



Youth Parliament of Western Australia

Health Services in Justice (Safe Havens WA) Act 2025

Explanatory Memorandum

This Act proposes a multifaceted approach to protecting individuals from harm, and ensuring their rights at large public events, through the roll-out of Safe Havens WA. Safe Havens would operate in these spaces, providing those in need with a space to access essential services.

This Act would implement three distinct services, included in Safe Havens and as individual entities, issuing drugchecking services, sexual assault response services, and mental health services, respectively. Drugchecking has seen recent success around the nation, providing harm reduction through informing users of the makeup of drugs. This Act would enable the testing of prohibited substances beneath the state trafficking threshold, which would prevent individuals from being harmed by the impacts of dangerous adulterants laced in drugs. Additionally, this service would administer testing on potentially spiked drinks prior to ingestion, which would avert the effects of common drink spiking substances.

This Act would address significant barriers faced by survivors of sexual assault through remediation of current systemic failures such as reliance on police reporting for evidence collection, and lacking training standards for officers. Through the implementation of the sexual assault response service, barriers to timely and trauma-informed medical and forensic care, especially in regional and event-based contexts would be addressed. This Act would establish survivor-led pathways for forensic examination, ensure access to secure evidence storage without mandatory police involvement, and codify rights that respect bodily autonomy and informed consent.

This Act would act on the current, critical need for proactive, compassionate mental health interventions at public events and during emergencies, by requiring all police and security personnel to undergo annual mental health training, and by establishing MCITS. These measures are designed to de-escalate crisis incidents, improve community trust, and ensure that individuals experiencing mental distress receive timely, culturally sensitive, and clinically appropriate support.

This Act includes delegation frameworks allow the CEO to assign responsibilities to public officers and professionals, ensuring service delivery is flexible, responsive, and community focused.

Western Australia

Health Services in Justice (Safe Havens WA) Act 2025

Contents

Explanatory Memorandum	i
Part 1 — Preliminary	
1. Short Title	2
2. Commencement	2
3. Terms used	2
Part 2 — Safe Havens WA	
4. Establishment of a Safe Haven	10
5. Provision of a Safe Haven	10
6. Requirements of services and vendors	11
7. Information required on a certificate	11
8. Responsibilities of venue staff	12
9. Responsibilities of vendors	12
Part 3 — Drugchecking services	
Division 1 — <i>Misuse of Drugs Act 1981</i> amended	
10. Act amended	13
11. Section 3 amended	13
12. Section 6 amended	13
13. Section 7 amended	14
Division 2 — Authorisation of Drugchecking Professionals	
14. Authorisation of drugchecking professionals to administer a drugchecking service	16
15. Authorisation of employees and agents	16

16.	Grounds for taking action	16
17.	CEO may impose conditions, suspend or cancel authority	18
18.	Effect of conditions, suspension or cancellation	19
19.	Publishing notice of action taken by CEO	19
	Division 3 — Establishment and Operation of Drugchecking Services	
21.	Trafficable quantities within a drugchecking place	20
22.	Operation of fixed drugchecking sites	20
23.	Operation of mobile drugchecking facilities	21
24.	Data collection within a drugchecking place	22
27.	Return of checked substances	25
28.	Duty of care in high-risk situations	25
29.	Categorisation of a drugchecking client	27
	Division 4 — Expansion of publicly available drink spike testing services	
31.	Supply and distribution of drink spiking tests for the drink spike testing services	28
32.	Process of administering the drink spike testing services	28
	Part 4 — Sexual Assault Response Services	
	Division 1 — Establishment and Operation of Response Services	
33.	Minister to establish services	31
34.	Mandatory clinical training	31
35.	Standards and oversight	31
	Division 2 — Consent and Rights of Survivors	
36.	Consent-based forensic examination	32
37.	Access to stored evidence	32
	Division 3 — Evidence and Legal Rights Reform	
38.	Survivor-first forensic protocols	32
39.	Access to forensic innovations	33
40.	Survivor legal rights and support	33

Contents

	Division 4 — <i>Criminal Investigation Act 2006</i> amended	
41.	Act amended	34
42.	Section 3 amended	34
43.	Section 102A inserted	34
	Part 5 — Mental Health Support	
	Division 1 — Presence at events	
44.	Mental health presence at public events	36
	Division 2 — Workforce, Standards and Training	
45.	Mental health training for police and event security officers	36
	Division 3 — Mobile Crisis Intervention Teams	
46.	Establishment and deployment of Mobile Crisis Intervention Teams	37
47.	Crisis support services provided	38
48.	Appointment of drugchecking and Safe Havens Oversight Advisor	38
	Part 6 — Miscellaneous	
49.	Regulations	40
50.	Review of Act	40
51.	Protection from liability for wrongdoing	40
53.	Referral of powers	41



Youth Parliament of Western Australia

Health Services in Justice (Safe Havens WA) Act 2025

No. 8 of 2025

An Act for

An Act—

- **to ensure the safety of individuals at events and in the wider community;**
- **provide access to essential services;**
- **ensure the adequate training of officers in mental health crisis situations; and**
- **for related purposes.**

[Assented to 10 August 2025]

The Youth Parliament of Western Australia enacts as follows:

Part 1 — Preliminary

1. Short Title

This is the *Health Services in Justice (Safe Havens WA) Act 2025*.

2. Commencement

This Act comes into operation on the day on which this Act receives the Youth Governor's Assent.

