information resources will not jointly influence job performance of medical practitioners in University teaching hospitals in South-West, Nigeria.
2. Perception on medical information resources and use of medical information resources will not jointly influence job-specific-task-proficiency of medical practitioners in University teaching hospitals in South-West, Nigeria.
3. Perception on medical information resources and use of medical information resources will not jointly influence non-job-specific-task-proficiency of medical practitioners in University teaching hospitals in South-West, Nigeria.

Methods

The study used the descriptive research design to investigate the job performance of medical doctors in university teaching hospitals in South-West, Nigeria. The population of this research consisted of 2,913 medical doctors in University Teaching Hospitals in South-West geopolitical zone of Nigeria. Southwestern Nigeria is one of the six geo-political zones and made up of six states are Lagos, Ondo, Osun, Ogun, Ekiti, and Oyo. The university teaching hospitals in the region are: University Teaching Hospital, Ado Ekiti, Lagos University Teaching Hospital, Idi-Araba, Lagos, Olabisi Onabanjo university Teaching Hospital, Sagamu, University of Medical Sciences, Ondo, Obafemi Awolowo University Teaching hospital, Ile-Ife and University College Hospital, Ibadan. The sample size of the study was 391 medical doctors, based on Taro Yamane sampling size determination formula. A 3-stage sampling technique comprising purposive, proportionate stratified and accidental sampling methods were adopted for the study. The research instrument indicated a reliability index of 0.788, signifying that the research instrument is reliable. Out of the 391 copies of questionnaire administered, 390 copies were retrieved for data analysis which constituted 99.7% of the response rate. Inferential statistics (simple linear regression) was used to answer the research hypotheses.

Findings

The respondents' analyzed demographic data are shown in Table 1

Table 1: Respondents' demographic information

Demographic Variables	**Frequency (n)**	**Percent (%)**
Gender		
Male	255	65.4%
Female	135	34.6%
	390	100.0%
Age		
Below 30 years	117	30.0%
30-40 years	156	40.0%
41-50 years	97	24.9%
51-60 years	17	4.4%
Above 60 years	3	0.7%
	390	100.0%
Years of experience		
1-10 years	242	62.1%
11-20 years	101	25.9%

21-30 years	35	9.0%
31-40 years	9	2.3%
41 years and above	3	0.8%
	390	100.0%
Highest educational qualification		
MBBS	225	57.7%
MSC	98	25.1%
PHD	67	17.2%
	390	100.0%
Professional qualification		
FRCS	213	54.6%
FRCP	85	21.8%
FMCS	75	19.2%
FMCP	5	1.3%
FWACS	7	1.8%
FWAC	5	1.3%
	390	100.0%
Area of specialization		
Community medicine	22	11.7%
Internal medicine	17	9.0%
Paediatrics	28	14.9%
Surgery	37	19.7%
Obstetrics and gynaecology	52	27.7%
Haematology	30	16.0%
Pathological science	2	1.1%
	188	100.0%
Job position		
Medical officer	106	27.3%
Senior medical officer	68	17.5%
Registrar	113	29.1%
Consultant	101	26.0%
	388	100.0%

Source: Researcher's Field Survey, 2021

The result of the study on gender is shown in Table 1. Table 1 revealed that two hundred and fifty-five respondents (n=255, 65.4%) were males while 34.6% (n=135) of the respondents were females. This suggests that there are more male medical practitioners than females in the University teaching hospitals in South-west, Nigeria. Hence, the University teaching hospitals in South-west, Nigeria is male-dominated profession. The result on age revealed that 70.0% of the respondents (n=273) were below 40 years of age. These are usually the active working ages. From the result, it could be concluded that many employees in the medical sector under study were still in their prime age, young and energetic. Therefore, most members of the medical work force are within the productive age, which encourages efficient, effective and productive performance. Sixty-two percent (62.1%) of the medical personnel in the University teaching hospitals had 1-10 years' work experience while those with 41 years and above were 0.8%. This result showed that many of the participants in the study area have worked in the medical sector for quite a while. By implication, the tacit knowledge and job experience of the medical practitioners can be vital in achieving organizational effectiveness of the University teaching hospitals.

