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# Closed Circuit Television Footage and Security Data Policy

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## 1. Purpose

The WA Country Health Service (WACHS) is committed to providing a safe and secure environment for all patients, visitors and staff at all its sites and services and meeting the challenges faced by staff in providing care.

This policy describes the provision, access and governance of Closed Circuit Television (CCTV), associated approved video and audio recording devices and appropriate access and disclosure of security data.

## 2. Policy

The WA Country Health Service:

- recognises that video surveillance is a tool which may assist in reducing the incidence of crime in WACHS facilities, or may reduce the risk of adverse events or interactions
- supports the responsible person to determine, in consultation with employees, the need for video surveillance at the WACHS facility based on the results of a risk assessment
- recognises that video surveillance is to be operated with respect for people's privacy, dignity and their right to conduct or engage in lawful activities.

For this policy, security footage is considered to be visual and/or audio recordings from:

- CCTV, including stills
- footage, from body worn cameras and other surveillance devices.

Other security data is information held by WACHS Security Services which includes:

- security log data (electronic security database reports)
- access control systems data
- incident reports
- security incident investigations and related evidence
- other information controlled by the Security Services within WACHS
- data stored on data storage devices and cloud-based storage.

Security data is collected and managed in accordance with:

- *Health Services Act 2016 (WA)*
- *State Records Act 2000 (WA)*
- *Surveillance Devices Act 1998 (WA)*
- Freedom of Information Act 1992 (WA)
- all relevant WA Health policy frameworks, mandatory policies and procedures ([Section 8. Document Summary](#))
- internal Security Services protocols.

## 2.1 Video and Audio Systems

### Closed Circuit Television (CCTV)

All WACHS regions have CCTV systems located and operated at most individual sites. In accordance with the [Premier's Circular 2021/06 - Registration of CCTV Systems](#), WACHS CCTV systems are registered with Cam-Map WA, a site hosted by WA Police. WACHS CCTV and other audio and video systems are managed and operated in accordance with:

- AS 4485.2 - 1997: Security for Health Care Facilities
- AS 4806.1 - 2006: Closed Circuit Television (CCTV)
- [Australasian Health Facilities Guideline 2018 \(AHFG\)](#)
- *Surveillance Devices Act 1998* (WA)
- WA Police ANZPAA Recommendations for CCTV Systems minimum retention period of 31 days
- all relevant WA Health policy frameworks, mandatory policies and procedures.

According to the Australasian Health Facilities Guideline 2018 (AHFG), Closed Circuit Television (CCTV) placement is applicable to the following areas:

- emergency unit after hours patient entrance
- ambulance bay after hours entrance
- any entrance used for access to a Birthing Unit after-hours
- corridors, courtyards and secure rooms in an Acute Psychiatric Unit which cannot be adequately observed from a Staff Station
- staff and public car parks
- other Units where access control is desirable, e.g., patient care areas including Intensive Care Unit, Paediatric Inpatient Unit, Maternity Inpatient Unit, Pharmacy, Stores, Dangerous Goods Storage.

Unconcealed video surveillance, in a security risk management context, is generally used to achieve the following objectives:

- to deter security incidents e.g., theft, vandalism, violence, etc.
- to gather information that may be used in evidence if a crime is committed within view of the camera (where the camera is recording)
- to allow a security incident to be viewed as it is occurring and an appropriate response to be raised.

It is prohibited under the *Surveillance Devices Act 1998* (WA) to install CCTV in any change room, toilet facility, shower or other bathing facility at work.

### Body Worn Cameras

A body worn camera (BWC) is a wearable audio, video or photographic recording system. To ensure the safety and security of hospital users, Security Officers are equipped with BWCs whilst on duty to decrease the likelihood of violent or aggressive behaviour, reduce staff injuries, enhance and expedite incident review and complaint management practice.

BWCs are classed as a listening device and an optical surveillance device for the purposes of the *Surveillance Devices Act 1998* (WA) (SDA). The SDA prohibits the use of listening devices or optical surveillance devices to record, monitor, observe or listen to 'private' conversations or activities except in limited circumstances.

