



**SUPPORT FOR PRIMARY
EYE CARE DEVELOPMENT**

National Optometric Conference 2010!

The National Optometric Conference will be held on 4th & 5th November 2010 at the Park Inn Hotel, London Heathrow. A draft programme and booking form will be available in due course but in the meantime, please put these dates in your diary.



LOC Support Unit Newsletter

April 2010

LOCSU Business Plan 2010/11

Our 2010/11 Business Plan is now available on the LOCSU website [here](#) and continues to focus on five interrelated programmes supporting LOCs/ROCs in:

- uniting the optical sector at local level
- speaking with a national voice at local level
- expanding eye care services in the community
- providing excellence in representing eye care locally
- making efficient use of resources for maximum benefit

Included in our additional aims for the coming year are:

- to offer every LOC the opportunity to undertake a relationship mapping exercise
- to ensure that each LOC has the required expertise in terms of organising and fulfilling their financial commitments
- to establish a number of learning sets for LOCs in the following areas: glaucoma, cataract, PEARS, services for people with learning difficulties and children's services
- to establish a support network for LOC Administrators
- to continue to develop the relationship with NHS Primary Care Commissioning and to undertake a joint project, subject to be determined
- to commission the development of a training and leadership programme for LOCs that covers development from beginner to expert
- to formulate a development package to bring to the fore new talent from within the professions
- a new one-year Director of Training and Development post to design, commission and ensure delivery of a comprehensive training and development plan for LOCs.

Local Communication with Professional Colleagues

The Chairman of the British Medical Association's General Practitioners Committee (GPC), Mr Laurence Buckman has written to all Local Medical Committees in England encouraging them to establish joint working arrangements with LOCs, Dental and Pharmaceutical Committees where arrangements are not already in place. Following a recent meeting between the GPC, British Dental Association, Pharmaceutical Services Negotiating Committee and the Association of Optometrists it was recognised that a number of concerns are shared by these professions. Since many of the key issues, particularly those relating to privatisation, competition and commissioning, are largely determined at a local level, all four bodies felt that sharing intelligence locally could help prevent contractors being played off against one another, or services being picked-off by alternative providers. If you do not have links with the Local Medical Committees in your area please take this opportunity to get in touch with them, quoting this correspondence from Laurence Buckman, Chairman of the BMA's General Practitioners Committee.

Advice on NICE Glaucoma Guidelines

REMINDER: You can download the latest advice on NICE glaucoma guidelines updated on 27th January 2010 by clicking [here](#)

Questions 3, 4 and 13 are new. Question 13 states that the model referral letters have been withdrawn as they no longer accord with the joint guidance issued by the College of Optometrists and the Royal College of Ophthalmologists. Instead it is suggested you now use your normal preferred method for writing referral letters; as a minimum this should be the GOS 18 form. Ensure that the GOS 18 or referral letter is fully completed and contains all the clinical information you have for the patient.

The General Election—a final push for optometric eye care

After the Election... Write to your new Member of Parliament

For a change, let's get our message in first. To achieve this we need you to help by organising locally to write to every MP within a day of their election or re-election on May 6th.



Every new or re-elected MP receives a deluge of pleas and demands. On their first visit to Parliament as an elected member, those elected for the first time will find a sack of mail waiting for them.

Our plan is that one local practice, on behalf of the others, should write a letter to the new or re-elected MP, which could be hand written, and deliver it to the MP's local office (often their political party local office) within 24 hours of the election.

We are asking Local Optical Committees to organise this because in reality you are the only people who can. If every LOC plays its part, it could lift our profile in an unprecedented way.

Sample letter

The sample shown here is a suggested format and wording for you to adapt as you choose.

NOTES:

If possible, write the letter on your practice notepaper and, if you are an LOC officer, do mention it.

If you have already met your MP, and particularly if they have already visited your practice, then the wording should reflect that.

If there are local optometric enhanced services already operating, your letter should briefly mention them in non-technical language.

