



HM Prison &  
Probation Service

Action Plan: HMP Parc

Action Plan Submitted: 12 May 2025

A Response to HMIP's Inspection: 13 – 23 January 2025

Report Published: 23 April 2025

## INTRODUCTION

HM Inspectorate of Prisons (HMIP) and HM Inspectorate of Probation for England and Wales are independent inspectorates which provide scrutiny of the conditions for, and treatment of prisoners and offenders. They report their findings for prisons, Young Offender Institutions, and effectiveness of the work of probation, and youth offending services across England and Wales to Ministry of Justice (MoJ) and His Majesty's Prison and Probation Service (HMPPS). In response to the report HMPPS / MoJ are required to draft a robust and timely action plan to address the priority and key concerns. Action plans provide specific steps and actions to address the priority and key concerns, that are clear, outcome focussed, measurable, achievable, and relevant with the owner and timescale of each step clearly identified. Action plans are sent to HMIP and published on the GOV.UK website. Progress against the implementation and delivery of the action plans will also be monitored and reported on.



# ACTION PLAN: HMIP REPORT

## ESTABLISHMENT: HMP PARC

1. Rec No	2. Concerns	3. Response Action Taken/Planned	4. Responsible Owner	5. Target Date
	<b>Priority concerns</b>			
1	<p><b>The number of violent incidents was high.</b> Leaders' understanding of the causes was limited and their response was yet to have an effect.</p>	<p>HMP Parc will aim to reduce levels of violence and incentivise positive behaviour by:</p> <ul style="list-style-type: none"> <li>The Head of Safety will review and relaunch a revised Violence Reduction (VR) policy that will be data driven to identify and address the causes and drivers of violence, ensuring it addresses all aspects of behaviour management and that responses to violence are coordinated and effective. The review will include ways to challenge and enhance the support available for repeat perpetrators of violence</li> <li>The Head of Safety will review the case management of Challenge, Intervention and Support Plans (CSIP), to provide support and learning to Case Managers in the completion of plans. Underpinned by assurance checks, with feedback provided to Case Managers and identified good practice discussed at the weekly Safety Intervention Meeting (SIM).</li> <li>The Head of Residence will review and publish the Incentives Policy (IP) scheme. There will be a focus on its application and improving the offer available to foster good behaviour, promote rational decision-making and to incentivise prisoners who engage in sentence progression activity.</li> <li>Improving oversight of the adjudication process, including the quality assurance of hearings, backlogs, data analysis, referrals to the police and by reviewing the quorum of attendees at the monthly Segregation Monitoring and Review Group (SMARG), where appropriate time bound actions will be generated to drive improvements. Additionally, a new performance dashboard to monitor adjudications and improve timeliness of adjudications will be introduced.</li> </ul>	Director	<p>September 2025</p> <p>July 2025</p> <p>July 2025</p> <p>August 2025</p>



		<ul style="list-style-type: none"> <li>• Reviewing the monthly tripartite meeting between the Safety, Security and Drug Strategy teams, to improve information sharing share to address the causes of violence.</li> <li>• Ensuring the safety team collate and review all data relating to violence, including intelligence from CSIP investigations, prisoner focus groups and Prison Record and Information System Management (PRISM) reports, to improve the understanding of causes and drivers of violence for discussion at the multi-disciplinary monthly Safety Meeting, where appropriate actions to reduce violence will be generated and added to the consolidated safety action plan. The timescales, effectiveness and impact of all the actions will be monitored at the meeting.</li> <li>• The Deputy Director will monitor attendance at all key meetings to ensure they are appropriately attended by all key functions/heads, to improve discussion and information sharing so appropriate data driven actions can be agreed and generated.</li> </ul>		<p>June 2025</p> <p>June 2025</p> <p>May 2025</p>
2	<p><b>The availability and use of illicit drugs were widespread.</b> Nearly a third of all random drug test results were positive and, in our survey, over half of prisoners said that it was easy to get drugs in the prison.</p>	<p>HMP Parc and Dyfodol (the substance misuse treatment provider) and will aim to reduce the availability of drugs and support those using illicit substances by:</p> <ul style="list-style-type: none"> <li>• Collaborative working between HMP Parc and Dyfodol to develop a Demand Reduction Pathway that sets out a prison-wide approach to reducing the demand for illicit substances.</li> <li>• Developing an incentivised substance-free living unit to create a safe, supportive environment that encourages, motivates and incentivises those prisoners wishing to reduce dependency on illicit drugs and desist from involvement in acts of violence and/ or self-harm linked to substance misuse.</li> <li>• G4S will develop a business case and investment programme for replacing the cell windows at HMP Parc, to reduce the risk of drones being used to convey drugs.</li> <li>• Reviewing the Searching Strategy to ensure it accurately reflects the intelligence picture, allowing searching to be more targeted to reduce the availability of illicit substances.</li> <li>• Continuously monitoring security intelligence to identify emerging threats and trends through the monthly Local Tactical Assessment (LTA) and Local Tactical Board</li> </ul>	G4S/ Director/ Health Provider	<p>August 2025</p> <p>August 2025</p> <p>May 2025</p> <p>August 2025</p> <p>Complete</p>