### Approval for release of footage:

Tier 3B/Tier 4 site delegated authority, Manager Security Data Custodian

Refer to: WACHS [Body Worn Camera Procedure](#)

## 2.2 CCTV monitoring for clinical services in WACHS

- Use of CCTV monitoring is used in Community Mental Health and Inpatient Mental Health Services in conjunction with direct visual observation for the protection of staff, service users, carers and visitors. CCTV monitoring does not replace direct visual observation and personal interaction between staff and service users.
- CCTV is used for visual monitoring and may be used for the purpose of ensuring the safety and welfare of patients and others by enabling an appropriate response to be activated in the event of any identified risk to a patient/client and/or other person.
- Consumers, families, personal support persons, visitors and staff of WACHS are entitled to have their privacy protected. The privacy and dignity of patients/clients is not to be comprised using CCTV. Principle 10 of the Charter of Mental Health Care Principles under the [Mental Health Act 2014](#) state that 'A mental health service must be respect and maintain privacy and confidentiality'.
- CCTV can be used to monitor patients placed in seclusion. CCTV is not, as stipulated above, a substitute for direct visual observation (i.e. face-to-face or via an observation window) by a nurse or mental health practitioner at least every 15 minutes (s.222, [Mental Health Act 2014](#)).
- Staff or clinicians using CCTV are to receive training regarding the use of CCTV as part of orientation to the mental health inpatient ward and a record of training is to be kept by the site delegated authority.
- Appropriate signage is to be displayed indicating that the area is under video surveillance.
- The design and location of signs will be in compliance with the Australian Standard (AS) 2342-1992 Development, Testing and Implementation of Information and Safety Symbols and Safety Signs.
- Cameras are not to be used to infringe on individual's (patients, families, visitors and staff) rights of privacy.
- It is prohibited under the *Surveillances Devices Act 1998* to carry out any surveillance of an individual in any change room, toilet facility or shower or other bathing facility.

## 2.3 Appropriate management of video, audio footage and other security data

### Access approval (other than Freedom of Information (FOI), media or WA Police matters/requests)

- Requests for accessing security footage and/or data are to be submitted in writing using the [WACHS Security Footage and Data Access Request Form](#) and are to have direct approval from an approved delegated authority (Tier 3B/Tier 4 site delegated authority is the Data Custodian\* for security data - as per the WACHS Combined Authorities Schedule). Requests submitted via any other format are not to be accepted.  
\* *Data Custodian for security data is the Tier 3B/Tier 4 site delegated authority and WACHS Manager Security for BWC footage.*
- Security Officers are permitted to access security data only in the execution of their normal duties. Requests from Security Officers outside the execution of their normal

duties (i.e. for personal reasons) need to go through the Freedom of Information (FOI) process.

## 2.4 Internal requests

### Medication Discrepancy Review – Schedule 4 and Schedule 8 Medications

Requests for access to CCTV footage directly related to the investigation of a Schedule 4 Restricted (S4R) or Schedule 8 (S8) medication discrepancy must be approved by the Regional Chief Pharmacist as the site Medicines and Poisons Permit Holder. In the absence of the Regional Chief Pharmacist, to enable timely review, the request may also be approved by the WACHS Chief Pharmacist or Deputy Chief Pharmacist as the Tier 4 Delegated Authority.

Where applicable, the request must be accompanied by a completed Medication Discrepancy Review form (Part 1 and/or Part 2), and include the rationale for access, specific timeframe, and relevance to medication discrepancy investigation. Upon approval access may be granted to the senior position responsible for investigating the medication discrepancy.

Requests for access to CCTV footage relating to any other medication related investigations must follow the below Integrity/Workforce issues or Staff requests for other purposes.

All access and handling of CCTV footage must comply with privacy, confidentiality, and data governance obligations, and will be coordinated in consultation with the Manager, Security.

**Approval:** Chief Pharmacist or Deputy Chief Pharmacist as the Tier 4 Delegated Authority.

### Integrity/Workforce issues

Internal requests to view or obtain security footage and/or data as part of an investigation into workforce matters are to have approval from the Director Integrity Unit.

Where the information or recording is requested by a different part of WACHS, the Manager Security is to review the footage and determine if it is appropriate to provide part or all of the footage or a summary. Regard is to be given to if the recording contains any personal, patient or health information.