Table 1 indicates that medical practitioners with MBBS (57.7%, n=225) have the highest educational qualification while PhD is the least at 17.20% (n=67). This type of result is expected since as university teaching hospitals will more likely give higher priority to employing people with basic qualifications than others. The very few participants that possess doctorate degrees indicate the need for medical doctors to upgrade their qualifications, a situation which the National Universities Commission has constantly complain about. Table 1 indicates that medical practitioners with 54.6% (n=213) possessed FRCS while FWAC is the least at 1.3% (n=5) and FMCP (N=5, 1.3%). This shows that most staff in the University teaching hospitals, Nigeria have the basic professional qualification in medicine. Obstetrics and gynaecology unit had the highest number of staff, 27.7% (n=52) while Pathological science (1.1%, n=2) was the least. This result also suggests that the sample cut across the various units in the University teaching hospitals under study. Twenty-nine percent (29.1%, n=113) of employees in the study were registrars while the senior medical officers were 17.5% (68). This suggests that registrars participated more in the study. This result could also imply that the University teaching hospitals under study are largely dominated by registrars.

Hypothesis One: Perception on medical information resources and use of medical information resources will not jointly influence job performance of medical practitioners in University teaching hospitals in South-West, Nigeria.

Table 2: Joint influence of perception on medical information resources and use of medical information resources on job performance

Predictors	**B**	**Beta (β)**	**T**	***P***	**Tolerance**	**VIF**	**R^2**	***Adj.* R^2**	**F**	**ANOVA (Sig.)**
(Constant)	2.053		15.839	.000			0.231	0.227	56.805	0.000*
Perception on MIR	.102	.142	3.143	.002	.995	1.005				
Use of MIR	.323	.450	9.949	.000	.995	1.005				
Dependent Variable: Job performance Predictor: (Constant), Perception on MIR, Use of MIR DF (F-Statistic) = 2, 378 DF (T-Statistic) = 377										

Source: Field Survey Results, 2021

Table 2 depicts that perception on medical information resources (MIR) and use of medical information resources jointly influenced job performance of medical practitioners in University teaching hospitals in South-West, Nigeria (*Adj*. R^2=0.227, $F(2, 378) = 56.805$, $p<0.05$). The model shows that the linear combination of perception on medical information resources and use of medical information resources explains 22.7% (*Adj*. R^2=0.227) in job performance of medical practitioners in University teaching hospitals in South-West, Nigeria. This implies that the linear combination of perception on medical information resources and use of medical information resources predicts job performance of medical practitioners. Hence, the null hypothesis which states that perception on medical information resources and use of medical information resources will not jointly influence job performance of medical practitioners in University teaching hospitals in South-West, Nigeria, was rejected. in South-West, Nigeria. This suggests that improved perception on medical information resources

From relative perspective, perception on medical information resources ($\beta = 0.142$, $t(377) = 3.143$, $p<0.05$) and use of medical information resources ($\beta = 0.450$, $t(377) = 9.949$, $p<0.05$) positively and significantly influenced job performance of medical practitioners in the study area. However, the result further shows that use of medical information resources is the highest contributor to job performance of medical practitioners in University teaching hospitals and utilization of medical information resources would lead to better performance of medical practitioners in University teaching hospitals. Nonetheless, in the order of priority, use of medical information resources must be given more consideration since it had the largest

effect on the job performance of medical practitioners. The regression model generated from the data in Table 2 is:

Regression Model:

$$JP = 2.053 + .102\ P + .323\ U + u \quad \text{……Model 1}$$

Where:
JP = Job performances
P = Perception on MIR
U = Use of MIR
u = Disturbance term (All uncaptured variables that can influence JP but not included in the model)

