

**PART OF MY MIRROR'S  
STANDARD OPERATIONAL  
POLICY AND PROCEDURES**

**Document History**

**Document Information**

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26/10/2023	1.0	Rachel Tomlinson

## 1. Purpose

My Mirror is committed to managing clinical risks to ensure client safety, enhance the quality of care, and prevent adverse events. The purpose of this policy is to outline how My Mirror identifies, assesses, and implements strategies to mitigate potential risks that may arise when clients are accessing My Mirror services.

This policy provides a framework to ensure that My Mirror is managing clinical risks and therefore creating a safer environment for clients and clinicians alike. Proactive risk management is essential for preventing adverse events and continuously improving the quality of care provided.

This policy is supported by the Principles and Definitions below and is enabled by the procedures outlined in this policy.

## 2. Principles

My Mirror adheres to the following principles for risk management:

- Prioritising client safety and wellbeing at all levels of care with all decisions and actions being guided by a commitment to providing the best outcomes for clients
- A culture of continuous improvement is evident where all staff members are encouraged to learn from incidents and near misses to prevent future occurrences
- A culture of transparency and accountability is highlighted

## 3. Definitions *(for the purposes of this policy)*

**Client:** individual, couple or organisation accessing clinicians via My Mirror's platform to engage in therapeutic interventions, assessments or other clinical services

**Clinical risk:** the potential for adverse events of harm to clients receiving psychological services. It involves the identification, assessment, and management of risks that may arise during psychological interventions or therapeutic relationships.

**Clinician:** any psychologist who has signed a contract and is delivering services or has delivered services to clients through My Mirror

**Confidentiality:** The ethical duty of a health practitioner to protect the privacy of their clients' information and maintain its confidentiality.

**Crisis intervention:** The immediate response and support provided to clients experiencing acute psychological distress e.g. risk of safety to self, or if there is acute risk to other or from other.

**Informed consent:** The process of providing clients with relevant information about the purpose, procedures, potential risks, and benefits of psychological services, and obtaining their voluntary agreement to participate.

**Risk assessment:** The process of evaluating and documenting potential risks related to a client's level of risk to self, others' or from others'.

**Operational risk:** losses arising from inadequate or failed internal processes, people, systems, or external events e.g., human error, technological failures, and other unforeseen events.

## 4. Roles and Responsibilities

Who	Commitment	How
Customer Success Team	<ul style="list-style-type: none"> <li>Follow procedures outlined in this policy for documentation and reporting of risk presentations</li> <li>Participate in all required training related to risk</li> </ul>	<ul style="list-style-type: none"> <li>Communicate any clinical risk-related concerns to a member of the Clinical Team</li> </ul>
Clinicians	<ul style="list-style-type: none"> <li>Adherence to the My Mirror Risk Management Policy</li> </ul>	<ul style="list-style-type: none"> <li>Familiarise themselves with the My Mirror Risk Management Policy</li> <li>Read and watch the training and resources on managing and responding to risk in an online setting on the Psych Hub</li> <li>Conduct thorough assessments of clients to identify potential risks or concerns</li> <li>Develop and implement appropriate risk management/safety plans for clients who are presenting with any risk presentation</li> <li>Document and maintain comprehensive records related to risk presentations including risk assessments and interventions</li> </ul>

<p>Clinical Leadership Team</p>	<ul style="list-style-type: none"> <li>• Develop and maintain the Risk Management Policy</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure that all staff members are aware of the Risk Management Policy and receive proper training</li> <li>• Oversee the implementation of the Risk Management Policy throughout My Mirror</li> <li>• Conduct regular reviews of the Risk Management Policy to keep it current and effective</li> <li>• Collaborate with clinicians to create a supportive and safe environment for the delivery of care</li> </ul>
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## 5. Process

### 5.1 Escalation and Identification of Risk

Risk may be escalated or identified in a variety of ways: formal and informal, through Customer Success, or directly from clients/consumers/potential clients/psychologists and other internal MM staff. Such formats may include but are not limited to:

- Zen desk
- Phone call
- Email
- Feedback logs received by clients post session with a psychologist
- From clinicians directly
- Via internal meetings or communications

The severity assessment should be used to help determine the need to escalate, investigate and respond to the risk identified.

SAC definitions are:

- SAC 1 death or likely permanent harm which is not reasonably expected as an outcome of healthcare
- SAC 2 temporary harm which is not reasonably expected as an outcome of healthcare
- SAC 3 minimal harm which is not reasonably expected as an outcome of health care
- SAC 4 no harm or near miss.

