## FROM THE EDITOR - Dr Jackie Jones RN PhD

## SCHOLARSHIP IN SUBMISSION

his edition of AJAN is larger than usual as we try to enable more research and scholarly work to be available to our readership. It is pleasing to see so many nurses submitting their work both as individuals but also as part of multidisciplinary teams across all levels of our research and practice development spectrum. The increasing number of submissions also means that we are progressing our own review scholarship to ensure our publication is of the highest standard and adheres to our submission requirements.

Alas at times authors fail to follow the guidelines available for AJAN [http://www.anf.org.au/04\_anf\_ajan\_publications/pubs\_ajan\_guide.html] which results in an extended review and revision processes. Key areas include the over use of references, the omission of reference citation in text and/or within the reference lists, submitting papers that far exceed our word limit of 3000 words, or if they are within word limit papers, are submitted with excessive tables, figures and so forth. Like all aspects of research, quality and associated rigour is important. Asking the question: Is this paper readable, relevant and ready, should provide an initial appraisal of its worth.

A tight word restriction can actually help to simplify your writing style and reduce the amount of superfluous information to enhance clarity and key messages. Of particular concern can be the lack of structure and flow of ideas within papers as individuals 'rush' their work to meet submission and publication deadlines; often imposed by faculty or promotion rounds. Seeking a critical friend to review your work prior to submission may well save you time, effort and frustration.

Similarly planning a publication development and submission plan related to your research and or practice may prove useful and guide your writing scholarship. If you consider yourself a submission scholar then why not mentor a novice? However, and this is disappointing to note, it is not always our novice authors who fall short in submission scholarship. We look forward to being involved in the development, refinement and publication of your ideas through our peer review process but

reviewers cannot be asked to substantially develop initial concepts. This is the work of the author(s).

The issues raised here are not limited to our Australian backyard nor to the authors submitting to AJAN: they are of concern to publishers and Editors around the world (International Academy of Nurse Editors 2006 conference).

This edition commences with the notion of nurses themselves as vulnerable. Patrick et al present research into burnout using self-report survey methods across a sample of Victorian nurses. Authors, Henning, Leigh and Milgrom, then go on to share two research papers around screening in vulnerable population groups. The first involves the identification of Chlamydia in homeless young people, whilst the latter brings screening for depression into focus within routine antenatal care.

Soh and colleagues present research on the knowledge of critical care nurses in preventing nosocomial pneumonia. Edleman et al report on the feasibility of a brief educational intervention administered to patients two weeks after Automatic Implantable Cardioverter Defibrillator (AICD) implantation on subsequent levels of anxiety, depression, stress and hostility. Pascoe et al explore the educational needs of nurses working in Australian general practice settings and Blay and Donoghue present findings from research to explore enrolled nurse skill extension They conclude, somewhat controversially, that basic nursing practices be delegated to assistants in nursing to enable the After Hours Enrolled Nurse time to effectively support clinical nurses and extend their own practice.

The final three papers also follow the thread of vulnerability with Sturrock and her team developing an adolescent appropriate youth care plan for use in adult acute settings. Remaining within the acute setting Scanlon argues the term vulnerability is misunderstood and/or poorly classified leading to risk for patients. Randle and Arthur in our final scholarly paper turns the focus back to nurses and provides an overview of the research and associated literature regarding the professional self-concept.