The result of regression model 1 indicates that holding perception on MIR and use perception of MIR to a constant zero, job performance would be 2.053. However, in the absence of these variables (perception on MIR and use of MIR), the medical practitioners in University teaching hospitals would still be perform well in their professional practice considering the fact that, other factors (denoted by *u*) not investigated in the study can still influence job performance.
Nonetheless, when perception on MIR and use of MIR are improved by one unit on a measurement scale, there will be corresponding increase in job performance of medical practitioners by 10.2% (0.102) and 32.3% (0.323). Conclusively, use of MIR is a better predictor of job performance of the medical practitioners than perception on MIR. This suggests that improved use of MIR and perception use on MIR would result in better performance of medical practitioners in University teaching hospitals.

Hypothesis Two: Perception on medical information resources and use of medical information resources will not jointly influence job-specific-task-proficiency of medical practitioners in University teaching hospitals in South-West, Nigeria.

Table 3: Joint influence of perception on medical information resources and use of medical information resources on job-specific-task-proficiency

Predictors	**B**	**Beta (β)**	**T**	***P***	**Tolerance**	**VIF**	**R^2**	***Adj.* R^2**	**F**	**ANOVA (Sig.)**
(Constant)	1.860		12.753	.000			0.226	0.222	53.427	0.000*
Perception on MIR	.103	.129	2.813	.005	.996	1.004				
Use of MIR	.355	.450	9.786	.000	.996	1.004				
Dependent Variable: Job-specific-task-proficiency Predictor: (Constant), Perception on MIR, Use of MIR DF (F-Statistic) = 2, 368 DF (T-Statistic) = 369										

Source: Field Survey Results, 2021

The result of hypothesis two is shown in Table 3. The result revealed that, perception on medical information resources (MIR) and use of medical information resources jointly influenced job-specific-task-proficiency of medical practitioners in University teaching hospitals in South-West, Nigeria (*Adj.* R^2=0.222, $F(2, 368) = 53.427$, $p<.05$). The model shows that the linear combination of perception on medical information resources and use of medical information resources explains 22.2% (*Adj.* R^2=0.222) in job-specific-task-proficiency of medical practitioners in University teaching hospitals in South-West, Nigeria. This implies that the linear combination of perception on medical information resources and use of medical information resources predicts job-specific-task-proficiency of medical practitioners. Hence, the null hypothesis which states that perception on medical information resources and use of medical information resources will not jointly influence job-specific-task-proficiency of medical practitioners in University teaching hospitals in South-West, Nigeria, was rejected.

Relatively, perception on medical information resources ($\beta = 0.129$, t (369) =2.819, $p<.05$) and use of medical information resources ($\beta = 0.450$, t (369) =9.786, $p<.05$) positively and significantly influenced job-specific-task-proficiency of medical practitioners in the study area. Nonetheless, the result further

shows that use of medical information resources is the highest contributor to the job-specific-task-proficiency of medical practitioners. This suggests that improved perception on medical information resources and utilization of medical information resources would likely lead to better job-specific-task-proficiency of medical practitioners in University teaching hospitals. However, in the order of importance, use of medical information resources must be given more consideration since it had the largest effect on the job-specific-task-proficiency of medical practitioners. The regression model generated from the data in Table 3 is:

Regression Model:

$$JSTP = 1.860 + .103\ P + .355\ U + u \quad \text{……Model 2}$$

Where:
JSTP = Job-specific-task-proficiency
P = Perception on MIR
U = Use of MIR
u = Disturbance term (All uncaptured variables that can influence JP but not included in the model)

The result of regression model 2 indicates that holding perception on MIR and use perception of MIR to a constant zero, job-specific-task-proficiency would be 1.860. However, in the absence of these variables (perception on MIR and use of MIR), the medical practitioners in University teaching hospitals would still be proficient in their job specific tasks considering the fact that, other factors (denoted by *u*) not investigated in the study can still influence job-specific-task-proficiency. Nonetheless, model shows that, when perception on MIR and use of MIR are improved by one unit on a measurement scale, there will be corresponding increase in job-specific-task-proficiency of medical practitioners by 10.3% (0.103) and 35.5% (0.355). Conclusively, use of MIR is a better predictor of job-specific-task-proficiency of the medical practitioners than perception on MIR. This suggests that improved use of MIR and perception use on MIR would result in job-specific-task-proficiency of medical practitioners in University teaching hospitals.