Two important guidelines for your letter:

- keep it as brief as possible, and
- ensure that your MP receives it at his or her local office the day following the election.

Finally, don't forget to enclose a copy of the vision card which we have already sent you a supply of.

Many congratulations on your election (re-election) to Parliament for [name of constituency]. I hope you will enjoy being our MP.

I run [name of optometric practice] in [address], and I would like to invite you to visit my practice at your convenience..

Or

I run [name of optometric practice] in [address], and you may recall that you visited my practice [earlier this year].

I am hoping that you will [make another] visit to discuss local eyecare initiatives and to discuss the extended eyecare services that can be delivered by optometrists and opticians and are already proving to be a great success in Wales and in Scotland.

After you have had time to settle [back] into parliament, I will call your office to see if we can arrange a time for you to visit.

Again, congratulations and best wishes

Party Political Conferences This Autumn

****Volunteers Needed!****

The Eye Health Alliance (EHA) is looking for volunteers to promote the importance of eyecare at the political party conferences this autumn.

Optometrists and dispensing opticians are needed to help explain eye examinations and eye health and take fundus images on the EHA stand within the exhibition area at the party conferences to party members, delegates, MPs and PPCs (Prospective Parliamentary Candidates). You will receive a briefing document before the event and the Eye Health Alliance team will be on hand at the stand to explain wider optical political issues to delegates.

There will be more than one Optom/DO on each stand so you won't be manning the fundus camera non-stop all day! If you have queries about volunteering as an optometrist or dispensing optician please read the attached notes or contact Karen Sparrow on 07768827236 karensparrow@aop.org.uk

Due to the nature of the security pass applications and costs volunteers need to be able to commit to at least one full day at one of the party conferences and successfully apply for a security pass (information will be provided). Security pass, travel and lunch expenses will be reimbursed.

The conferences are taking place on the following dates:

Liberal Democrat Party Conference

Dates: 18th-22nd September 2010

City: Liverpool

Labour Party Conference

Dates: 26th-30th September 2010

City: Manchester

Conservative Party Conference

Dates: 3rd -6th October 2010

City: Birmingham

Conservative Party Conference

Dates: 3rd -6th October 2010

City: Birmingham

For more information please contact Ben Cook, Policy & Public Affairs Officer, bencook@aop.org.uk

****Facebook****

The Eye Health Alliance has joined facebook. Follow the work of the Alliance in its campaign to improve the eye health nation.

Facebook is a social utility that connects people with friends and others who work, study and live around them. Anyone can join for free.

To view the Eye Health Alliance's page click on the link below.

<http://www.facebook.com/pages/Eye-Health-Alliance/324630190900?ref=ts#!/pages/Eye-Health-Alliance/324630190900?ref=mf>

****Date for your Diary****

25—29 April 2010

Royal College of Nurses Congress , Bournemouth – the Eye Health Alliance will be organising a fringe event – day and topic tbc

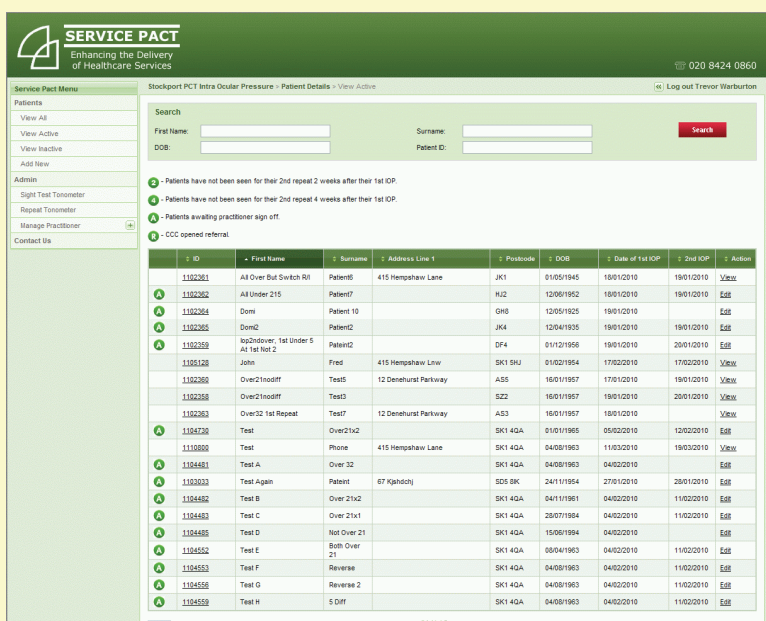
NEWS!