3. Terms used

In this Act —

acute trauma response means a psychological and physical reaction to a traumatic event;

adulterant means a substance added to a product but not listed as an ingredient, or a substance that is added to a product by accident during production;

agent means any other such individual, outlined by the regulations, who works under the authority of a drugchecking professional;

CEO means the chief executive officer of the Department;

clinical mental health assessment means a comprehensive evaluation performed by a mental health professional to assess a person's overall well-being, functioning, and potential mental health conditions;

Commissioner has the meaning given in section 34 of the *Police Act 1892*;

conclusive results means findings that are demonstrated with certainty, leaving no room for doubt or further argument;

crisis counselling means a short-term intervention that provides immediate support and guidance to individuals experiencing a crisis, helping them regain control and restore a sense of normalcy;

cultural sensitivity means being aware of cultural norms, values, and beliefs, and using this knowledge to effectively communicate and interact with people from different cultural backgrounds;

data collection means the record keeping and reporting of substances tested, and detected in the process of testing, through a drugchecking service, for the purpose outlined in section 24;

de-escalation means the use of techniques to reduce the intensity of a situation;

Department means the department of the Public Service principally assisting in the administration of this Act;

drink means a liquid intended for human consumption;

drink spike testing service means the service outlined in Part 3, Division 4 of this Act;

drink spiking test means a multi-drug test capable of detecting common drugs used for drug-facilitated sexual assault in drinks;

drugchecking client means any individual who meets the criteria as outlined in section 27;

drugchecking place means a fixed or temporary site erected for the purpose of providing a drugchecking service;

drugchecking professional means a person who is authorised under this Act to carry out the provision of a drugchecking service;

drugchecking service means—

s. 3

- (a) the service of analysing a substance for the purpose of obtaining information about the composition of the substance, including information about the presence of poisons, prohibited drugs and drugs of addiction in it; and
- (b) the service of providing harm reduction information;

drug of addiction has the meaning given in section 3(1) of the *Misuse of Drugs Act 1981*;

employee means an individual who is under a contract of employment with a drugchecking professional;

escalation means an individual's actions or mental state is becoming increasingly heightened;

event organisers means a person or group responsible for planning, coordinating, and managing events;

evidence storage facilities means a secure space used to preserve and store items that are considered evidence in criminal investigations or legal proceedings;

fixed drugchecking site means a place deemed suitable by the Minister to administer a drugchecking service for a length of thirty days or more;

forensic innovations means the technologies as outlined in section 37 of this Act;

forensic medical examination means a medical and evidentiary assessment conducted by qualified professionals after a sexual assault;

harm reduction information means—

- (a) information about the composition of a substance, including information about the presence of poisons, controlled substances and drugs of dependence in it; or

- (b) information about the use of a substance, including—
 - (i) information about the possible consequences of using a substance; and
 - (ii) information and advice about how to reduce the harm that use of the substance may cause; or
 - (iii) information and advice about access to health services, welfare services and similar services;

inconclusive results means findings that do not clearly point to a definitive positive or negative outcome;

independent legal advisor means a qualified lawyer who provides legal advice to a client without being influenced by, or having a conflict of interest with, any other party involved in the matter;

JIC forensic examination means a "just-in-case" examination conducted for the purposes of storing forensic evidence without immediate police reporting;

major public event means any such event which equals or exceeds patron guidelines as outlined in the regulations;

medical equipment means the instruments, devices, or tools used to provide services under this Act;

mental health booths means the service outlined under section 40;

mental health crisis means a situation where someone experiences intense emotional or mental distress, making it difficult to cope and potentially leading to harm to themselves or others;

mental health professional means a healthcare or social services provider who specialises in improving or treating an individual's mental health.

s. 3

mental health response means any individual which attends to a mental health crisis situation;

mental health support resources means psychical and online information regarding support services offered at the event, and in the wider community;

Minister means the member of Parliament which oversees the portfolio this Act falls primarily under, or is tasked with enacting this Act;

Mobile Crisis Intervention Teams (MCITs) means the service as outlined in Part 5, Division 3 of this Act;

mobile digital forensic vans means a vehicle suitably fitted out or containing equipment and apparatus for the provision of forensic analysis, whether that service is to be provided and carried out from the vehicle itself or from a structure temporarily used for that purpose;

mobile drugchecking facility means a trailer or vehicle suitably fitted out or containing equipment and apparatus for the provision of a drugchecking service, whether that service is to be provided and carried out from the facility itself or from a structure temporarily used for that purpose;

negative result means the specific thing being tested for was not found;

non-judgmental language means a way of communicating that avoids making negative interpretations or passing judgment on someone's words or actions;

poison has the meaning given in section 3 of the *Medicines and Poisons Act 2014*;

police officer has the meaning given in section 34 of the *Police Act 1892*;

positive results means findings which indicate the presence of a specific substance;

post-incident follow-up means making contact following an incident to check-in and evaluate current status;

post-ingestion testing service means services which test patients' urine to detect substances present;

privacy means the freedom from interference or intrusion;

prohibited drug has the meaning given in section 4 of the *Misuse of Drugs Act 1981*;

psychological first aid means responses which address basic needs and reduce psychological distress by providing a caring comforting presence, and education on common stress reactions;

psychosis means a condition where a person experiences a significant disconnect from reality;

public service officer has the meaning in section 3(1) of the *Public Sector Management Act*;

quiet zone means a sound-secure space for the purpose of providing the service of section 40;

Red Alert WA means a public health warning system that notifies the community of high risk or adulterated drugs detected through drugchecking services;

referral services means connecting individuals with other organisations or individuals who can assist them with specific needs or problems;

relevant hours means the time in which a drugchecking service may be provided, as outlined in sections 22 and 23, as the case requires;

s. 3

risk profile means a comprehensive assessment that evaluates the potential risks associated with a particular substance and considers factors like the likelihood and severity of adverse events;

risk screening means a process of identifying individuals who may be at risk of harm or adverse outcomes, and then mitigating those risks;

regional means areas classed as outer regional, inner regional, remote or very remote in Western Australia by the Australian Statistical Geography Standard Edition 3;

reviewable decision means a decision of the CEO—

- (a) under section 17(1) to impose a condition on, suspend or cancel a professional authority; or
- (b) under section 17(6) to amend a condition on a professional authority; or
- (c) to refuse a request under section 17(7) for the CEO to—
 - (i) amend or revoke a condition imposed on a professional authority; or
 - (ii) revoke the suspension or cancellation of a professional authority,if the request was made more than two years after the condition, suspension or cancellation was imposed;