Where security footage and/or data is required for an enquiry or investigation into a suspected breach of discipline, e.g. a copy may be required for the Corruption and Crime Commission (CCC). Requests for copies of security data for the provision of external oversight agencies that relate to internal investigations are to be facilitated through the Director, Integrity Unit.

To release under *Health Services Act 2016*, s.220(1)(g).

**Approval:** Director Integrity Unit.

## Staff requests for other purposes

All other internal requests to view or access security footage and/or data (examples could include for the provision of information to the Insurance Commission of WA or for training purposes or post incident review) is to be approved by an appropriate Tier 3B/Tier 4 site delegated authority (for security footage) or Data Custodian (for security data). Requests of this nature may only be used for the approved purpose outlined in the [WACHS Security Footage and Data Access Request Form](#) .

**Approval:** Tier 3B/Tier 4 site delegated authority (security footage); Data Custodian (security data only).

## Declaration for internal requests of security data only

For internal requests, excluding those covered under 'External requests', for the release of security footage and/or data, the recipient is to attest in writing (using the [WACHS Security Footage and Data Access Request Form](#)) that the footage and/or data are only to be used for the intended purpose and are not to be circulated to any other additional parties without express written permission from a Tier 3B/Tier 4 site delegated authority.

## 2.5 External requests

### Freedom of Information requests

Requests to view or obtain a copy of security footage and/or data through a Freedom of Information (FOI) application are to be submitted to the central Release of Information (ROI) Team for processing and the relevant Tier 3A and above for approval.

Subject to the *Freedom of Information Act 1992 (FOI Act)*, security footage and/or data is to be adequately edited to remove all identifiable third party information and/or to protect patient and staff confidentiality.

**Approval:** Tier 3A and above.

### Media requests

Media requests for security footage and/or data are to be lodged through the WACHS Communications team. CCTV footage is to be edited as required and approved by the relevant Tier 2A delegated authority.

A [WACHS Security Data Access Request Form](#) (for Media) is to be completed as required.

**Approval:** Tier 2A.

### Police requests

Police requests for access to security footage and/or data are to be submitted through a formal order to produce (OTP), subpoena or in writing. It is preferable that Police obtain an order to produce to access security footage and/or data.

Upon the production of an OTP or subpoena, the Tier 3B/Tier 4 site delegated authority or Manager Security can approve access to the security data for the purposes of WACHS complying with the order to produce or subpoena.

If the Police request information without an OTP or subpoena, the approver is to be satisfied that disclosure of security footage and/or data to the Police is authorised under s.220(1)(g) of the *Health Services Act 2016*. Information to be disclosed under the *Health Services Act 2016*, s.220(1)(g) requires the approval of the Tier 3B/Tier 4 site delegated authority as outlined in the WACHS Combined Authorities Schedule.

CCTV shared with Police is to be transferred by this approved process only:

- Digital Evidence Management System (DEMS) link
- USB Flash Drive (password protected)

Documentation is to be stored in accordance with State Records Act 2000 (WA).

**Approval:** Where a valid OTP / subpoena exists – central ROI Team, Tier 3B/Tier 4 site delegated authority, Manager Security.

To release under *Health Services Act 2016*, s.220(1)(g): Tier 3B/Tier 4 site delegated authority.

### Access and disclosure in the public interest to Police

In the event of an urgent external request that is considered to be reasonably necessary to lessen or prevent a real or immediate risk of danger to the public, approval is to be provided by the Tier 3B/Tier 4 site delegated authority (business hours) to release security footage and/or data to the Police. In the context of urgent requests from Police after hours (i.e. if the police need to access a still image of a missing patient), the relevant hospital/campus Executive on call can provide the necessary approval under the *Health Services Act 2016*. A written request or OTP is to be provided within 3 days of release of the security footage or data.

**Approval:** Tier 3B/Tier 4 site delegated authority and in the circumstance where the event occurs after hours, the on-call hospital/ campus Executive.

### Legal requests

Any legal requests requested through an order to produce or subpoena, for security footage and/or data are to be lodged with the FOI Coordinator at the relevant site or the Tier 3A and above. If the request is potentially related to a patient or visitor legal claim, the WACHS General Counsel is to also be notified.

