Governance, Quality and Safeguards | Bloom Healthcare

Canonical: https://bloom-healthcare.com.au/about-us/governance-quality/

Details:

Bloom Healthcare Pty Ltd is an approved registered NDIS provider (registration no 4-JR6F5KX, provider no 4050148863) and holds ISO 9001 certification for its quality management system. Day to day, quality means clinically led care, clear arrangements agreed before support starts, goals that are measured and reviewed, and safe ways to raise a concern, either with Bloom or directly with an independent body such as the NDIS Quality and Safeguards Commission. To ask about any of it, call 1300 771 465 , email hello@bloom-healthcare.com.au , or give feedback .

For the step-by-step experience of starting and finishing a service, see your journey with Bloom . For who Bloom is and where it works, see about Bloom Healthcare .

Bloom's registration and business details

Legal name: Bloom Healthcare Pty Ltd, trading as Bloom Healthcare

ABN: 64 649 276 273

NDIS registration no: 4-JR6F5KX

NDIS provider no: 4050148863

Quality management: ISO 9001 certification, within its certified scope

Registered address: 111 Cecil St, South Melbourne, Victoria. This is a business address, not a clinic.

You can check Bloom's registration yourself by searching the NDIS Provider Register on the NDIS Quality and Safeguards Commission website.

What registration and certification mean, and what they do not

NDIS registration

A registered NDIS provider has applied to the NDIS Quality and Safeguards Commission, been audited against the relevant NDIS Practice Standards and assessed as meeting them, undergone a suitability assessment of the provider and its key personnel, and been issued a certificate of registration. Registration is generally for three years, and registered providers appear on the NDIS Provider Register.

Registration comes with ongoing conditions, including:

complying with the applicable NDIS Practice Standards and the NDIS Code of Conduct

complying with applicable state, territory and Commonwealth laws

having effective systems for managing complaints and managing incidents

making sure workers in certain roles, including key personnel, hold NDIS Worker Screening clearances

meeting notification and quality audit requirements

Why it matters to you: if your NDIS plan is NDIA-managed , you must use a registered provider. If you self-manage or plan-manage, you can choose registered or unregistered providers. Registration is also mandatory for specialist behaviour support and for any provider that plans to use regulated restrictive practices.

Registration applies to Bloom's approved registration groups. It does not confirm that a service suits you, that a clinician is available in your area, or that your plan funds it; those are checked for each enquiry.

ISO 9001 certification

ISO 9001 is a standard for quality management systems: how an organisation defines its processes and responsibilities, checks how they are working, and acts to improve them. For you, the practical focus is consistent processes, clear expectations, attention to risks and feedback, and review and improvement within the certified scope.

Certification relates to the quality management system. It is not a guarantee of any individual clinical outcome. If you want the current certification details, ask the Bloom team .

Aged care standards

Bloom's aged care service delivery procedure is aligned to the core components of the Aged Care Quality Standards that applied before the new Act: consumer dignity and choice, assessment and planning, personal and clinical care, services and supports for daily living, the service environment, feedback and complaints, human resources and organisational governance. From 1 November 2025 those were replaced by the strengthened Aged Care Quality Standards , which are part of the Aged Care Act 2024 and are more detailed and measurable than the previous standards. If you receive aged care services, ask Bloom how its procedures apply the strengthened standards.

Professional registration

Bloom matches each service to the relevant practitioner scope, qualifications, registration or accreditation, and discusses escalation or referral when another service is more appropriate. Organisational changes are assessed against the NDIS Practice Standards, the Aged Care Quality Standards, ISO 9001 and discipline registration standards such as those of AHPRA (the Australian Health Practitioner Regulation Agency).

How clinical governance works day to day

Clinical leadership

Bloom's clinical leadership has a National Allied Health Manager at the top level, with National Clinical Managers reporting to that role. Bloom's directors and management team are responsible for making sure each policy is implemented and its progress tracked.

Supervision and professional development

All clinicians take part in a regular clinical supervision program , so they have support to deliver evidence-based practice.

National Clinical Managers review and share recent research every month , which is then discussed in discipline-specific meetings.

Clinical Leads each develop and deliver four evidence-based professional development modules a year , through Friday professional development sessions or Bloom's online learning system.