Safe Haven means a temporary structure erected for enacting Part 2 of this Act, and any services thereunder;

security contractors means a person or company hired to provide security services;

self-swab forensic kit means a forensic evidence collection kit designed to allow a survivor to collect biological evidence independently;

sexual assault response service means a coordinated medical, psychological, forensic and support response to a report or disclosure of sexual assault;

someone in need means any individual who utilises any well-known phrase or adage to request immediate help in a situation where overtly asking may endanger them;

substance means a pure form of matter which can change a person's mental or physical state;

suicidal behaviour means a spectrum of behaviours from suicide attempt and preparatory behaviours to completed suicide;

support person means an individual selected for the purpose of section 38;

support personnel means individuals who provide assistance and support to a Safe Haven or its staff, often in areas of administrative, technical, or operational tasks;

survivor means a person who has experienced sexual assault;

survivor first protocol means a trauma-informed approach that prioritises the consent, comfort and rights of a person undergoing a forensic examination after a sexual assault;

therapeutic games means engaging activities used to promote well-being and emotional regulation;

trauma-informed means an informed understanding of how trauma, abuse and neglect can affect individuals;

vendors means any external company, and its employees, operating within an event;

venue staff means individuals who work at an event or venue to ensure its smooth and successful operation, whether as part of the venue or event itself, or under contract for a particular event.

Part 2 — Safe Havens WA

4. Establishment of a Safe Haven

- (1) The CEO may declare a major public event as requiring one or more designated Safe Havens.
- (2) Declarations under subsection (1) are to be made when an event reaches or exceeds requirements as outlined in the regulations.
- (3) Event organisers must cooperate with the Department to enable access, infrastructure, and support staffing of the Safe Haven.
- (4) Event organisers may apply to the Department to request the presence of one or more designated Safe Havens at their event.
- (5) On application under subsection (4), the CEO must, in accordance with this section, either—
 - (a) issue an approval; or
 - (b) refuse the application.
- (6) Approval criteria and application specifications are determined in the regulations.
- (7) The CEO may refer their powers under this section through the mechanism described in section 48.

5. Provision of a Safe Haven

- (1) A Safe Haven is comprised of a combination of all of the following—
 - (a) drugchecking services, as outlined in this Act;
 - (b) sexual assault response services, as outlined in this Act;
 - (c) mental health support, as outlined in this Act; and
 - (d) any other necessary services, as outlined in the regulations, if any.
- (2) Additionally, Safe Havens must include—
 - (a) appropriate medical equipment;

- (b) secure evidence storage facilities;
 - (c) trained medical and support personnel;
 - (d) privacy provisions; and
 - (e) any other such necessities, if any.
- (3) Safe Havens, and any services thereunder, are to be publicly funded for the purposes of enacting this Act.
- (4) Quantity of facilities and services provided by Safe Haven services are to follow the patron guidelines, as outlined in the regulations.
- (5) Where registered medical or psychological staff are unavailable, alternative delivery methods including telehealth, supervision by accredited interns, or rotating rosters may be used.

6. Requirements of services and vendors

Each individual vendor and service at an event with a Safe Haven must hold a valid certificate on how to respond to someone in need.

7. Information required on a certificate

Valid certificates as referenced in section 6 must include the following training requirements, including the ability to—

- (a) protect someone in need to the best of their abilities;
- (b) use discretion;
- (c) comfort someone in need and use non-judgmental language;
- (d) assist someone in need and inform them of their safety options, including—
 - (i) Safe Havens, if not presently inside of a Safe Haven; and
 - (ii) alternative emergency stalls at the event;

s. 8

- (e) protecting the anonymity of someone in need to anyone outside the chain of custody; and
- (f) any other such relevant information outlined in the regulations, if any;

8. Responsibilities of venue staff

Staff are required to help someone in need by—

- (a) asking what someone in need may want or need; and
- (b) directing the person to the nearest Safe Haven or emergency stall at that venue.

9. Responsibilities of vendors

- (1) Vendors must aid someone in need and are required to escort that person to the nearest Safe Haven; unless—
 - (a) the vendor stall only contains one worker also serving customers; or
 - (b) the vendor cannot securely lock their stall;

If so—

- (c) the vendor must have a pamphlet that can be distributed to the person in need, containing a map of their venue with—
 - (i) their stall clearly marked; and
 - (ii) clear directions to the nearest Safe Haven.
- (2) Event organisers must create and distribute pamphlets to vendors.

Part 3 — Drugchecking services

Division 1 — *Misuse of Drugs Act 1981* amended

10. Act amended

This division amends the *Misuse of Drugs Act 1981*.

11. Section 3 amended

In section 3(1) insert in alphabetical order:

“drugchecking client has the meaning given to it as in the *Health Services in Justice (Safe Havens WA) Act 2025*, section 3;

drugchecking place has the meaning given to it as in the *Health Services in Justice (Safe Havens WA) Act 2025*, section 3;

drugchecking professional has the meaning given to it as in the *Health Services in Justice (Safe Havens WA) Act 2025*, section 3;”

12. Section 6 amended

After section 6(5) insert:

- (6) A person does not commit a crime under subsection (1) by reason only of the person having in his or her possession a prohibited drug if the person proves that he or she was authorised under this Act or the *Health Services in Justice (Safe Havens WA) Act 2025* to—
- (a) have possession of the drug for the purpose of providing a drugchecking service; or
 - (b) have possession of the drug for the purpose of utilising a drugchecking service; or
 - (c) supply the drug to—