Upon the production of an order to produce or subpoena, the relevant Tier 3A and above can approve access to the security footage and/or data for the purposes of WACHS complying with the order to produce or subpoena.

**Approval:** Tier 3A and above.

## Mental Health Advocacy Service requests

As per the provisions of the *Mental Health Act 2014*, requests to view or obtain a copy of security footage and/or data by the Mental Health Advocacy Service can only be facilitated if:

- patient consent is provided in writing
- the patient is a current inpatient
- other patient/staff identifiable information is pixelated, or the staff/patient (or authorised guardian) gives written consent.

**Approval:** Tier 3A.

## Editing CCTV footage for external requests only

Unless otherwise required to be disclosed in full, footage is to be adequately edited to remove all identifiable third-party information and/or to protect patient/staff confidentiality. The WACHS Communications Team are to edit footage as required. Edited security footage is not to be released without express permission from Tier 3A and above.

Editing of security footage is generally not required for Police/Coroners, etc. (where there is an order to produce/subpoena or an act of law requires access). All other external requests for security footage are to be edited.

## Recordkeeping - copies and archiving

For each access request where access or release of security footage and/or data is required, a duplicate copy of the security footage/data is to also be kept by WACHS Security Services. Details pertaining to the request, requester details, security data provided, including any footage, is to be saved in a secure folder in a WACHS compliant recordkeeping system, with the appropriate retention and disposal schedule applied.

In the event that a request is declined, details pertaining to the request, including the reason for not disclosing the security footage/data is also to be saved in a secure folder in a WACHS compliant recordkeeping system.

Security footage and/or data is only to be provided using a secure medium. On occasion, it may be necessary to provide on a disk or USB (e.g. for a court appearance). This is to be documented on the [WACHS Security Footage and Data Access Request Form](#).

Security footage and security data are to be kept as outlined in Section 88 of the [General Disposal Authority for State Government Information, Authority Number DA 2023-004](#).

## 3. Roles and Responsibilities

All WACHS employees are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be. Failure to do so may result in disciplinary action, in accordance with the MP 0127/20 [Discipline Policy](#).

The **Site Delegated Authority** is responsible for:

- determining the need for CCTV at the WACHS facility based on the results of a risk assessment to identify security risks and to determine and implement appropriate controls to eliminate or minimise the risks
- ensuring that signs informing the public of the existence of video surveillance cameras are erected. The signs are placed at each main access point to areas which members of the public are reasonably entitled to use and which are monitored. In deciding the design and location of signs, the responsible person at the WACHS facility is to consider Australian Standard 2342:1992 – Development, testing and implementation of information and safety symbols and symbolic signs.

Where continuous monitoring of video surveillance in higher risk areas is not possible, the responsible person is to ensure that the following strategies are to be implemented:

- CCTV is continuously recorded with archived images stored for at least seven days
- a fixed duress alarm is installed within the vicinity of CCTV camera
- a physical security response is mobilised where the fixed duress alarm is activated
- signage advising staff and others of the need to activate the fixed duress alarm in the event of an incident is displayed in the vicinity of the CCTV camera, and
- regular review of the effectiveness of the above strategies is undertaken to ensure risk and liability are being appropriately managed in a way that maintains the security of staff and others.

**Security Management** are responsible for ensuring compliance in relation to the implementation of this policy, including:

- procurement and licencing of devices and determination of use and contract management
- adherence to governance processes regarding the capture and storage of footage and audio, as well as evidentiary review and release of information captured
- ensuring security systems are in working order and organising repairs where required
- compliance with related procedures for the usage of BWC for SOs
- supply of BWCs to SOs on duty
- maintenance of the register of BWCs
- training of SOs in the use of BWCs, including the maintenance of the related training competency register.

**Security Officer** responsibilities include the following:

- completing the relevant system training prior to using them
- conducting regular system audits, logging faults and alerting security management
- appropriate testing of BWCs at each shift
- wearing allocated BWCs at all times while on shift
- activation of BWC for the appropriate incident, including but not limited to Code Black, other threats, emergency incidents and any other events deemed appropriate to capture footage
- ensuring footage captured is recorded and transferred to the related storage facility
- ensuring any CCTV or BWC footage captured has a related security incident reported in the electronic security database
- taking appropriate care of CCTV systems and BWCs and reporting faults to Security Management.