Glaucoma Referral Refinement Level 1a software system—update

Those who attended the National Optometric Conference will recall the presentation by Lyndon Taylor in which he described the software system being developed by LOCSU. That was early days but the system went live on schedule on 1st February this year in the pilot site of Stockport. Initial signs are encouraging. A major advantage of such electronic data gathering is the ease of analysing figures at any point. After 6 weeks of operation the Level 1a service, with 1 or 2 repeated pressure measures as appropriate, appears to be deflecting over 70% of initial high readings.

So how does it work? As you know, the Level 1a service is simply repeating initial high sight test pressures using applanation tonometry. If the pressure is still high at the first repeat, then a further reading is taken on another occasion. If both are high a referral is made.

The software is basically a secure website. There is 3-stage authentication to logon – a practice username, and then a password and a PIN number. A patient is then created and eligibility is confirmed (high pressures and no other signs of glaucoma). A minimum amount of data is entered to identify the patient and then the sight test pressures and 1st repeat pressures are entered. If these are still high, the patient record is stored pending the 2nd measurement. When this is later entered, if it is normal, there is no referral and a report is printed for your record. If it is high, further patient details are entered and a referral is generated.



The screenshot shows the SERVICE PACT software interface. The header includes the logo and text: "SERVICE PACT Enhancing the Delivery of Healthcare Services". The main content area displays a table of patient records. The table has columns for ID, First Name, Surname, Address Line 1, Postcode, DOB, Date of 1st IOP, 2nd IOP, and Action. The table contains 18 rows of data, including patient names like "All Over But Switch R0", "All Under 215", "Dom", "Dom2", "top2ndover: 1st Under 5 All 1st test 2", "John", "Fred", "Test5", "Test6", "Test7", "Over21x2", "Phone", "Over 32", "Test A", "Test Again", "Test B", "Test C", "Test D", "Test E", "Test F", "Test G", and "Test H".

ID	First Name	Surname	Address Line 1	Postcode	DOB	Date of 1st IOP	2nd IOP	Action
1102361	All Over But Switch R0	Patient6	415 Hemphaw Lane	JK1	01/05/1945	18/01/2010	19/01/2010	View
1102362	All Under 215	Patient7		HJ2	12/06/1952	18/01/2010	19/01/2010	EE
1102364	Dom	Patient10		GH8	12/05/1925	18/01/2010		EE
1102365	Dom2	Patient2		JK4	12/04/1935	18/01/2010	19/01/2010	EE
1102359	top2ndover: 1st Under 5 All 1st test 2	Patient2		DF4	01/12/1956	19/01/2010	20/01/2010	EE
1102128	John	Fred	415 Hemphaw Lane	SK1 5HU	01/02/1954	17/02/2010	17/02/2010	View
1102369	Over21noDfF	Test5	12 Denehurst Parkway	A55	16/01/1957	17/01/2010	19/01/2010	View
1102358	Over21noDfF	Test6		S22	16/01/1957	19/01/2010	20/01/2010	View
1102363	Over32 1st Repeat	Test7	12 Denehurst Parkway	A53	16/01/1957	18/01/2010		View
1104728	Test	Over21x2		SK1 4QA	01/01/1965	05/02/2010	12/02/2010	EE
1110800	Test	Phone	415 Hemphaw Lane	SK1 4QA	04/08/1963	11/03/2010	19/03/2010	View
1104481	Test A	Over 32		SK1 4QA	04/08/1963	04/02/2010		EE
1103033	Test Again	Patient	67 Kphodj	S05 8K	24/11/1954	27/01/2010	28/01/2010	EE
1104482	Test B	Over 21x2		SK1 4QA	04/11/1961	04/02/2010	11/02/2010	EE
1104483	Test C	Over 21x1		SK1 4QA	28/07/1964	04/02/2010	11/02/2010	EE
1104485	Test D	Not Over 21		SK1 4QA	15/06/1994	04/02/2010		EE
1104452	Test E	Both Over 21		SK1 4QA	05/04/1963	04/02/2010	11/02/2010	EE
1104453	Test F	Reverse		SK1 4QA	04/08/1963	04/02/2010	11/02/2010	EE
1104454	Test G	Reverse 2		SK1 4QA	04/08/1963	04/02/2010	11/02/2010	EE
1104455	Test H	S Diff		SK1 4QA	04/08/1963	04/02/2010	11/02/2010	EE