Participants with lived experience attend Bloom's weekly professional development sessions , so the team learns directly from their experience.

Risk, records and audit

Risk is assessed before the first visit. A new referral triggers an intake form, which starts the risk assessment. Managers review identified risks and complete a risk management plan before a clinician starts services. If risk at a home is assessed as high, alternatives such as remote servicing or another meeting place can be arranged.

Risks are logged on Bloom's risk register and reviewed, with continuous improvement initiatives, at a monthly clinical governance meeting .

Case notes are completed within 24 hours of each clinical activity.

File audits: Bloom's aged care service delivery procedure requires leaders to audit at least 10% of each clinician's files every month, looking at compliance, the quality of case notes, communication, stakeholder satisfaction and reporting timeframes.

Change is managed formally. Significant changes to clinical or operational practice need written director approval, a trial where relevant, communication with staff and a post-implementation review.

Policies are reviewed annually , and updates are recorded on Bloom's policy register.

Workforce continuity

Bloom reports 80% workforce retention and 86% workforce engagement . These are organisation-wide figures, not results for a particular service or area, and they do not guarantee the same clinician at every appointment. You can ask for continuity with your clinician; availability and clinical fit are confirmed for your service.

Safeguards for the people Bloom supports

Worker screening

All Bloom employees, contractors and volunteers must complete the NDIS Worker Screening Check , plus the working-with-vulnerable-people and working-with-children checks required in their state or territory. Records of checks are kept on staff files and audited every year.

Human rights and non-discrimination

Bloom's human rights policy commits to respect and dignity, non-discrimination, participation and inclusion, and accountability and transparency. Services are provided regardless of race, colour, descent, national or ethnic origin, beliefs or religion, sex, sexual orientation, gender identity, intersex status, or marital or relationship status. The policy also commits Bloom to actively preventing abuse, harm, neglect and violence, and to taking any allegation seriously.

Choice, consent and supported decision-making

You are the primary decision-maker about your care. Bloom's supported decision-making policy commits staff to giving clear, accessible information, using decision aids where useful, involving your

chosen support network, and protecting against undue influence.

Advocacy and accessibility

You have the right to an advocate, and registered NDIS providers must cooperate with advocates for people affected by complaints or incidents. See the advocacy policy , which also links to the Department of Social Services' National Disability Advocacy Program.

Bloom can arrange interpreters through the Translating and Interpreting Service (TIS National) ; ask when you book. Easy Read versions of the rights, advocacy, supported decision-making, incident management and accessibility policies are available. See the accessibility statement and your rights .

How Bloom measures progress

Attendance alone does not show whether support is helping. Bloom's commitment is to agree meaningful goals with you, record a starting point, and review outcomes using measures that suit the person and the clinical question.

Goal Attainment Scaling

Goal Attainment Scaling (GAS) turns an individual goal into agreed, observable levels of achievement. The expected outcome and the review point are defined before progress is rated, and the starting point is recorded separately. Bloom uses a streamlined version called GAS-light, in which the expected outcome is written as a SMART goal (specific, measurable, achievable, relevant and time-bound).

The five levels are:

+2: much more than expected

+1: somewhat more than expected

0: the expected goal outcome

–1: somewhat less than expected

–2: much less than expected

A score needs context. Zero means the agreed goal was achieved, not "no progress". The baseline is not automatically –2, the scale is not a generic test, and the rating describes the goal, not the value or effort of the person.

Other measures, and what counts as progress

GAS is one tool, not the only one. Clinicians may also use discipline-specific assessments, observations and your own feedback about confidence, effort, comfort and participation. For some people, maintaining function, adapting an activity or improving comfort is a meaningful outcome.

Review follows four steps: agree the goal and starting point, measure with suitable tools at agreed times, understand the results alongside your experience, and decide together whether to continue, adapt, transition or finish support. Measures inform clinical decisions and planning. They do not guarantee funding approval or prove that one service caused every change.

Feedback and complaints

Tell Bloom what worked, what did not, or what you would like to change. You can ask a family member, supporter or advocate to help. Raising a concern should not result in unfair treatment or disadvantage.