		<p>(LTB), so key priorities and threats can be identified and resources deployed accordingly.</p> <ul style="list-style-type: none"> <li>• Gate Security and supporting intelligence will be reviewed to ensure searching procedures are robust.</li> <li>• Implementing rehabilitative adjudications for drug related charges to support prisoners using illicit substances, encouraging them to engage with Dyfodol services via a reduced adjudication award.</li> <li>• Improving the collaborative sharing of key information between Dyfodol and the Health Provider (Cwm Taf Morgannwg University Health Board), ensuring sharing Psychosocial support is documented in the main health care records.</li> <li>• The Drugs Strategy Lead (DSL) will ensure strategic oversight and attendance at the monthly drug strategy meeting, where data and trends will be discussed that generate actions to support the effectiveness of the Drug Strategy. The DSL will continue to work with key partners to ensure a multi-agency approach is taken both inside and outside the prison walls to reduce the availability of illicit substances.</li> </ul>		<p>Complete</p> <p>August 2025</p> <p>September 2025</p> <p>May 2025</p>
3	<p><b>Levels of recorded self-harm remained high, and not enough was being done to address the causes of this.</b></p>	<p>HMP Parc will aim to reduce levels of self-harm by:</p> <ul style="list-style-type: none"> <li>• Reviewing the support provided to prisoners, both on the safer custody unit and across the wider establishment, ensuring the needs of those in acute crisis are met and that appropriate support is offered to reduce harm amongst those identified as prolific self-harmers.</li> <li>• The Safety Team will support case managers to improve Assessment Care in Custody Teamwork (ACCTs) care plans and their case management by; ensuring reviews are multi-disciplinary, providing coaching and mentoring so processes are robustly followed, including identifying and assigning individual interventions in care plans to address identified risks.</li> <li>• Reviewing the ACCT Quality Assurance process to ensure all issues are identified, responsible parties challenged, and quality is improved in all areas of ACCT case management.</li> <li>• Ensuring operational staff receive refresher Suicide and Self-Harm training. All new staff will be trained as part of their initial training course.</li> </ul>	Director	<p>June 2025</p> <p>June 2025</p> <p>July 2025</p> <p>Ongoing</p>



		<ul style="list-style-type: none"> <li>Improving the consistency of regime delivery via a review of staff profiles and the core day, increasing access to purposeful activities and opportunities for social interactions to relieve identified general frustration and boredom. Case managers and residential staff will encourage all prisoners supported by the ACCT process to engage in the regime.</li> <li>Continued oversight of the implementation of recommendations made by the Prisons and Probation Ombudsman, including those relating to health care provision, with learning being reinforced with staff every six months to ensure actions are embedded.</li> <li>The Head of Safety will ensure all acts of serious self-harm are routinely investigated for further learning.</li> <li>The Safety team will review the use of the ACCT database to ensure data is being used effectively, improving the analysis of trends, patterns and causes of self-harm. The safety team will share their understanding of the causes of self-harm in the monthly Senior Leaders Team (SLT) and safety meetings, where appropriate actions to reduce self-harm will be added to the consolidated safety action plan.</li> </ul>		<p>October 2025</p> <p>Complete</p> <p>May 2025</p> <p>May 2025</p>
4	<p><b>Actions by leaders to resolve and mitigate identified risks to health outcomes had been too slow.</b> There was a shortage of suitable clinical space, particularly for dentistry, and insufficient prison staff to facilitate hospital escorts.</p>	<p>Cwm Taf Morgannwg University Health Board will improve health outcomes by:</p> <ul style="list-style-type: none"> <li>The Directorate Manager of Cwm Taf Morgannwg University Health Board and clinical services will review opportunities to increase the level of visiting services available at HMP Parc, to potentially reduce the requirement of hospital escorts.</li> <li>Engaging with HMP Parc to develop the action plan following the recent Health Needs Analysis, including a review of substance misuse and mental health services (See concern 5).</li> <li>Exploring opportunities to utilise Wi-Fi across prison residential areas to provide more opportunities for wing-based healthcare.</li> <li>Improving and aligning oversight of governance processes by introducing a single comprehensive risk register, that will include dental service risks and the lack of clinical space.</li> </ul>	Health Provider	<p>October 2025</p> <p>October 2025</p> <p>June 2025</p> <p>June 2025</p>