Hypothesis Three: Perception on medical information resources and use of medical information resources will not jointly influence non-job-specific-task-proficiency of medical practitioners in University teaching hospitals in South-West, Nigeria.

Table 4: Joint influence of perception on medical information resources and use of medical information resources on non-job-specific-task-proficiency

Predictors	**B**	**Beta (β)**	**T**	***P***	**Tolerance**	**VIF**	**R^2**	***Adj.* R^2**	**F**	**ANOVA (Sig.)**
(Constant)	2.216		14.691	.000			0.162	0.158	35.618	0.000*
Perception on MIR	.108	.137	2.858	.005	.996	1.004				
Use of MIR	.291	.371	7.752	.000	.996	1.004				
Dependent Variable: Non-job-specific-task-proficiency Predictor: (Constant), Perception on MIR, Use of MIR DF (F-Statistic) = 2, 368 DF (T-Statistic) = 369										

Source: Field Survey Results, 2021

The result of Table 4 revealed that perception on medical information resources (MIR) and use of medical information resources jointly influenced non-job-specific-task-proficiency of medical practitioners in University teaching hospitals in South-West, Nigeria ($Adj.\ R^2 = 0.158$, $F(2, 368) = 35.618$, $p<.05$). The model shows that the linear combination of perception on medical information resources and use of medical information resources explains 15.8% ($Adj.\ R^2=0.158$) in non-job-specific-task-proficiency of medical practitioners in University teaching hospitals in South-West, Nigeria. By implication, the linear combination of perception on medical information resources and use of medical information resources

predicts non-job-specific-task-proficiency of medical practitioners. Therefore, the null hypothesis which states that perception on medical information resources and use of medical information resources will not jointly influence non-job-specific-task-proficiency of medical practitioners in University teaching hospitals in South-West, Nigeria, was rejected.

Specifically, perception on medical information resources ($\beta = 0.137$, t (369) =2.858, $p<.05$) and use of medical information resources ($\beta = 0.371$, t (369) = 7.752, $p<.05$) positively and significantly influenced non-job-specific-task-proficiency of medical practitioners in the study area. Nevertheless, the result further indicates that use of medical information resources contributes highest to the non-job-specific-task-proficiency of medical practitioners. This suggests that enhancing perception on medical information resources and utilization of medical information resources would likely improve the non-job-specific-task-proficiency of medical practitioners in University teaching hospitals. In the order of priority, use of medical information resources must be given more consideration since it had the largest effect on the non-job-specific-task-proficiency of medical practitioners. The regression model generated from the data in Table 4 is:

Regression Model:

NJSTP = 2.216 + .108 P + .291 U + *u* ……Model 3

Where:
NJSTP = Non-job-specific-task-proficiency
P = Perception on MIR
U = Use of MIR
u = Disturbance term (All uncaptured variables that can influence JP but not included in the model)

The result of regression model 2 indicates that when perception on MIR and use perception of MIR are held to a constant zero, job performance would be 2.216. However, in the absence of these variables (perception on MIR and use of MIR), the medical practitioners in University teaching hospitals would still be proficient in their non-job-specific-tasks considering the fact that, other factors (denoted by *u*) not investigated in the study can still influence non-job-specific-task-proficiency. The model further shows that, when perception on MIR and use of MIR are improved by one unit on a measurement scale, there will be corresponding increase in non-job-specific-task-proficiency of medical practitioners by 10.8% (0.108) and 29.1% (0.291). Hence, use of MIR is a better predictor of job-specific-task-proficiency of the medical practitioners than perception on MIR. This suggests that enhancing use of MIR and perception use on MIR would likely result in non-job-specific-task-proficiency of medical practitioners in University teaching hospitals.