**Mental Health** responsibilities are as follows:

- Mental Health Team Leaders and Clinical Nurse Managers are to ensure the provision of orientation and education to relevant WACHS clinicians and staff on the use of CCTV in mental health.
- WACHS Clinical Directors and Regional Mental Health Managers are to ensure that the principals and requirements of this policy are applied, achieved and sustained.

**All staff** are to:

- report risks and hazards to the responsible person, and where appropriate
- assist the responsible person to determine the usefulness of video surveillance at their place of work, and
- adhere to the requirements of this policy.

**All staff** are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be. Failure to do so may result in disciplinary action, in accordance with the MP 0127/20 [Discipline Policy](#).

## 4. Monitoring and Evaluation

### 4.1 Monitoring

Monitoring is to be undertaken as follows:

- Each WACHS site/service is to be able to demonstrate compliance with this policy by providing evidence that the monitoring requirements outlined in this policy are being met.
- WACHS site executive and management teams are responsible for ensuring that all compliance monitoring and reporting are undertaken and reported to the relevant managers and committees.

### 4.2 Evaluation

Evaluation is to be undertaken as follows:

- This policy will be reviewed as required to determine effectiveness, relevance and currency. At a minimum it will be reviewed every three years by the WACHS, Manager Security.
- Annual audits of requests for security footage and or data for appropriate authority by sites to be reported to the Manager Security.

## 5. Compliance

This policy is a mandatory requirement under the [Surveillance Devices Act 1998 \(WA\)](#) and [Mental Health Act 2014](#) (WA).

Failure to comply with this policy may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to Section 26 of the [Health Services Act 2016](#) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies and procedures is mandatory.

## 6. References

[AS 4485.2 - 1997: Security for Health Care Facilities](#)

[AS 4806.1 - 2006: Closed Circuit Television \(CCTV\)](#)

[Australasian Health Facilities Guideline 2018 \(AHFG\)](#)

[Charter of Mental Health Care Principles](#)

[Chief Psychiatrist's Standards for Clinical Care](#)

[Clinician's Practice Guide to the Mental Health Act 2014](#)

[Office of Chief Psychiatrist Standards and Guidelines](#)

[WA Health Clinical Services Framework 2014-2024](#)

[WA Police ANZPAA Recommendations for CCTV Systems](#)

## 7. Definitions

Term	Definition
<b>Body Worn Camera (BWC)</b>	a wearable portable audio, video, or photographic recording system. These cameras capture real time audio and video recordings of interactions between Security Officers and the public.
<b>Code Black</b>	Security incident that may involve an imminent and serious risk of bodily harm, child abduction, active armed offender or self-harm from height.
<b>Closed Circuit Television</b>	Closed Circuit Television (CCTV) is a system that uses video cameras to transmit television signals to a specific location displayed on a limited set of monitors. Unlike broadcast television, where the signal is openly transmitted, CCTV operates within a more confined scope.
<b>Data Custodian</b>	The identified person responsible for approving the use of the data they oversee.
<b>Incident</b>	Any unplanned event resulting in, or having a potential for injury, ill health, damage or other loss.
<b>Listening Device</b>	Any instrument, apparatus, equipment, or other device capable of being used to record, monitor or listen to a private conversation or words spoken to or by any person in private conversation, but does not include a hearing aid or similar device used by a person with impaired hearing to overcome the impairment and permit that person to hear only sounds ordinarily audible to the human ear.
<b>Private activity</b>	Any activity carried on in circumstances that may reasonably be taken to indicate that any of the parties to the activity desires it to be observed only by themselves but does not include an activity carried on in any circumstances in which the parties to the activity ought reasonably to expect that the activity may be observed.
<b>Private conversation</b>	Any conversation carried on in circumstances that may reasonably be taken to indicate that any of the parties to the conversation desires it to be listened to only by themselves but does not include a conversation carried on in any circumstances in which the parties to the conversation ought reasonably to expect that the conversation may be overheard.
<b>Surveillance device</b>	A listening device, an optical surveillance device or a tracking device.