		<ul style="list-style-type: none"> <li>• Agreeing the required staffing model informed by the recently completed health needs analysis. Once agreed, recruitment campaigns will be run to fill all identified health related vacancies.</li> <li>• Embedding management checks to improve the cleanliness of all health care areas, including the display and publication of health promotion information in all waiting areas.</li> <li>• Reviewing the clinical information system to ensure all patients with long-term conditions who require a care plan have one, and that care can be reviewed chronologically. All patients diagnosed with cancer have a named nurse and have a comprehensive care plan.</li> <li>• Ensuring all secondary reception screenings are carried out by a qualified nurse.</li> </ul> <p>HMP Parc will ensure they facilitate hospital escorts and provide sufficient clinical space by:</p> <ul style="list-style-type: none"> <li>• Reviewing the Regime Management Planning to ensure it is consistently utilised to meet the agreed profiled escorts requirements.</li> <li>• HMP Parc, with support from the Health Provider, will undertake a scoping exercise to identify additional clinical / office spaces outside of the current healthcare unit to improve provision, in conjunction with the review of health services.</li> <li>• The capacity and demand for healthcare services at HMP Parc will remain under continuous review via the quarterly Health Partnership Board meeting structure attended by the Director/Deputy and the HMPPS controller.</li> </ul>	Director	<p>June 2025</p> <p>August 2025</p> <p>August 2025</p> <p>October 2025</p> <p>June 2025</p> <p>November 2025</p> <p>July 2025</p>
5	<b>Mental health and substance misuse services were under-resourced and did not meet the needs of the population.</b>	<p>Cwm Taf Morgannwg University Health Board and Dyfodol will improve the mental health and substance misuse provision by:</p> <ul style="list-style-type: none"> <li>• Undertaking a service review of current mental health and substance misuse services as part of the Royal College of Psychiatrists (RCPsych) All-Wales review, to identify the resources required to meet the needs of the population.</li> </ul>	Health Provider	May 2025



		<ul style="list-style-type: none"> <li>On receipt of the RCPsych report, development of a business case to identify opportunities to increase staffing and training for mental health and substance misuse services.</li> <li>Reviewing current psycho-social substance misuse services, including a review of future capacity requirements.</li> <li>Increasing the available psychiatry sessions for patients who need specialist complex mental health services.</li> <li>Commissioning a review to inform the development of a sustainable model of care for psychologically informed care at HMP Parc, including the provision of psychological therapies under part 1 and part 2 of the Mental Health Matters Wales; trauma informed care and consultation and supervision within the prison.</li> <li>The capacity and demand for healthcare services at HMP Parc will remain under continuous review via the quarterly Health Partnership Board meeting structure attended by the Director/Deputy and the HMPPS controller.</li> </ul>		<p>August 2025</p> <p>August 2025</p> <p>May 2025</p> <p>August 2025</p> <p>July 2025</p>
6	<b>Too few prisoners attended education, skills or work sessions, in part because of weaknesses in allocations and inconsistencies in the regime, and data on attendance were not used effectively across the prison to identify trends and address poor attendance.</b>	<p>HMP Parc and Novus Gower (the Education Provider) will improve prisoners' allocation and attendance at Education, Skills and Work (ESW) sessions by:</p> <ul style="list-style-type: none"> <li>Ensuring all pathway choices are shared with the allocations team prior to a prisoner being allocated, to ensure they are allocated an activity that supports their aspirations.</li> <li>The Head of Education, Skills and Work (HoESW) will implement a monthly quality assurance process of all allocations, including their timeliness, ensuring prisoners are allocated to work and education spaces that align with their Learning Plans.</li> <li>Reviewing the allocations and timetabling process so prisoners do not have to choose one activity over another. The review will link into the IP policy review (See concern 1) to incentivise attendance.</li> <li>Regularly having at least 80% of the eligible population allocated to an activity.</li> <li>Improving the consistency of regime delivery via a review of staff profiles and the core day, allowing for increased access to purposeful activities (See concern 3).</li> </ul>	Director/ Education provider	<p>August 2025</p> <p>September 2025</p> <p>September 2025</p> <p>September 2025</p> <p>October 2025</p>