Discussions

Hypothesis one which states that perception of medical information resources and use of medical information resources will not jointly influence job performance of medical practitioners in university teaching hospitals in South-West, Nigeria. The hypothesis was formulated to establish probable joint influence of perception of medical information resources and use of medical information resources on influence job performance of medical practitioners. Findings revealed that perception of medical information resources (MIR) and use of medical information resources jointly influenced job performance of medical practitioners in university teaching hospitals in South-West, Nigeria. The null hypothesis was rejected as the Adj. R^2 reveals that the two independent variables jointly accounted for about 22.7% of the variance in job performance of medical practitioners. From the regression result, the two independent variables (perception of medical information resources and use of medical information resources) were found to jointly predict job performance of medical practitioners significantly at 0.05 level. Findings form hypotheses two and three also revealed that perception of medical information resources (MIR) and use of medical information resources jointly influenced job-specific-task and job-specific-task proficiencies of medical practitioners in university teaching hospitals in South-West, Nigeria. The null hypotheses were rejected as the Adj. R^2 reveals that the two independent variables jointly and respectively accounted for 22.2% and 15.8% of the variance in job-specific-task and job-specific-task proficiencies of medical

practitioners. Several studies have pointed out the relative influence of perception and use of information on performance in the work places (Elnaga, 2012, Mohanty and Mohanty, 2014; Agha, Azmi & Irfan, 2017; Ijiekhuamhen, Aghojare & Lerdinand, 2015; Ogunyade & Obajemu, 2006). The study of Pandey and Singh (2014) shows that printed and e-resources resources and books by library users. The relative influence of perception on performances is also supported by the works of Wallace, Beckett, and Sheehan (2014) who examined pharmacists' use and perception of UpToDate which a source of information for providing specific patient care recommendations and evidence-based information for clinical decision making at point of care. The study revealed that most respondents who used or had heard of UpToDate indicated willingness to change a treatment plan based on UpToDate recommendations (77%). Many believed that UpToDate is updated weekly (31%) or monthly (49%) and that all articles undergo external peer review (51%). however, many pharmacists may hold misconceptions regarding the updating and peer review processes of UpToDate. The study of Ajuwon (2015) study revealed that, medical doctors accessed high quality, current and relevant health care information from the internet to transform their skills proficiency in diverse ways such as teaching of organs, diagnosis of diseases and medical examination.

Conclusions

The study concludes that the enhancing the perception and use of MIR would likely result in job performance, job-specific-task-proficiency and non-job-specific-task-proficiency of medical practitioners in University teaching hospitals. Relatively, perception and use of medical information resources (MIR) were strong predictors of job performance, job-specific-task and non-job-specific task proficiencies of medical practitioners of medical practitioners in the university teaching hospitals, South-West, Nigeria. However, in the absence of perception and use of MIR, the medical practitioners would still be proficient in their job performance, job specific tasks and non-job-specific tasks based on the reason that other factors not investigated in the study can still influence these dependent variables. Therefore, the paper recommended that, for medical practitioners to achieve optimal outcome in their job performance, job-specific-task and non-job-specific-task-proficiencies, these factors (perception of medical information resources and use of medical information resources) should be put into consideration by the management of the teaching hospitals in university teaching hospitals in South-West, Nigeria. Nonetheless, the management must bear in mind that the medical practitioners can still be proficient in their job and non-job specific tasks even when they do not utilize medical information resources.