### 5.2 Clinical versus operational risk

Should an operational risk, also impact on clinical safety or the client or risk emerges/is identified due to the operational risk it should not only be managed and investigated in the first instance by the Customer Success Team, it must also be escalated to the appropriate internal team (including clinical, tech or marketing etc, or via the out of hours escalation process – see [Out of Hours Escalation Process](#)).

Clinical risk relates to clinical service delivery and includes (but is not limited to):

- Client presentations – risk of harm to self, risk of harm to others, suicidal ideation or completion of suicide
- Risk to clinician – including risk of harm from the client, psychological injury arising from their work, breach of confidentiality

Managing disclosure or identification of risk – via Customer Success Team:

- Low to moderate clinical risk is handled immediately by the person receiving or identifying the risk
- All risk relating to operational elements of the business should be escalated to the appropriate business area, regardless of severity of risk
  - Relevant complaints should be logged if warranted or requested
  - Clinical Governance/Clinical team - [Clinical Risk Log](#)
  - Customer team - [Complaints, Compliments and Constructive Feedback](#).
- High risk relating to clinical service delivery should be escalated immediately to the clinical team, or out of hours escalation processes should be followed once the immediate situation/risk has been managed
- Please be aware of specific protocols relating to risk identified by the Customer Success Team, including expected management and escalation:
  - [My Mirror Phone Risk Identification Guide](#)
  - [My Mirror Email Risk Identification and Action Guide](#)
  - [My Mirror Zendesk Risk Identification and Action Guide](#)

Managing disclosure or identification of risk – via Clinician/Clinical Team:

- Risk should be assessed as per clinical and ethical guidelines and as per evidence based and best practice required of registered professionals
- Risk should be managed as per the [Risk Management Policy](#)
- Please note, that as above the vast majority of clinical risk can and should be managed by the clinician directly
- Should the risk present as high (SAC 1 or 2 – see section 5.1), and the clinician is unable to contain the risk they should immediately escalate to the Clinical Team for clinical debrief and support
- Should the risk be high and occur outside of operational hours, the out of hours process should be enacted
- As above – this should only occur in extenuating circumstances where the clinician cannot manage the risk entirely and need additional support to ensure safe and effective service delivery to the client [Out of Hours Escalation Process](#)
- For all risks escalated to the clinical team (whether via customer team or directly via the clinician) will be required to make themselves available as practicable to support the clinician with ethical and procedural decision making, including debrief, support, follow up and logging the risk, investigation and full review of outcomes post escalation on the [Clinical Risk Log](#)

My Mirror requirements for static risk management and containment:

- All members of the My Mirror team who are likely to at any stage be in contact with a client must complete the My Mirror Communication and Risk Management training.

### 5.3 Automatic Response Requirements

#### Email Signatures:

- All My Mirror email addresses must include the following in their signature:
- Please note we are not an emergency service.  
If you require medical or mental health assistance please contact 000 in the event of an emergency or one of the following services:  
Lifeline 13 11 14, Beyond Blue 1300 224 636, Suicide Call Back Service 1300 659 467.

#### Phone Voicemail:

- All My Mirror client facing phone numbers should have a voicemail that states: "My Mirror is not an emergency service or crisis line. If you require medical or mental health assistance please contact 000 in the event of an emergency or one of the following services: Lifeline 13 11 14, Beyond Blue 1300 224 636, Suicide Call Back Service 1300 659 467.."

#### Automatic Reply on All Text Channels (including but not limited to email and online chat and socials):

- An automatic reply should be sent on all possible platforms stating: "My Mirror is not an emergency service. If you require medical or mental health assistance please contact 000 in the event of an emergency or one of the following services: Lifeline 13 11 14, Beyond Blue 1300 224 636, Suicide Call Back Service 1300 659 467.

#### Online Chat:

- An automated reply should state: emails from MM should include information and contact numbers for Helplines and recommend contacting emergency services or presenting to a hospital in a medical or mental health emergency.
- Careful not to market the online chat as a counselling chat function like Lifeline and BeyondBlue chat counselling function.

## 6. Compliance

Compliance with the Risk Management Policy applies to the Clinical Leadership Team, Clinicians, the Customer Success Team and any other staff member or stakeholder involved in risk management.

## 7. Related Documents

- [Clinical Governance Framework](#)

## 8. Review

This policy is a living document that will be continually reviewed and updated to remain relevant and adapt to changing circumstances. At a maximum, it will be reviewed every two years.