		<ul style="list-style-type: none"> <li>Implementing an ESW basic skills and employment dashboard to improve the analysis of ESW data. The weekly ESW meeting will utilise the dashboard to monitor, challenge and identify trends for non-attendance to drive improvements. The dashboard will be shared and accessible by all key stakeholders, to allow multi-disciplinary working and evaluation of practice.</li> <li>Attendance and reasons for non-attendance will be monitored and tracked at the weekly ESW meeting, monthly Quality Improvement Group (QIG) and the monthly Education Partnership Board (EPB) meeting, where actions can be raised to identify and address any barriers to attendance.</li> </ul>		May 2025  July 2025
7	<p><b>Not enough was being done to support prisoners to reduce their risk or progress in their sentence.</b></p> <p>Contact with offender managers was infrequent, and key work delivery did not support offender management.</p>	<p>HMP Parc and Probation Service Wales will support prisoners to reduce their risk and progress in their sentence by:</p> <ul style="list-style-type: none"> <li>Implementing a Reducing Reoffending (RR) strategy, informed by a needs analysis, that will support prisoners in reducing their risk. A data driven action plan will support the strategy to identify and measure progress across all resettlement pathways.</li> <li>Recruiting a Head of Offender Management Services (HOMS) to co-ordinate and drive improvements.</li> <li>Ensuring the prison has a sufficient complement of Prison Offender Managers (POM) to reduce caseloads and increase face to face contacts.</li> <li>Reviewing POM workloads and priorities, identifying any barriers and/or support required, to enable sufficient timely opportunities for prisoners to meet face to face with their POM to discuss progress. The outcome of the review will be discussed at the RR meeting.</li> <li>Delivering In-person supervision sessions in accordance with National Standards, within the first three months of arrival and prior to the case being handed over to the Community Offender Manager (COM) to manage.</li> <li>Completion of a sentence plan for all eligible prisoners in line with National Timeframes, reviewed whenever there is a significant change of circumstance.</li> </ul>	Director/ Probation Service Wales	September 2025  Complete July 2025 May 2025  August 2025 August 2025



		<ul style="list-style-type: none"> <li>• POMs will exercise their professional judgement to schedule supervision sessions with prisoner's, dependent upon the risk and need presented during the custodial term.</li> <li>• The Senior Probation Officer will monitor the quality and frequency of offender manager sessions by POMs, identifying priorities to help drive sentence plans that support risk management and progression, providing the POM with support and training as required.</li> <li>• Rolling out the new suite of accredited Offending Behaviour Programmes (OBPs), ensuring they are targeted effectively to maximise the impact of risk reduction work. Supporting the delivery of OBPs will be structured one-to-one offending behaviour work delivered by the POM, to help robustly challenge prisoners' attitudes, thinking and behaviour.</li> <li>• Delivering staff refresher training to ensure key workers are upskilled in understanding how key working supports offender management, and how this can be achieved.</li> <li>• Ensuring all vital information about prisoners is accessible and shared across all departments as part of quality assurance processes, and that all contacts between POM and Keyworkers are recorded on the Prison National Offender Management System (P-Nomis).</li> <li>• The RR meeting will monitor and track progress for all sentence planning and offending behaviour related work, ensuring the prison is providing the necessary support to allow all prisoners to progress with their sentences.</li> </ul>		<p>August 2025</p> <p>June 2025</p> <p>December 2025</p> <p>August 2025</p> <p>July 2025</p> <p>July 2025</p>
8	<b>There were gaps in public protection arrangements.</b> Checks of new arrivals were delayed, arrangements for offence-related monitoring were inadequate and	<p>HMP Parc will improve public protection arrangements by:</p> <ul style="list-style-type: none"> <li>• Establishing a quarterly Public Protection Steering Group meeting to provide governance and strategic direction for public protection arrangements.</li> <li>• Reviewing and relaunching the monthly Interdepartmental Risk Management Meeting (IRMM), promoting a whole prison approach to public protection risk assessment and management. The Head of Offender Management Delivery (HOMD) will ensure core membership attendance (in line with the Public Protection</li> </ul>	Director/ Probation Service Wales	<p>July 2025</p> <p>Complete</p>