- (i) a drugchecking professional for the purpose of utilising a drugchecking service; or
 - (ii) a drugchecking client, who originally possessed the drug for the purpose of utilising the drugchecking service.
- (d) receive the drug from—
 - (i) a drugchecking client for the purpose of providing a drugchecking service; or
 - (ii) a drugchecking professional following the administered drugchecking service.
- (7) Subsection (6) does not authorise a person to possess or supply a prohibited drug in a quantity that is, or is greater than the trafficable quantity (outlined in Schedule VII) applicable to that drug.
- (8) Nothing within subsection (6) exempts any person, or otherwise affects, any condition or obligation imposed—
 - (a) by or under any order of, or undertaking given to, a court or tribunal; or
 - (b) by or under any Act or law other than this Act.
- (9) Nothing in subsection (6) affects any discretion a police officer may exercise in relation to not charging a person with an offence when the person is in the vicinity of a drugchecking place for the purposes of attending it as a drugchecking client.

13. Section 7 amended

After section 7(3) insert:

- (4) A person does not commit a crime under subsection (1) or a simple offence under subsection (2) by reason only of the person having in his or her possession a prohibited plant, or a prohibited drug obtainable from the plant, if the person proves that he or she was authorised under this Act or the *Health Services in Justice (Safe Havens WA) Act 2025* to—

- (a) have possession of the plant or drug for the purpose of providing a drugchecking service; or
 - (b) have possession of the plant or drug for the purpose of utilising a drugchecking service; or
 - (c) supply the plant or drug to—
 - (i) a drugchecking professional for the purpose of utilising a drugchecking service; or
 - (ii) a drugchecking client, who originally possessed the plant or drug for the purpose of utilising the drugchecking service.
 - (d) receive the plant or drug from—
 - (i) a drugchecking client for the purpose of providing a drugchecking service; or
 - (ii) a drugchecking professional following the administered drugchecking service.
- (5) Subsection (4) does not authorise a person to possess or supply a prohibited plant in a quantity that is, or is greater than, the trafficable quantity (outlined in Schedule VIII) applicable to that drug.
- (6) Nothing within subsection (4) exempts any person, or otherwise affects, any condition or obligation imposed—
- (a) by or under any order of, or undertaking given to, a court or tribunal; or
 - (b) by or under any Act or law other than this Act.
- (7) Nothing in subsection (4) affects any discretion a police officer may exercise in relation to not charging a person with an offence when the person is in the vicinity of a drugchecking place for the purposes of attending it as a drugchecking client.

Division 2 — Authorisation of Drugchecking Professionals

14. Authorisation of drugchecking professionals to administer a drugchecking service

- (1) A drugchecking professional acting in the lawful practice of his or her profession is authorised to administer a drugchecking service if—
 - (a) the drugchecking professional is a member of a class of drugchecking professional prescribed by the regulations; and
 - (b) the administration of the drugchecking service is in accordance with the regulations.
- (2) Regulations referred to in subsection (1) may make provision in relation to the circumstances and manner in which, and the conditions on which, a member of a prescribed class of drugchecking professional may administer a drugchecking service.

15. Authorisation of employees and agents

- (1) An employee or agent of a drugchecking professional acting within the scope of the employee's or agent's actual or apparent authority may do anything that is authorised by the professional authority of the drugchecking professional.
- (2) For the purposes of this Act, if an agent or employee of a drugchecking professional does something that is authorised under subsection (1) the drugchecking professional is to be taken to have also done the thing.

16. Grounds for taking action

- (1) There are grounds for taking action against an authorised drugchecking professional if the drugchecking professional or an employee or agent of the drugchecking professional—

- (a) has, in connection with the person's administration of a drugchecking service contravened any of the following—
 - (i) this Act;
 - (ii) the Misuse of Drugs Act 1981;
 - (iii) a therapeutic goods law; or
 - (b) has, in connection with the person's administration of a drugchecking service—
 - (i) acted carelessly, incompetently or improperly; or
 - (ii) done or omitted to do something, or engaged in conduct that poses a threat to the health, safety or welfare of a person or of the public, other than returning the supplied drug to a drugchecking client; or
 - (c) has done or omitted to do something, or engaged in conduct, that renders the person unfit to administer a drugchecking service.
- (2) However, if grounds for taking action against an authorised drugchecking professional arise because of the conduct of an employee or agent, the CEO cannot take action against the drugchecking professional under this Division unless the CEO is satisfied that—
- (a) the employee or agent engaged in the conduct with the knowledge, authority or consent of the drugchecking professional; or
 - (b) the drugchecking professional failed to take all reasonable measures to prevent the employee or agent engaging in the conduct.
- (3) There are also grounds for taking action against an authorised drugchecking professional if the drugchecking professional requests that the action be taken.

17. CEO may impose conditions, suspend or cancel authority

- (1) If the CEO considers that there are grounds for taking action against an authorised drugchecking professional, the CEO may, by written notice to the drugchecking professional—
 - (a) impose on the person’s professional authority any conditions the CEO thinks fit; or
 - (b) suspend the person’s professional authority for a specified period; or
 - (c) cancel the person’s professional authority.
- (2) A notice given for the purposes of subsection (1)—
 - (a) must set out the grounds on which the action is taken; and
 - (b) takes effect on the day specified in it.
- (3) Before taking action under subsection (1) the CEO must—
 - (a) give to the authorised drugchecking professional written notice of the action that the CEO proposes to take and the grounds on which it is proposed to take that action; and
 - (b) give the drugchecking professional a reasonable opportunity to be heard on the matter.
- (4) However, the CEO may take action under subsection (1) without complying with subsection (3) if the CEO considers that the taking of immediate action is essential to protect the health, safety and welfare of a person or of the public.
- (5) If the CEO takes immediate action, the CEO must—
 - (a) as soon as practicable after taking the action give the drugchecking professional a reasonable opportunity to be heard on the matter; and
 - (b) if the drugchecking professional makes any representations to the CEO on the matter, review the

decision to take that action after considering those representations.