The system is designed so that support staff can enter all the information on your behalf. At the point at which a report or referral is generated, the information requires signing off by the optometrist. Each practitioner has their own digital sign off number – a 4-digit code. They have to enter this to verify that the details on-screen are correct for the report or referral. Think of this as being similar to dictating a letter and then checking and signing it.

Referrals could simply be printed and posted but, as Stockport has a referral processing centre, it was decided to make the referrals electronically. After marking a patient for referral they become visible on a screen to which the referral centre has access. They open the patient and print, fax or email the referral to a treatment centre after contacting the patient. After they open the referral it is flagged on the optometrist's system as 'Opened by referral centre'. The referral centre also sends a letter with all the referral details to the GP.

So what's next? Although the system is running pretty smoothly, there are a few issues to resolve. In addition we now need to modify the system to allow for the 2 new age groups defined by the Colleges as 'may not need referral'. So we would hope that the system could be available to other areas quite soon.

An interesting question that some areas have posed is whether to undertake one repeat or two. Whilst we need more time and so more data to give a definitive answer on this, the figures so far suggest that one repeat deflects about 40% of referrals and the 2nd repeat deflects a further 30% or so. It will be interesting to see if the need for a 2nd repeat is in any way dependent on the pressure level.

Report on the HSJ NHS Leadership Masterclass 2010 organised by LOCSU

LOCSU offered to sponsor members of LOCs to attend this 2 day event. The first day was titled 'The Fundamentals of Leadership' & held on Tuesday 23rd February and the following day was the Leadership Masterclass. It was hoped that this would extend the LOC members' understanding of the NHS as well as helping to raising awareness of optometrists and ophthalmic practice amongst the other delegates and speakers. There were 13 LOCSU delegates.

Speakers included Chief Executives, such as Christopher Long, Hull Teaching PCT and Peter Herring, the Countess of Chester NHS Foundation Trust. The keynote address was given by Dame Barbara Hakin, Chief Executive to East Midlands SHA and advisor to the Department of Health on their Leadership Development. Dr Nicholas Bradbury, Senior Fellow, Leadership, The Kings Fund, delivered an excellent presentation on 'People Skills: developing the 'soft skills' that every great leader should have'. He was a superb speaker on a subject matter of relevance to us, both in practice & at LOC level & beyond. Nigel Edwards, Director of Policy & Communication NHS Confederation was another impressive speaker, despite being brought in at the last minute. He was very thought provoking & knowledgeable about the NHS & government policy.

The 'Efficiency & Quality Skills' workshop run by Mark Eaton, Chief executive of Amis, received positive feedback from the LOC delegates because of its relevance to LOCs.