REFERENCES

Aberese-Ako, M., Dijk, H. V., Gerrits, Arhinful, T., D. K., & Agyepong, I. A. (2014). Your health our concern, our health whose concern: Perceptions of injustice in organizational relationships and processes and frontline health worker motivation in Ghana. *Health Policy and Planning*, 29, ii15–ii28. doi:10.1093/heapol/czu068

Agha, K., Azmi, F. T. & Irfan, A. (2017). Work-life balance and job satisfaction: An empirical study focusing on higher education teachers in Oman. *International Journal of Social Science and Humanity*, 7(3), 164-171, 2017. doi: 10.18178/ijssh. 2017.V7.813

Ajuwon, G. A. (2015). Internet accessibility and use of online health infoation resources by doctors in training healthcare institutions in Nigeria. *Library Philosophy and Practice* (e- journal). *1258*. Retrieved from: https://digitalcommons.unl.edu/libphilprac/1258/

Ally Sornam, S., Priya, K., & Prakash, M. (2013). Faculty perception on library facilities: A survey on NAAC accredited autonomous arts and science colleges in Coimbatore City. *Library Philosophy and Practice (e-journal)*. 965. http://digitalcommons.unl.edu/libphilprac/965

Babatunde, K. M., Akinbodewa,A. A., Akinboye, A.O., & Adejumo, A. O. (2016). Prevalence and pattern of prescription errors in a Nigerian kidney hospital. *Ghana Medical Journal*, *50*(4), 233-237. Retrieved from: http://dx.doi.org/10.4314/gmj.v50i4.6

Campbell, J. P. (1990). Modelling the performance prediction problem in industrial and organizational psychology. In M. D. Dunnette and L. M. Hough (Eds.), *Handbook of*

industrial and organizational psychology, 1, 687-732. Palo Alto, CA: Consulting Psychologists Press.

Chakroborty, S. (2014). Use of the internet and electronic resources for medical science information in Bangladesh: A case study. *Learning Community*, 5(2 &3), 119-128. DOI: 10.5958/2231-458X.2014.00014.1

Dieleman, M., & Harnmeijer, J. W., (2006). *Improving health worker performance: In search of promising practices*. KIT – Royal Tropical Institute-The Netherlands 1-77.

Ekere, J. N., Omekwu, C. O., & Nwoha, C. M. (2016). Users' perception of the facilities, resources and services of the MTN digital library at the University of Nigeria, Nsukka. *Library Philosophy and Practice (e-journal).* 1390. Retrieved from http://digitalcommons.unl.edu/libphilprac/1390

Elnaga, A. A. (2012) The impact of perception on work behaviour. Kuwait Chapter of Arabian *Journal of Business and Management Review*, 2(2), 56-71.

Gakibayo, A., Ikoja-Odongo, J. R. & Okello-Obura, C. (2013). Electronic information resources utilization by students in Mbarara university library. *Library Philosophy and Practice (e-journal)*, 869. https://digitalcommons.unl.edu/libphilprac/869

Haliso, Y. & Aina R. F. (2012). Quality collection of library resources in meeting users' needs in academic institutions: Competitive intelligence approach. *Global Journal of Human Social Science Linguistics & Education*, 12 (12), 25-32.

Idiakheua, E.O., & Obetoh, G.I. (2012). Counterproductive work behaviour of Nigerians: An insight into makeup theory. *Interdisciplinary Journal of Contemporary Research in Business*, 4(7), 912-937.

Ijiekhuamhen, O. P., Aghojare, B. & Ferdinand O. A. (2015). Assess users' satisfaction on academic library performance: a study. *International Journal of Academic Research and Reflection*, 3(5), 66-77.

Ikenwe, I. J., & Adegbilero-Iwari, I. (2014). Utilization and user satisfaction of public library services in South-West, Nigeria in the 21st Century: A survey. *International Journal of Library Science*, 3(1), 1-6. DOI: 10.5923/j.library.20140301.01

Iloh, G.U., Chuku, A., & Amadi, A. N. (2017). Medical errors in Nigeria: Across-sectional study of medical practitioners in Abia State. *Archives of Medicine and Health Sciences*, 5, 44‑49. https://www.amhsjournal.org/text.asp?2017/5/1/44/208180

Iwhiwhu, B. E., & Okorodudu, P. O. (2012). Public library information resources, facilities, and services: User satisfaction with the Edo State Central Library, Benin-City, Nigeria. *Library Philosophy and Practice (e-journal). 747*. https://digitalcommons.unl.edu/libphilprac/747 5, 1-17.