- (6) The CEO may, by giving written notice to an authorised drugchecking professional—
 - (a) amend or revoke a condition imposed under subsection (1) on the person’s professional authority; or
 - (b) revoke the suspension or cancellation under subsection (1) of the person’s professional authority.
- (7) The CEO may exercise a power under subsection (6) on his or her own initiative or on the request of the authorised drugchecking professional.

18. Effect of conditions, suspension or cancellation

- (1) If a condition is imposed on a person’s professional authority, the authority conferred on that drugchecking professional by section 14 is subject to that condition.
- (2) If a person’s professional authority is suspended, section 14 ceases to apply in relation to the person during the period of suspension.
- (3) If a person’s professional authority is cancelled, section 14 ceases to apply in relation to the drugchecking professional.

19. Publishing notice of action taken by CEO

- (1) If the CEO takes action against an authorised drugchecking professional under this Division, the CEO may cause notice of the action to be published on a website maintained by the CEO.
- (2) The CEO may refer their powers under this section through the mechanism described in section 48.

20. Review of decisions by State Administrative Tribunal

A drugchecking professional whose professional authority is affected by a reviewable decision may apply to the State Administrative Tribunal for a review of the decision.

Division 3 — Establishment and Operation of Drugchecking Services

21. Trafficable quantities within a drugchecking place

- (1) If a drugchecking professional assesses a quantity of a drug or plant possessed by a drugchecking client to equal or exceed a trafficable quantity, relevant to the drug or plant and as outlined in the *Misuse of Drugs Act 1981*, the drugchecking professional, must—
 - (a) not return the drug or plant back to the drugchecking client, given that the quantity was received by the drugchecking professional; or
 - (b) if the quantity is currently possessed by the drugchecking client, not attempt to take the drug or plant from the client;
 - (c) alert police to the situation;
 - (d) not impede police officers in the prosecution of that client; and
 - (e) follow all other relevant protocols.
- (2) Subsection (1) does not derogate from the rights of other drugchecking clients, as expressed in sections 6 and 7 of the *Misuse of Drugs Act 1981*.

22. Operation of fixed drugchecking sites

- (1) Fixed drugchecking sites may only be accessible to the public and operate within the hours as specified within the regulations.

- (2) Fixed drugchecking sites may only be erected in a place deemed suitable by the CEO to administer a drugchecking service for a length of thirty days or more.
- (3) However, the CEO may only deem a site suitable under subsection (2) if it first meets the criteria outlined in the regulations.
- (4) The CEO may refer their powers under this section through the mechanism described in section 48.

23. Operation of mobile drugchecking facilities

- (1) Mobile drugchecking facilities may only be accessed by individuals and operate within the event's operating hours, unless otherwise stated within the regulations.
- (2) Mobile drugchecking facilities may operate from –
 - (a) the facility itself; or
 - (b) a temporary structure for the purpose of providing the drugchecking service; or
 - (c) a temporary structure erected for the purpose of providing the service within a Safe Haven.
- (3) An authorised drugchecking professional may apply to the CEO for approval to temporarily use an area within a permanent structure for the purpose of—
 - (a) the provision of a drugchecking service under section 26; or
 - (b) any other such necessary activity, if any.
- (4) On application under subsection (3), the CEO must, in accordance with this section, either—
 - (a) issue an approval; or
 - (b) refuse the application.
- (5) Approval criteria and application specifications are determined in the regulations.

- (6) At least one mobile drugchecking facility must be present under any circumstance as outlined under section 4.
- (7) The CEO may refer their powers under this section through the mechanism described in section 48.

24. Data collection within a drugchecking place

- (1) Drugchecking professionals must collect relevant data and statistics in the process of providing a drugchecking service to fulfil the needs of—
 - (a) assessing the effectiveness of the drugchecking service through criteria outlined in the regulations;
 - (b) informing public policy; and
 - (c) quickly disseminating public health alerts as outlined in section 25.
- (2) This data must not include any personal information relating to drugchecking clients.
- (3) All data collected will be submitted to a centralised database to be overseen by the Department.
- (4) The CEO will oversee the yearly assessment of the effectiveness of the drugchecking service.

25. Real time drug alert system (Red Alert WA)

- (1) The Department must maintain a public health alert system to notify the public when there are frequently identified adverse substances, dangerous adulterants detected and dangerous circulating substances.
- (2) Alerts must be disseminated through—
 - (a) state health websites; and
 - (b) social media platforms of the department; and
 - (c) any other relevant information sources, if any;
- (3) Alerts must include—

- (a) the name of the substance or adulterant; and
 - (b) a risk profile of the substance or adulterant; and
 - (c) locations where the substance or adulterant has been detected; and;
 - (d) any other relevant information as outlined in the regulations, if any.
- (4) Red Alert WA must be advertised—
- (a) through pamphlets at any event deemed a major public event; and
 - (b) with the purchase of tickets for a major public event on ticketing services.

26. Facilitation of a drugchecking service

- (1) An authorised drugchecking professional is permitted to take the following actions at the drugchecking place within relevant hours in the course of administering a drugchecking service—
- (a) receive a substance that a person supplies so that—
 - (i) a drugchecking service may be provided; or
 - (ii) the substance may be disposed of; and
 - (b) if the substance was supplied so that a drugchecking service may be provided, supply back to the person any amount of the substance that is not required for that purpose; and
 - (c) provide a drugchecking service in respect to that substance; and
 - (d) destroy the substance; and
 - (e) to the extent necessary to do a thing described in this subsection—
 - (i) possess a substance; and
 - (ii) provide harm reduction information.