A big 'take home' message was about the cuts that PCTs and hospitals are going to have to make over the next few years to meet the increases in wages and healthcare costs to which they are already committed. Christopher Long gave some very depressing figures about the future budgets of PCTs- they will need to find an extra £20billion from a budget of £106 billion by 2014 by 'efficiencies'. He cited advice from the McKinsey report

- Reduce 10% of posts ie 137,000 (30,800 non clinical)
- £3billion saving by increasing hospital staff productivity
- £1.9 billion saving in supply & external contracts
- £1.3 billion in unwanted appointments & procedures
- £8.3 billion in hospital estate
- Every NICE decision costs the PCT £1.6 million

Recruitment freeze, early retirement, reduce the number of medical school places

There were some very interesting and inspiring presentations on various aspects of leadership. We came away with some great quotes from the presentations given by Seamus Logan, the Assistant director of Health & Social Care in Northern Ireland :-

Be fearless- 'It's your attitude not your aptitude that determines your ultimate altitude'

Be optimistic- 'A pessimist sees the difficulties in every opportunity whereas an optimist sees the opportunity in every difficulty'

Be creative- 'You can't use up creativity, the more you use, the more you have'

Be unique- 'Be who you are & say what you feel because those who mind don't matter & those who matter don't mind'

Be a story teller- 'There have been great societies who did not use the wheel, but there have been no societies that did not tell stories'

The feedback from the LOC delegates was positive on the whole especially from the younger & newer LOC members. LOC delegates commented that they had a better understanding of the NHS & it's future. They felt they had learnt about good leadership skills, how to deal with certain staff and to communicate effectively & always go that extra step. It had given a better appreciation of 'NHS concepts, missions and influences' and enabled us to 'give our point of view!' 'Not only did this meeting encourage the drive of new members, but also the new ideas put forward by the many speakers may just be the spark needed to regain the drive of some of the more seasoned members. It is also a great opportunity to meet with members from other LOCs and other professions within health care who equally may suggest new ideas.'

It was suggested that 'LOCSU could do this course in house and tailor it by bringing in speakers. Some of the speakers were excellent it was the subject matter that was the wrong angle.'

These were an informative and thought provoking 2 days for the LOC delegates, who came away with a better appreciation of the challenges facing the NHS and the skills required for good leadership.

Revisions to application forms for GOS contract

Primary Care Commissioning (PCC) has revised the Section B declarations which form part of the model application forms for a new GOS contract. The revisions take account of changes introduced by the National Health Service

(Miscellaneous Amendments Relating to Ophthalmic Services) Regulations which came into force on 1 April 2010 but they also make other relevant additions and amendments. The revised model forms have been produced in four variants for:

- Individual or partnership application for a mandatory services contract
- Individual or partnership application for an additional services contract
- Body corporate application for a mandatory services contract
- Body corporate application for an additional services contract

All the revised variants can be found by clicking

<http://www.pcc.nhs.uk/325>

PCTs are being advised to introduce the new forms as soon as possible.

Publication of ophthalmic performers' lists and lists of optical contractors

In a recent newsletter (7 April 2010/issue 206), Primary Care Commissioning (PCC) draws attention to the fact that some PCTs are refusing to allow LOCs to have a copy of their ophthalmic performers' list. Whilst this fact is not news to many LOCs, it is encouraging that PCC is reminding PCTs that Regulation 3 of the National Health Service (Performers Lists) Regulations 2004 requires the PCT to prepare and publish medical, dental and ophthalmic performers' lists. This also says explicitly that these lists should be available for public inspection.

PCC states that the "Department of Health expects all PCTs to publish details of all their primary care contractors, medical, dental, pharmacy and optical on the NHS Choices website. LOCs require these details for LOC electoral purposes in order to comply with their constitutions but, regardless of the legitimacy of their need, enquirers should be given access to performers' lists if they are not already publicly available on the PCT's website".

This is very encouraging as the PCC website is dedicated to providing information and advice to PCTs. If any LOC encounters opposition to a request for the contact details of the contractors and performers in their constituencies, they can refer to the advice on the PCC website, which categorically states that the PCT is legally obliged to provide this information to LOCs.