Raising it with Bloom

You can:

speak to your clinician, or ask to speak with a manager

call 1300 771 465 or email hello@bloom-healthcare.com.au

use the online feedback form

Bloom will listen, consider any immediate safety concern, explain the next steps, and use what you tell us to review what needs attention. Feedback is reviewed in clinical supervision, fortnightly discipline meetings and weekly team meetings, and actions for improvement are recorded. Ask for an accessible way to share your concern, or for help understanding the process, and ask for a copy of the complaints process that applies to your service.

Going to an independent body

You do not have to complain to Bloom first. You can go directly to:

the NDIS Quality and Safeguards Commission , for concerns about the quality or safety of NDIS supports

the Aged Care Quality and Safety Commission , for concerns about Australian Government-funded aged care

What the rules require of providers

The NDIS Code of Conduct requires providers to act promptly when someone raises a concern about the quality or safety of supports. Registered providers must have a documented complaints management and resolution system as a condition of registration. Making threats, or trying to stop someone from complaining directly or indirectly, is against the law.

Incidents

Bloom's incident management policy , written for NDIS supports, sets out how incidents are identified, recorded, reported and resolved. It is given to participants and stakeholders by email or hard copy during onboarding, and at any time on request, and an Easy Read version is available.

What counts as an incident

An incident is an act, omission, event or circumstance connected with providing NDIS supports or services that has caused, or could have caused, harm to the person with disability. It also includes acts by the person that have caused serious harm, or a risk of serious harm, to someone else. The policy lists reportable incidents such as death or serious injury, abuse or neglect, unlawful sexual or physical contact or assault, sexual misconduct, unauthorised use of a restrictive practice, a data breach, and injury or death of a worker on duty.

How Bloom responds

Staff report every incident to their manager, and make sure the person's immediate needs, such as first aid, are met.

Managers investigate, decide whether the incident is reportable, and make sure the incident response form is completed within 24 hours of the incident occurring.

Bloom uses a two-step process: the staff member reports the incident electronically, then the manager completes a corrective action plan.

Depending on the incident, it is reported to the NDIS Quality and Safeguards Commission, AHPRA or the Office of the Australian Information Commissioner (OAIC).

People affected are given an opportunity to give their side and comment on any adverse views.

Reporting timeframes under the NDIS

Registered NDIS providers must notify the NDIS Commission of all reportable incidents. Most, including death, serious injury, abuse or neglect, unlawful contact or assault, and sexual misconduct, must be notified within 24 hours of the provider becoming aware. Unauthorised use of a restrictive practice must be notified within 5 business days , or within 24 hours if it caused harm.

Restrictive practices

Using a restrictive practice that is not authorised by the relevant state or territory, or that does not follow the person's behaviour support plan, is a reportable incident. A provider must be registered with the NDIS Commission to use regulated restrictive practices at all, and authorised use is reported to the Commission separately. For how behaviour support plans, authorisation and reduction work, see positive behaviour support .

Privacy and your information

Bloom's privacy policy follows the Privacy Act 1988 and the 13 Australian Privacy Principles. In practice:

Information is collected only for purposes relevant to your care, and with your consent. Consent can be verbal or written, but written consent is needed before Bloom shares information with a third party , unless the law requires otherwise.

Information may be shared, with consent or where required by law, with other treating professionals, family or authorised representatives, referring organisations, community service providers, legal practitioners, law enforcement, or people at direct or immediate risk.

Bloom does not sell, trade or rent personal information.

Records are kept in a secure case management system with access on a strict need-to-know basis. Assessment and appointment information is stored electronically and hard copies are securely destroyed.

You can ask to see your records and to correct anything inaccurate or incomplete.

Bloom has an incident response procedure for suspected or confirmed data breaches, covering investigation, notifying affected people where required, reporting to authorities and corrective action.

To raise a privacy concern, speak with your clinician or a manager, or email hello@bloom-healthcare.com.au . Send health records only through the secure referral process .

Emergencies and continuity

Bloom's emergency management policy and disaster plan covers personal emergency planning for participants, natural disasters, pandemics and other emergencies, including the use of telehealth to keep care going. Your emergency contacts are recorded in your service agreement.