- (2) An authorised drugchecking professional is permitted to do the following things at the drugchecking place, or otherwise —
 - (a) supply a substance as described in subsection (1)(a) to another authorised drugchecking professional; and
 - (b) receive a substance from another authorised drugchecking professional who supplies it as described in paragraph (a) and—
 - (i) provide a drugchecking service in respect of the substance; and
 - (ii) destroy the substance; and
 - (c) to the extent necessary to do a thing described in this subsection—
 - (i) possess a substance; and
 - (ii) transport or deliver a substance; and
 - (ii) provide harm reduction information.
- (3) An authorised drugchecking professional is permitted to provide harm reduction information, whether at the drugchecking place or elsewhere.
- (4) Nothing in subsection (3) authorises an employee or agent of a drugchecking professional to—
 - (a) receive, possess, or supply a substance; or
 - (b) provide a drugchecking service other than the service of providing harm reduction information.
- (5) A drugchecking professional, but not an employee or agent, is authorised to do the following things at the drugchecking place or elsewhere—
 - (a) oversee the provision of drugchecking services; and
 - (b) perform the other prescribed duties, if any.
- (6) Nothing in subsection (5) authorises a drugchecking professional to—
 - (a) receive, possess or supply a substance; or

- (b) to provide a drugchecking service.

27. Return of checked substances

- (1) Upon completion of a drugchecking services, where the substance is lawfully returned to the drug checking client, the service provider must ensure that—
 - (a) the substance is returned in a sealed and secure container appropriate for safe handling; and
 - (b) the container is enclosed within a plain, inconspicuous bag or packaging, designed to preserve the dignity and privacy of the drugchecking client when leaving the service site.
- (2) The bag or packaging referred to in subsection (1)(b) must also include an information leaflet that—
 - (a) promotes harm minimisation strategies and drug safety awareness; and
 - (b) provides details of locally accessible support services, including butnot limited to—
 - (i) alcohol and other drug counselling;
 - (ii) mental health support services; and
 - (iii) rehabilitation and detoxification programs.
- (3) The Chief Executive Officer may approve the form and content of the leaflet required under subsection (2).

28. Duty of care in high-risk situations

- (1) If, during or following the provision of a drugchecking service, a drugchecking professional reasonably believes that the drugchecking client—
 - (a) is experiencing or at risk of experiencing an acute medical or psychological crisis; or

- (b) is severely intoxicated or otherwise impaired such that returning the substance may pose a significant and immediate risk to their health or safety; or
 - (c) is exhibiting behaviour that suggests a high risk of harm to themselves or others,
 - (d) then the drugchecking professional must take all reasonable steps to ensure the immediate safety of the client and those around them.
- (2) Without limiting subsection (1), reasonable steps may include but are not limited to—
 - (a) temporarily withholding the return of the substance, pending assessment of the client’s condition;
 - (b) initiating internal emergency or safety protocols;
 - (c) making a referral to onsite medical, mental health, or crisis support services; or
 - (d) where necessary, facilitating access to emergency medical care or transport.
- (3) Where a substance is withheld under subsection (2)(a), the provider must—
 - (a) inform the client of the reason for withholding; and
 - (b) outline the conditions under which the substance may be returned, including but not limited to a reassessment by an appropriate staff member or service.
- (4) All actions taken under this section must—
 - (a) info be proportionate to the risk identified; and
 - (b) prioritise the dignity, autonomy, and rights of the client, in accordance with trauma-informed and harm reduction principles.
- (5) The Minister may make regulations or approve guidelines for the implementation of this section, including defining referral

pathways, staff training requirements, and client communication protocols.

29. Categorisation of a drugchecking client

- (1) For the purpose of this Act, a person attends a drugchecking place as a drugchecking client if they attend for any of the following purposes—
 - (a) supplying a substance to an authorised drugchecking professional, either so that a drugchecking service may be provided or so that the substance may be disposed of; or
 - (b) being provided with a drugchecking service
- (2) For the purpose of this Act, a person is no longer protected under this Act as a drugchecking client if the conditions outlined in section 21(1) are met.

Division 4 — Expansion of publicly available drink spike testing services

30. Provision of mobile drink spike testing services

- (1) The mobile drugchecking services established in section 23 will also offer drink spike testing services.
- (2) The testing of the drink may be performed by authorised drugchecking professionals.
- (3) The provision of the drink spike testing service is not intended to be used to identify whether a person has previously ingested a substance in a drink, if a person believes they have ingested a contaminated drink, the drugchecking professional must –
 - (a) transfer them to a medical officer for a medical examination and supervision; and
 - (b) provide information concerning –

- (i) the availability of post-ingestion testing services at certain police stations; and
- (ii) the three closest police stations that offer this service for a metropolitan area; or
- (iii) the closest police station that offers this service for a regional area.

31. Supply and distribution of drink spiking tests for the drink spike testing services

- (1) The Minister may authorise the purchase of privately manufactured drink spiking tests for the purpose of the drink spike testing services, provided the tests fulfill the criteria in subsection (2).
- (2) The drink spiking tests must be able to –
 - (a) test drinks; and
 - (b) identify the presence of least one (1) substance frequently used to contaminate drinks; and
 - (c) provide results within a practical period of time.

