

ical governance needs to be focused on the clinical workplace, but its development and sustainability are reliant on the provision of practical support for clinicians and clinical managers to embed it in practice. In this, we believe, there is a clear role for general hospital management.

Acknowledgements

We would like to thank Dr Wayne Ramsay from The Centre for Clinical Governance Research at the Australian National University for his advice and support throughout this study.

References

- 1 Inouye SK, Viscoli CM, Horwitz RJ, et al. A predictive model for delirium in hospitalized elderly medical patients based on admission characteristics. *Ann Intern Med* 1993; 119: 474-81.
- 2 Levkoff SE, Evans DA, Liptzin B, et al. Delirium: the occurrence and persistence of symptoms among elderly hospitalized patients. *Arch Intern Med* 1992; 152: 334-40.
- 3 Inouye SK, Schlesinger MJ, Lydon TJ. Delirium: a

Correction: Building a culture of research dissemination in primary health care: the South Australian experience of supporting the novice researcher

Re: "Building a culture of research dissemination in primary health care: the South Australian experience of supporting the novice researcher", by Karin Ried and Jeffrey Fuller (*Aust Health Rev* 2005, vol 29, no. 1, pp. 6-11).

The last line of the Appendix was omitted due to an error in the production process. The final sentence should be, "The papers may therefore range from small research projects to discussion papers on potential research/evaluation methods and potential capacity building strategies, and can include work in progress." □