	oversight before the release of prisoners who presented the greatest risk was insufficient.	<p>Policy Framework), robust record keeping, and sufficient, timely and collaborative oversight of all high-risk prisoners due for release.</p> <ul style="list-style-type: none"> <li>• The HOMD and Head of Security will improve collaboration and oversight of public protection arrangements between the two departments, ensuring decisions and authorisations are adequately informed and documented, to ensure all new arrivals are appropriately screened and identified for consideration for offence-related communication monitoring.</li> <li>• The HOMD will implement quality assurance checks via the public protection assurance tool. The checks will ensure compliance with the framework timeframes, timeliness of referrals and confirmation and recording of Multi Agency Public Protection Arrangements (MAPPA) levels.</li> </ul>		<p>July 2025</p> <p>August 2025</p>
	<b>Key concerns</b>			
9	<b>The quality of key work sessions was not good enough, and allocation of key workers was inconsistent.</b>	<p>HMP Parc will improve the quality of key work sessions and the allocation of key workers by:</p> <ul style="list-style-type: none"> <li>• Rolling out a revised Key Worker Strategy and action plan, including a new keyworker allocation process, that will include the upskilling and development of staff groups involved in Offender Management in Custody (OMiC) and Keyworker strategies.</li> <li>• Updating key working quality assurance processes to ensure they include how key working supports offender management.</li> </ul>	Director	<p>August 2025</p> <p>July 2025</p>
10	<b>Food served at mealtimes was not always adequate, and the prison shop did not sell sufficient healthy</b>	<p>HMP Parc will improve food and shop provision by:</p> <ul style="list-style-type: none"> <li>• In collaboration with the catering supplier (Aramark), review and revise current systems, to increase the amount of available healthy food options. The review will include equipment provision, portion control, and prisoner feedback on food quality.</li> <li>• Residential managers will ensure all serveries are adequately supervised to ensure portion control and the correct handling/serving of food.</li> </ul>	Director	<p>July 2025</p> <p>June 2025</p>



	items, including fresh fruit and vegetables.	<ul style="list-style-type: none"> <li>• Exploring options to maximise the efficiency of the main kitchen and available storage space to cater for the size of the population.</li> <li>• Improving the provision of goods in the prison shop, including fresh fruit, vegetables and cultural items.</li> <li>• Conducting six monthly catering and shop surveys, to ensure available provision meets the general and cultural needs of the population.</li> <li>• HMP Parc will monitor the provision of food and shop items, ensuring available provision meets the needs of the population, discussed at the SLT meeting.</li> </ul>		<p>July 2025</p> <p>May 2025</p> <p>October 2025</p> <p>July 2025</p>
11	The application process did not function effectively, and forms to make a complaint were not always available.	<p>HMP Parc will improve the applications and complaints processes by:</p> <ul style="list-style-type: none"> <li>• Reviewing and maintaining the technology available to improve the ease of accessing and tracking applications. Residential Managers will carry out weekly checks of technology to ensuring it is functioning correctly.</li> <li>• Data relating to applications, including quality assurance, themes and timeliness, will be built into a management information report, reviewed monthly at the SLT meeting.</li> <li>• The application process will be recorded weekly by the performance team, to look at the number and types of application that have been submitted. Additionally, weekly monitoring of the process will look at the number of applications that are overdue, to identify and notify areas to improve response times.</li> <li>• Ensuring the availability and daily replenishment of complaint forms and associated envelopes on all residential units. Implementing a clear governance system to ensure a weekly record of availability is completed and recorded by the internal audit and assurance team.</li> <li>• Complaints will be shared via a management information report to help identify hotspots and target resolutions, to ensure prisoners are listened to and appropriate, fair resolutions are in place, to both resolve the complaint at hand and prevent reoccurrence. Using the complaints peer, HMP Parc will incorporate a review into the prisoner council meetings to gather information from a peer perspective around identified themes, providing feedback and assurance through actions planned to address any emerging themes identified through complaints analysis.</li> </ul>	Director	<p>June 2025</p> <p>September 2025</p> <p>September 2025</p> <p>June 2025</p> <p>June 2025</p>