32. Process of administering the drink spike testing services

- (1) The process for administering a drink spike testing service is commenced if—
 - (a) a person at the event which is providing the service approaches the mobile drugchecking place; and
 - (b) the person wants to have a drink tested; and
 - (c) the person currently possesses a drink for testing
- (2) Before the drink spiking test can be administered, the drugchecking professional must—
 - (a) inform the person of—
 - (i) the substances that the test can identify; and
 - (ii) the accuracy percentage of the test; and

- (iii) the process of the test, as outlined in subsection (3); and
 - (iv) the potential outcomes of the test, as outlined in subsection (4); then
 - (b) gain the person's affirmative consent to the administration of the drink spiking test on their provided drink.
- (3) An authorised drugchecking professional is, for the purpose of providing a drink spike testing service, permitted to do the following things—
 - (a) receive a drink for the purpose of providing a drink spiking test on the drink; then
 - (b) take a sample of the drink to use in the drink spiking test; then
 - (c) administer the drink spiking test on the sample; then
 - (d) record the results of the test, as outlined in section 24; and
 - (e) report the results of the test to the person whose drink was sampled.
- (4) The authorised drugchecking professional is permitted to do the following things, based on the outcome of the test—
 - (a) if the test returns a negative result, then—
 - (i) the drink is returned to the person who provided it for testing; and
 - (ii) the sample and used test are discarded; or
 - (b) if the test returns an inconclusive result, then—
 - (i) the drink spiking test is readministered on a different sample of the drink for the purpose of obtaining a conclusive result; and
 - (ii) the sample and used test are kept until a conclusive result is obtained; or

- (c) if the test returns a positive result, then –
 - (i) the drink spiking test is readministered on a different sample of the drink to confirm the positive result; and
 - (ii) the most senior drugchecking professional at the mobile drugchecking service is notified; and
 - (iii) the event staff are notified; and
 - (iv) the used test and sample are kept and given to the Department to be stored for a minimum of one year, through the mechanism outlined in section 36(4) to (8); and
 - (v) the drink that has been positively identified as contaminated is disposed.

Part 4 — Sexual Assault Response Services

Division 1 — Establishment and Operation of Response Services

33. Minister to establish services

- (1) The Minister must establish and maintain publicly funded sexual assault response services across the State.
- (2) The Department must apportion sexual assault response services based on population criteria, as outlined in the regulations.
- (3) The services must include—
 - (a) 24-hour access to forensic medical care;
 - (b) trauma-informed psychological and support services for survivors; and
 - (c) options for JIC forensic examination and secure evidence storage without immediate police involvement.

34. Mandatory clinical training

- (1) The Department shall establish a certified training framework for professionals providing sexual assault care.
- (2) The training must include—
 - (a) forensic medical procedures;
 - (b) trauma-informed response;
 - (c) culturally sensitive practices;
 - (d) survivor rights and consent; and
 - (e) any other such training deemed necessary by the Minister, CEO or Department (if any).

35. Standards and oversight

- (1) The CEO shall monitor and enforce minimum service standards across all sexual assault response facilities.

- (2) The regulations will prescribe the following requirements—
 - (a) minimum service standards;
 - (b) record-keeping;
 - (c) evidence handling;
 - (d) interagency referral;
 - (e) clinical practices; and
 - (f) any other such requirements deemed necessary.
- (3) The CEO may refer their powers under this section through the mechanism described in section 48.

Division 2 — Consent and Rights of Survivors

36. Consent-based forensic examination

- (1) A forensic examination must not be conducted without the informed consent of the survivor.
- (2) The survivor may consent to evidence collection while declining police involvement at the time.
- (3) Forensic evidence must be securely stored for no less than 12 months.

37. Access to stored evidence

- (1) Survivors may access stored forensic samples upon request to initiate a police complaint.
- (2) Such evidence shall remain admissible in legal proceedings, subject to applicable evidentiary rules.

Division 3 — Evidence and Legal Rights Reform

38. Survivor-first forensic protocols

- (1) A forensic medical examination may be conducted without a formal police complaint.

- (2) Informed consent must be clearly documented prior to examination.
- (3) Survivors must be informed of their right to delay or decline evidence submission.
- (4) Collected evidence must be securely stored for no less than 12 months.
- (5) Stored forensic samples must be admissible in court, subject to maintenance of proper chain of custody.
- (6) The Department must maintain a secure registry of all forensic samples collected without police involvement.
- (7) Survivors may access their stored evidence at any time within the 12-month holding period.
- (8) Evidence must be destroyed upon written request by the survivor or at the end of the holding period unless transferred to law enforcement with survivor consent.

39. Access to forensic innovations

- (1) The Minister may authorise the use of the following technologies—
 - (a) self-swab forensic kits for early evidence collection;
 - (b) mobile digital forensic vans for onsite analysis and rapid device return.
- (2) All forensic innovations must be delivered by trained, accredited forensic nurses.
- (3) Services must ensure safety, privacy and accessibility.

40. Survivor legal rights and support

- (1) Survivors must be offered access to an independent legal advisor within 48 hours of initial contact with response services.
- (2) Survivors have the right to;

- (a) request a person of the same gender to perform the examination;
 - (b) decline any part of the medical or legal process;
 - (c) bring a chosen support person to all interviews, procedures and legal appointments.
- (3) All forensic and crisis response personnel must complete;
 - (a) trauma informed care training;
 - (b) culturally sensitive care modules; and
 - (c) survivor-centred response training.
- (4) Examinations must never occur without the explicit, informed consent of the survivor at each stage.
- (5) Survivors must be provided with written information outlining all rights and available services

Division 4 — *Criminal Investigation Act 2006* amended

41. Act amended

This division amends the *Criminal Investigation Act 2006*.

42. Section 3 amended

In section 3(1) insert in alphabetical order:

“survivor has the meaning given in the *Health Services in Justice (Safe Havens WA) Act*, section 3;”

43. Section 102A inserted

After section 101, insert—

101A. Forensic collection without immediate police complaint

- (1) A qualified forensic medical examiner may, with informed consent, conduct a forensic examination on a

survivor even if no formal police complaint has been made.

- (2) Any evidence so collected must be securely stored for a minimum of 12 months in accordance with regulations.
- (3) Forensic evidence obtained under this section shall be admissible in legal proceedings, provided it complies with relevant evidentiary and chain-of-custody standards.