We are currently seeking clarification from NHS PCC that access to these lists means access to both the names and the contact details – whilst that is implied, it is not specifically stated.

Referral pathway for wet age-related macular degeneration

Anne Keen, the Parliamentary Under Secretary of State for Health, has written to all PCTs to highlight the importance of rapid referral for people who are suspected of having wet age related macular degeneration and to ask that local referral pathways be reviewed in light of this.

Her [letter](#) encourages pathways for wet age-related macular degeneration (AMD) to facilitate rapid access to assessment and treatment and advises that the scope for direct referrals by optometrists should be considered when developing local pathways. PCTs should ensure that local referral pathways for wet AMD reflect the importance of rapid access to assessment and treatment and permit optometrist direct referrals.

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A reminder of subjects covered in our very popular **HOT BRIEFS!**

2009

Hot Brief No 1	<ul style="list-style-type: none"> Warning not to agree to combined GOS Mandatory and Enhanced Services Contracts. OTT Infection Control. Beware free NHS email addresses.
2	<ul style="list-style-type: none"> GOS Contract compliance in England. New NHS complaints system in England. Payment of GOS fees. Practice Development and Enhanced Services.
3	<ul style="list-style-type: none"> Current General Optical Council (GOC) consultations. NICE revised glaucoma guidelines. Independent Safeguarding Authority Vetting and Barring Scheme: postponement. LOCSU Business Plan 2009/10.
4	<ul style="list-style-type: none"> GOC Consultation on Codes of Conduct for Individuals and Business Registrants: (closing date: 24th April 2009). GOS Contract Compliance Framework.
5	<ul style="list-style-type: none"> NICE Glaucoma Guidelines: published 22nd April 2009. New NHS Complaints Procedure. National GOS Budget.
6	<ul style="list-style-type: none"> GOS Contract in England: comments on Contract Compliance Framework.
7	<ul style="list-style-type: none"> PCT equality audits (with attached specimen letter). Questionnaire on the use of controlled drugs.
8	<ul style="list-style-type: none"> NICE to publish web-based commissioning guides with links to LOCSU Glaucoma Pathways. Professional bodies confirm advice on NICE guidelines. Beware NICE bites. National Patient Safety Agency (NPSA) Rapid Response Report: hospital waiting times for glaucoma patients leads to blindness. GOS Contract Compliance Framework – completing questionnaires. NHS Primary Care Contracting – minor revisions to optical practice visit form. Child, adult and domestic abuse procedure.
9	<ul style="list-style-type: none"> Independent Safeguarding Authority (ISA): Implementing the new Vetting and Barring Scheme. Reporting NHS Complaints.
10	<ul style="list-style-type: none"> Update on Flu Pandemic. CIAMS – Requests to Survey or Assess Optical Premises. NHS Constitution. National Patient Safety Agency – NHS umbers. Workforce Mapping.
11	<ul style="list-style-type: none"> Direct contracting for enhanced services with NHS Trusts. PCTs checking that employed optometrists wish to be represented by LOCs. Child, adult and domestic abuse procedures – update. National Patient Safety Agency – Safer Practice Notice on NHS Numbers.
12	<ul style="list-style-type: none"> Vetting & Barring Scheme Begins 12th October 09.
13a	<ul style="list-style-type: none"> Asbestos November 2009
13b	<ul style="list-style-type: none"> NHS Security Management Service (NHS SMS) Survey of NHS Frontline Staff by IPSOS MORI.
13c	<ul style="list-style-type: none"> Employment Discrimination: Guidance for employers on Non Discrimination against Non-EEA (Previously Non-EU) Recruitment
14	<ul style="list-style-type: none"> Access to Ophthalmic Services over Christmas
14	<ul style="list-style-type: none"> GOS Contract Compliance Framework - Completing Questionnaires
14	<ul style="list-style-type: none"> GOS Contract Compliance Framework - Quality in Optometry
14	<ul style="list-style-type: none"> Enhanced Services – Model Contracts
14	<ul style="list-style-type: none"> GOS Budgets in England
14	<ul style="list-style-type: none"> Vetting and Barring Update - Sir Roger Singleton's Review
14	<ul style="list-style-type: none"> Commissioners' Investment and Asset Management Strategy
14	<ul style="list-style-type: none"> Advice from the Department of Health on H1N1 Virus (Swine Flu) for PCTs and POS Contractors
14	<ul style="list-style-type: none"> Joint advice on NICE Glaucoma Guidelines – Issued by College of Optometrists and College of Ophthalmologists
14	<ul style="list-style-type: none"> Consumer Credit Licences, Interest Free Debit Schemes & Money Laundering Regulations - Joint advice from ABDO/AOP/FODO/FMO/ACLM