Quality across different funding frameworks

The clinical purpose stays the same whatever pays for the service. NDIS support connects to your goals, plan and service agreement; Support at Home allied health connects to your assessed needs and care plan, with your registered provider or care manager; Medicare, private, TAC and other schemes each have their own eligibility, approval and payment rules. Bloom discusses what applies to you before the service is agreed. See your journey with Bloom .

Common questions about governance and quality at Bloom

What does ISO 9001 certification mean for my care?

ISO 9001 is a standard for quality management systems: how an organisation defines, checks and improves its processes. For you, the practical focus is consistent arrangements, clear responsibilities, attention to feedback and ongoing improvement. It does not guarantee a particular clinical result. Ask Bloom on 1300 771 465 for its current certification details.

Is NDIS registration the same as ISO 9001 certification?

No. NDIS registration is a regulatory status granted by the NDIS Quality and Safeguards Commission after an audit against the NDIS Practice Standards, and it carries ongoing conditions. ISO 9001 relates to quality management processes within the certified scope. Bloom holds both, and is listed as an approved registered provider (4-JR6F5KX) on the NDIS Commission register.

How can I check that Bloom is a registered NDIS provider?

Search the NDIS Provider Register on the NDIS Quality and Safeguards Commission website for Bloom Healthcare Pty Ltd. Bloom's registration number is 4-JR6F5KX and its provider number is 4050148863. Registration matters most if your plan is NDIA-managed, because NDIA-managed participants must use a registered provider.

Does every person need Goal Attainment Scaling?

No. No single measure fits every person or clinical question. Bloom's commitment is to agree meaningful goals with you and use suitable ways to review them. A clinician may use GAS alongside discipline-specific assessments, observations and your own feedback.

Does a GAS score of zero mean no improvement?

No. In Goal Attainment Scaling, zero is the expected goal outcome agreed in advance, so it means the goal was achieved. Ratings above or below zero describe outcomes better or worse than that agreed level. The starting point is recorded separately, and scores always need clinical interpretation.

Can maintaining an ability count as a meaningful outcome?

Yes. Depending on the person and their circumstances, a meaningful goal may be maintaining function, adapting an activity, improving comfort or supporting participation. Goals and measures should reflect what matters to you and what is clinically appropriate.

Do I need to contact Bloom before making an external complaint?

No. You can contact the NDIS Quality and Safeguards Commission about NDIS supports, or the Aged Care Quality and Safety Commission about government-funded aged care, directly. You can also ask a supporter or advocate to help. Raising a concern should not result in unfair treatment or disadvantage.

How do I make a complaint to Bloom?

Speak to your clinician or ask for a manager, call 1300 771 465, email hello@bloom-healthcare.com.au, or use the online feedback form. Bloom will listen, consider any immediate safety concern, explain the next steps and use the feedback to review the service. You can ask for an accessible format or for help understanding the process.

What happens if something goes wrong during a session?

Under Bloom's incident management policy for NDIS supports, staff make sure your immediate needs are met and report the incident to their manager. The manager investigates, decides whether it is reportable, and makes sure the incident response form is completed within 24 hours of the incident, followed by a corrective action plan. Separately, NDIS Commission rules require registered NDIS providers to notify reportable incidents, most within 24 hours of becoming aware of them.

Who can see my personal information?

Access inside Bloom is on a strict need-to-know basis, using a secure case management system. Written consent is needed before your information is shared with a third party, unless the law requires otherwise, and Bloom does not sell, trade or rent personal information. You can ask to see your records and to have errors corrected.

Can I ask for accessible information or help to make a decision?

Yes. Tell Bloom the communication format or support you need. You can ask for plain-language explanations, Easy Read material, an interpreter through TIS National, or the involvement of a chosen supporter or advocate.

Can I request continuity with my clinician?

Yes. Tell Bloom your preferences. Bloom aims to support a consistent clinical relationship through appointment planning, clear communication and appropriate handover if a change is needed. Availability and clinical fit still need to be confirmed, and Bloom's 80% retention and 86% engagement figures are organisation-wide, so they do not guarantee the same clinician at every appointment.

More on Bloom Healthcare

About Bloom Healthcare : who Bloom is, the disciplines and where services are delivered

Your journey with Bloom : from first enquiry to review and finishing support

Your rights and supported decision-making

Incident management policy and privacy policy

Give feedback or make a complaint

Pricing and fees

What does ISO 9001 certification mean for Bloom Healthcare's care?