Part 5 — Mental Health Support

Division 1 — Presence at events

44. Mental health presence at public events

- (1) Where a declaration under section 4 is made, the Department must ensure the provision of:
 - (a) mental health booths operated by registered mental health professionals;
 - (b) on-site access to crisis counselling and psychological first aid;
 - (c) designated quiet zones for emotional regulation and privacy; and
 - (d) access to mental health support resources.
- (2) Mental health booths established under subsection (1) may include;
 - (a) informal well-being activities such as—
 - (i) therapeutic games;
 - (ii) mindfulness exercises; and
 - (iii) any other such activities, if any.
 - (b) referral services for follow-up mental health support post-event.
- (3) The Department may make regulations prescribing events or venues where these services must be provided.

Division 2 — Workforce, Standards and Training

45. Mental health training for police and event security officers

- (1) The Commissioner must ensure that all police officers and event security personnel receive annual training on:
 - (a) recognising signs and symptoms of a mental health crisis or escalations;

- (b) cultural sensitivity in a mental health crisis;
 - (c) de-escalation strategies; and
 - (d) safe use of force in a mental health crisis escalation.
- (2) The Minister shall establish, in consultation with the Commissioner, a certified training framework to be implemented by:
- (a) the WA Police academy for cadets and active officers; and
 - (b) event-based security contractors operating under licensure.
- (3) Certification under this section shall be valid for a period of 12 months.
- (4) Individuals as outlined in this section may not serve in any mental health response or assistance capacity within a Safe Haven or declared event without a valid certification under this section.

Division 3 — Mobile Crisis Intervention Teams

46. Establishment and deployment of Mobile Crisis Intervention Teams

- (1) The CEO must establish Mobile Crisis Intervention Teams (MCITs) to respond to mental health-related emergencies across the State.
- (2) Each MCIT must include:
- (a) at least one qualified mental health professional;
 - (b) a police officer with valid certification under section 45; and
 - (c) any additional personnel deemed necessary under the regulations, if any.
- (3) MCITs must be dispatched in the following circumstances:

- (a) any emergency call-out flagged by WA Police as involving a mental health crisis;
- (b) any request from event organisers or first responders at designated Safe Haven events; or
- (c) situations involving suspected suicidal behaviour, psychosis, or acute trauma response.

47. Crisis support services provided

MCITs shall provide:

- (a) on-site clinical mental health assessment and risk screening;
- (b) crisis counselling and de-escalation;
- (c) emergency referral and safe transport to treatment facilities where appropriate; or
- (d) post-incident follow-up and continuity of care coordination with community mental health services.

48. Appointment of drugchecking and Safe Havens Oversight Advisor

- (1) The CEO must ensure a Drugchecking and Safe Havens Oversight Advisor (DSOA) is appointed within the Department for the purpose of supporting and advising on regulatory oversight of authorised drugchecking professionals. The DSOA may be—
 - (a) appointed as a new position created specifically for the purposes of this Act; or
 - (b) an existing public officer to whom the title and responsibilities of the DSOA are formally assigned, subject to operational capacity.
- (2) A person appointed as DSOA must—
 - (a) possess appropriate qualifications and experience in drugchecking, toxicology, public health, harm reduction, or professional regulation; and

- (b) not have a current or recent conflict of interest in relation to any authorised drugchecking professional under consideration.
- (3) The appointment of the DSOA must comply with the regulations, including provisions regarding—
 - (a) terms of appointment;
 - (b) remuneration and allowances;
 - (c) delegation of duties; and
 - (d) performance management and reporting obligations.
- (4) Where a DOSA is appointed under subsection (1)(b), the Department must ensure the officer is allocated adequate time, training, and administrative resources to discharge the oversight functions independently and effectively.
- (5) The DOSA is responsible for providing independent oversight, advice, and monitoring in relation—
 - (a) the compliance and conduct of authorised drugchecking professionals;
 - (b) the implementation of conditions imposed under this Act;
 - (c) assessments of professional risk;
 - (d) site authorisation and operational safety reviews; and
 - (e) any other functions carried out by the CEO under this Act.
- (6) Wherever this Act confers a function, power, or responsibility on the CEO in relation to drugchecking services, that function, power, or responsibility must be exercised in consultation with the DSOA unless the Act expressly provides otherwise.

Part 6 — Miscellaneous

49. Regulations

The Department may, for the purposes of this Act, make regulations for the establishment, provision and administration of this Act, as necessary in this Act.

50. Review of Act

- (1) The Minister is to carry out a review of the operation and effectiveness of this Act as soon as is practicable after —
 - (a) the second anniversary of its commencement; and
 - (b) the expiry of each two yearly interval after that anniversary.
- (2) The Minister is to prepare a report based on the review, and as soon as is practicable after the report is prepared, cause it to be laid before each House of Parliament.

51. Protection from liability for wrongdoing

- (1) No action or claim for damages lies against a person for anything that the person has, in good faith, done in the performance or purported performance of a function under this Act.
- (2) Despite subsection (1), the State is not relieved of any liability that it might otherwise have had for another person having done anything described in that subsection.
- (3) The protection given by this section applies even though the thing done as described in subsection (1) may have been capable of being done whether or not this Act had been enacted.
- (4) In this section, a reference to the doing of anything includes a reference to an omission to do anything.

52. Funding of services

All services, as outlined in this Act, are to be publicly funded for the purposes of enacting this Act.

53. Referral of powers

- (1) The CEO may, by instrument in writing, delegate the CEO's powers and functions under any specified sections in this Act to any of the following persons for the purposes of this Act—
 - (a) a public service officer;
 - (b) a person employed or engaged under section 100 of the *the Public Sector Management Act 1994* by the employing authority of the Department;
 - (c) a person employed by—
 - (i) a local government or regional local government under section 5.36 of the *Local Government Act 1995*; or
 - (ii) a regional subsidiary.
- (2) A person may be designated these powers for a fixed or indefinite period.
- (3) The CEO may, by instrument in writing, revoke a designation at any time.
- (4) The functions of an individual with designated powers are subject to any limitations or conditions specified in the instrument of the designation itself.