12	<b>Access to the library remained too limited, particularly for those not attending education classes.</b>	<p>HMP Parc and Novus Gower will improve access to the library for all prisoners by:</p> <ul style="list-style-type: none"> <li>As part of the core day review (See concerns 3 and 6), sufficient time will be allocated for prisoners, including vulnerable prisoners, to access the library once a week as a minimum. The regime management planning meeting will ensure appropriate resources are allocated to facilitate library attendance.</li> <li>Reviewing the allocations and timetabling process (See concern 6), so prisoners do not have to choose one activity over another, including access to the library.</li> <li>Reviewing the education timetable to build in time for those attending education in the amenities building to access the library.</li> <li>Library attendance will be monitored at the weekly ESW and monthly QIG meetings, where actions can be raised to identify and address any barriers to attendance.</li> </ul>	Director/ Education Provider	<p>October 2025</p> <p>September 2025</p> <p>July 2025</p> <p>May 2025</p>
13	<b>Some teaching was weak and did not challenge all learners or plan for their progression.</b>	<p>Novus Gower will improve the quality assurance of education by:</p> <ul style="list-style-type: none"> <li>Reviewing the Quality Calendar to support a robust and consistent evaluation of teaching, using teaching observations and learning walks that will identify areas for improvement and Continuous Professional Development (CPD) for staff, including appropriate feedback to improve the quality of teaching.</li> <li>Implementing a comprehensive programme of professional training for all education staff. Focussing on improving the quality and targeting of questioning, embedding recall tasks into teacher's planning, improving teacher understanding of how to support Additional Learning Needs (ALN) learners, lesson planning structure, increasing the purposeful use of digital tools and planning for challenge and progression.</li> <li>Improving the quality monitoring (lesson observations, learning walks and work checks) and learning for all staff, with Novus Gower leaders ensuring all teachers receive high quality developmental feedback on their teaching that feeds into their personal CPD plan quarterly to improve the quality of delivery.</li> <li>The G4S HoESW, Industries manager and the Novus Gower Learning and Skills Manager will complete monthly Quality Assurance checks of education delivery as part of the quality calendar and quality cycle.</li> </ul>	Director/ Education Provider	<p>August 2025</p> <p>October 2025</p> <p>June 2025</p> <p>July 2025</p>



		<ul style="list-style-type: none"> <li>Quality assurance and targets for improvement will be documented, monitored, and tracked at the monthly QIG and EPB meetings.</li> </ul>		September 2025
14	<b>Self-evaluation of the education, skills and work provision was neither precise nor comprehensive, failing to prioritise the areas of most importance to securing progress.</b>	<p>The G4S HoESW and Novus Gower will improve the evaluation of ESW and analysis of data to identify areas of improvement by:</p> <ul style="list-style-type: none"> <li>Completing an annual joint self-evaluation of all ESW provision.</li> <li>The Gower College Quality Team will implement a quality assurance process to ensure that self-evaluation is precise, comprehensive and prioritises the area's most important to securing progress.</li> <li>Education Managers will evaluate all available data, including but not limited to, CURIOUS data, CPD information and teachers and learners' feedback to identify areas requiring improvement. The QIG will have a standing agenda item to discuss the emerging strengths and areas for development. The Contract Management and Assurance Team, Novus, HMPPS Learning and Skills lead and Gower College Swansea will provide additional support and review the findings.</li> <li>Data will be used to identify areas of the prison regime that may affect attendance or delivery, including scheduling, non-attendance and behaviour sanctions. Identified issues will be raised at the weekly ESW meeting to explore options to overcome barriers to delivery, monitored through the QIG and EPB meetings.</li> <li>Improved oversight of all aspects of work and training offered, allowing the outcomes of all learners to be included in the providers' overall evaluation of the provision.</li> </ul>	Education Provider / Director	<p>April 2025 May 2025</p> <p>September 2025</p> <p>June 2025</p> <p>June 2025</p>