Jankingthong, K., & Rurkkhum, S. (2012). Factors affecting job performance: A review of literature. Silpakorn University. *Journal of Social Sciences, Humanities, and Arts, 12*(2), 115-127.

Kostenuik, J., Morgan, D., & D'Arcy, C., (2013) Use and perceptions of information among family physicians: Sources considered accessible, relevant and reliable. *Journal of the Medical Library Association.* 101(1), 32-7. DOI: http://dx.doi.org/10.3163/1536- 5050.101.1.006

Lathans, G.A., Stajkovic, A.D., & Locke, E.A. (2010). The relevance and viability of subconscious goals in the workplace. *Journal of Management, 36*(1), 234-255. DOI: 10.1177/0149206309350777

Mohanty, K., & Mohanty, S. (2014). An empirical study on the employee perception on work- life balance in hotel industry with special reference to Odisha. *Journal of Tourism and Hospitality Management, 2*(2), 65-81. DOI: 10.15640/jthm. v2n2a5

Ndosi, M., & Newell, R. (2010). Medicine information sources used by nurses at the point of care. *Journal of Clinical Nursing, 19*, 2659–2661. doi: 10.1111/j.1365-2702.2010. 03266.

Ogunyade, T. O. & Obajemu, A. S. (2006). Use of information resources in some selected health science libraries in Lagos, Nigeria. *Nigerian Quarterly Journal Hospital Medicine, 16*(4), 122-127.

Ojo, R.A. & Akande, S.O. (2005). Students assess, usage and awareness of electronic information resources at the University College Hospital, University of Ibadan, Nigeria. Lagos. *Journal of Library and Information Science*, 3(1), 16-24.

Okoro, C. C., & Okoro, I. (2009). The use of medical information in Nigeria: The influence of gender and status. *Journal of Continuing Education in the Health Professions Banner*, *29*(4), 254-258. doi:10.1002/chp.20044

Onukwube, H. N., Iyagba, R., Fajana, S. (2010). The influence of motivational factors on job performance of construction professionals in construction companies in Nigeria. Construction, Building and Real Estate Research Conference of the Royal, Held at Dauphine Université, Paris, 2-3 September 2010

Pandey, S. K., & Singh, M. P. (2014). Users' satisfaction towards library resources and services in Government Engineering College of Guru Gobind Singh Indraprastha University, Delhi: An evaluative study. *Journal of Library Information and communication Technology (JLICT)*, *6*(1-2), 17-26. Retrieved from: www.escienceworld.org.

Spector P (2008). Industrial and Organizational Psychology. Research and Practice, 5th ed., John Wiley & Sons, New York, NY.

Thiele, R.H., Poiro, N.C., Scalzo., D.C., & Nemergut, E. C. (2010). Speed, accuracy, and confidence in Google, Ovid, PubMed, and UpToDate: Results of a randomized trial. *Postgraduate Medicine*, *86*(1018),459–65.

Wahab, E., Shamsuddin, A., Abdullah, N. H. & Hamid, N. A. A. (2016). Users' satisfaction and Return on Investment (ROI) for online database library databases: A Malaysian technical university perspective. *Procedia - Social and Behavioral Sciences*, 219, 777- 783.

Wallace, K. L., Beckett, R. D., & Sheehan, A. H. (2014) Pharmacist perception and use of UpToDate. *Journal of Medical Library Association, 102*(4),296-300. DOI: http://dx.doi.org/10.3163/1536- 5050.102.4.012

World Health Organization (WHO) (2016). *Global strategy on human resources for health: Workforce 2030*. Geneva: World Health Organization.

Yamson, G. C., Appiah, A. B., & Tsegah, M., (2018). Electronic vs. print resources: A survey of perception, usage and preferences among central university undergraduate students. *European Scientific Journal*, *14*(7), 291-304. Doi: 10.19044/esj. 2018.v14n7p291 URL: http://dx.doi.org/10.19044/esj. 2018.v14n7p291