ISO 9001 is a standard for quality management systems covering how an organisation defines, checks and improves its processes. For clients, the practical focus is consistent arrangements, clear responsibilities, attention to feedback and ongoing improvement. It does not guarantee a particular clinical result. Clients can ask Bloom Healthcare on 1300 771 465 for its current certification details.

Is NDIS registration the same as ISO 9001 certification?

No, they are different. NDIS registration is a regulatory status granted by the NDIS Quality and Safeguards Commission after an audit against the NDIS Practice Standards, carrying ongoing conditions, while ISO 9001 relates to quality management processes within the certified scope. Bloom Healthcare holds both and is listed as an approved registered provider (registration number 4-JR6F5KX) on the NDIS Commission register.

How can someone verify Bloom Healthcare is a registered NDIS provider?

Search the NDIS Provider Register on the NDIS Quality and Safeguards Commission website for Bloom Healthcare Pty Ltd. Its registration number is 4-JR6F5KX and its provider number is 4050148863. Registration matters most for NDIA-managed plans, since NDIA-managed participants must use a registered provider.

Does every client need Goal Attainment Scaling (GAS) at Bloom Healthcare?

No, no single measure fits every person or clinical question. Bloom Healthcare's commitment is to agree meaningful goals with each client and use suitable ways to review them; a clinician may use GAS alongside discipline-specific assessments, observations and the client's own feedback.

Does a Goal Attainment Scaling score of zero mean no improvement occurred?

No. In Goal Attainment Scaling, zero is the expected goal outcome agreed in advance, so it actually means the goal was achieved. Ratings above or below zero describe outcomes better or worse than that agreed level, the starting point is recorded separately, and scores always need clinical interpretation.

Can maintaining an ability count as a meaningful outcome for a Bloom Healthcare client?

Yes. Depending on the person and their circumstances, a meaningful goal may be maintaining function, adapting an activity, improving comfort or supporting participation. Goals and measures should reflect what matters to the client and what is clinically appropriate.

Does a client need to contact Bloom Healthcare before making an external complaint?

No. A client can contact the NDIS Quality and Safeguards Commission about NDIS supports, or the Aged Care Quality and Safety Commission about government-funded aged care, directly, and can also ask a supporter or advocate to help. Raising a concern should not result in unfair treatment or disadvantage.

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A client can speak to their clinician or ask for a manager, call 1300 771 465, email hello@bloom-healthcare.com.au, or use the online feedback form. Bloom Healthcare will listen, consider any immediate safety concern, explain the next steps and use the feedback to review the service, and clients can ask for an accessible format or help understanding the process.

What happens if something goes wrong during a session at Bloom Healthcare?

Under Bloom Healthcare's incident management policy for NDIS supports, staff make sure the client's immediate needs are met and report the incident to their manager, who investigates, decides whether it is reportable, and ensures the incident response form is completed within 24 hours, followed by a corrective action plan. Separately, NDIS Commission rules require registered NDIS providers to notify reportable incidents, most within 24 hours of becoming aware of them.

Who can see a client's personal information at Bloom Healthcare?

Access inside Bloom Healthcare is on a strict need-to-know basis, using a secure case management system. Written consent is needed before a client's information is shared with a third party, unless the law requires otherwise, and Bloom Healthcare does not sell, trade or rent personal information. Clients can ask to see their records and have errors corrected.

Can clients ask Bloom Healthcare for accessible information or decision-making support?

Yes. Clients can tell Bloom Healthcare the communication format or support they need, including plain-language explanations, Easy Read material, an interpreter through TIS National, or the involvement of a chosen supporter or advocate.

Can a client request continuity with the same clinician at Bloom Healthcare?

Yes, clients can tell Bloom Healthcare their preferences, and Bloom Healthcare aims to support a consistent clinical relationship through appointment planning, clear communication and appropriate handover if a change is needed. However, availability and clinical fit still need to be confirmed, and Bloom Healthcare's 80% retention and 86% engagement figures are organisation-wide, so they do not guarantee the same clinician at every appointment.