## 8. Document Summary

<b>Coverage</b>	WACHS-wide
<b>Audience</b>	All staff
<b>Records Management</b>	Non Clinical: <a href="#">Records Management Policy</a>
<b>Related Legislation</b>	<ul style="list-style-type: none"> <li>• <a href="#">Freedom of Information Act 1992</a> (WA)</li> <li>• <a href="#">Health Services Act 2016</a> (WA)</li> <li>• <a href="#">Mental Health Act 2014</a> (WA)</li> <li>• <a href="#">State Records Act 2000</a> (WA)</li> <li>• <a href="#">Surveillance Devices Act 1998</a> (WA)</li> </ul>
<b>Related Mandatory Policies / Frameworks</b>	<ul style="list-style-type: none"> <li>• MP 0015/16 <a href="#">Information Access, Use and Disclosure Policy</a></li> <li>• MP 0066/17 <a href="#">Acceptable Use of Information and Communications Technology Policy</a></li> <li>• MP 0067/17 <a href="#">Information Security Policy</a></li> <li>• MP 0124/19 <a href="#">Code of Conduct Policy</a></li> <li>• MP 0127/20 <a href="#">Discipline Policy</a></li> <li>• <a href="#">Information and Communications Technology Framework</a></li> <li>• <a href="#">Information Management Framework</a></li> </ul>
<b>Related WACHS Policy Documents</b>	<ul style="list-style-type: none"> <li>• <a href="#">Body Worn Camera Procedure</a></li> <li>• <a href="#">Duress Alarm Procedure</a></li> <li>• <a href="#">Electronic Security Systems Policy</a></li> <li>• <a href="#">Key Control Guideline</a></li> <li>• <a href="#">Staff Identification Procedure</a></li> </ul>
<b>Other Related Documents</b>	<ul style="list-style-type: none"> <li>• <a href="#">General Disposal Authority for State Government Information, Authority Number DA 2023-004</a></li> <li>• <a href="#">Premier's Circular 2021/06 - Registration of CCTV Systems</a></li> </ul>
<b>Related Forms</b>	<ul style="list-style-type: none"> <li>• WACHS <a href="#">Security Footage and Data Access Request Form</a></li> <li>• WACHS <a href="#">Security Data Request Access Form (for Media)</a></li> </ul>
<b>Related Training Packages</b>	<ul style="list-style-type: none"> <li>• WACHS approved CCTV and BWC use training</li> </ul>
<b>Aboriginal Health Impact Statement Declaration (ISD)</b>	ISD Record ID: 2619
<b><a href="#">National Safety and Quality Health Service (NSQHS) Standards</a></b>	1.29, 1.30, 1.31
<b><a href="#">Aged Care Quality Standards</a></b>	Nil
<b><a href="#">Chief Psychiatrist's Standards for Clinical Care</a></b>	<ul style="list-style-type: none"> <li>• Risk Assessment and Management</li> <li>• Seclusion and Bodily Restraint Reduction</li> </ul>

<b>Other Standards</b>	<ul style="list-style-type: none"> <li><a href="#">Chief Psychiatrist's Standards for Authorised Hospitals</a></li> </ul>
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## 9. Document Control

Version	Published date	Current from	Summary of changes
1.00	30 August 2024	30 August 2024	New policy including the rescindment of the Closed Circuit Television (CCTV) Monitoring for Clinical Services in WACHS Mental Health Policy.
1.01	07 May 2025	30 August 2024	Minor amendments pertaining to release of information.
1.02	26 June 2025	30 August 2024	Minor amendment to include additional information on medication discrepancy review.
1.03	15 July 2025	30 August 2024	Minor amendment to rectify typographical error.
1.04	20 February 2026	30 August 2024	Minor amendment to correct section of the General Disposal Authority for State Government Information

## 10. Approval

<b>Policy Owner</b>	Executive Director People, Capability and Culture
<b>Co-approver</b>	Executive Director Mental Health
<b>Contact</b>	Manager Security
<b>Business Unit</b>	Work Health Safety and Wellbeing
<b>EDRMS #</b>	ED-CO-24-110014
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