A reminder of subjects covered in our very popular **HOT BRIEFS!**
2010

1/10	GOS Budget in England GOS Payments in England to March 2010 Glaucoma Referral – updated guidance (reminder)
2/10	<ul style="list-style-type: none">• Care Quality Commission – no jurisdiction over optometry or optics• Election Campaign 2010 - Countdown
3/10	<ul style="list-style-type: none">• Enhanced Services Model Pathways• Election Lobbying DVD – time to talk to the politicians• Annex 1: Variations from Mandatory and Additional Contracts
4/10	<ul style="list-style-type: none">• Data Protection and a Reminder: Some LOCs/ROCs May Need to be Registered with the Information Commissioner's Office• Payment of GOS Fees & Voucher Values• Safeguarding Children and Vulnerable Adults• Vetting and Barring: Registration & Checking with the Independent Safeguarding Authority (ISA)
4/10 revised	<ul style="list-style-type: none">• Data Protection – this section has been revised

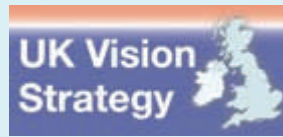
If you find you are missing any of the hot briefs, please feel free to contact Janice Phillips
janicephillips@locsu.co.uk who will be happy to help.

**SECURE SECTION ON PRIMARY HEALTH NET WEBSITE FOR LOCSU
INFORMATION BRIEFINGS AND DISCUSSION**

Alternatively, for access to LOCSU's secure web area including all past hot briefs and clinical pathways unavailable elsewhere on-line, please register through the following link:

<http://phn.wufoo.com/forms/free-access-to-locsu-secure-web-area/>

Book Now!!



SAVE THE DATE - 15 June 2010

Vision UK 2010 Conference

ICC Birmingham

"Sharing the challenge, making it happen"

A VISION 2020 UK annual conference, hosted by RNIB, it will celebrate progress in implementing the UK Vision Strategy. This one-day event has attracted a number of keynote speakers, including the Rt Hon David Blunkett MP.

For more information and to see the programme visit the

[UK Vision Strategy website](#)

BOOK YOUR PLACE NOW

[UK Vision Strategy](#)

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[VISION 2020 UK](#)

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SUPPORT FOR PRIMARY
EYE CARE DEVELOPMENT



UK optical community rallies to launch inaugural National Eye Health Week 2010

THE UK eyecare sector is joining forces with charities, health care commissioners and professionals to launch the first ever National Eye Health Week.

The week, which has been established to communicate the importance of good eye health under the banner, 'Vision Matters', encourages people from every walk of life to take better care of their eyes and have regular sight tests. This is one of the three priority outcomes of the UK Vision Strategy launched in 2008 by Vision 2020UK.

During the week, all LOCs, AOCs, PCTs and LHBs across the sector are encouraged to organise awareness activities and promote eye health.

To take part visit www.visionmatters.org.uk and join our network www.networks.nhs.uk/nhs-networks/national-eye-health-week-2010 and see how you can promote eye health. Be a part of National Eye Health Week because Vision Matters!

Give us your feedback.....

Is there anything you would like
more information about?

CONTACT DETAILS

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