Contact Bloom Healthcare | NDIS & Allied Health Support

Canonical: https://bloom-healthcare.com.au/contact-us/

Details:

Bloom Healthcare can be reached on 1300 771 465 , by email at hello@bloom-healthcare.com.au , or through the referral form at /referrals . Phone and email are attended Monday to Thursday 7:30am to 6:00pm, Friday 7:30am to 5:00pm, and Saturday by appointment. If you are sending a new referral, the team aims to be in touch within 24 hours of receiving it. This page explains which contact route suits which purpose, what information to have ready, and what happens step by step once you make contact.

The contact routes and what each one is for

Phone: 1300 771 465

This is the main line for everything. It suits a first conversation, questions about whether a service is right for you, scheduling problems, billing and invoice queries, and anything you would rather talk through than write down. It is also the right number if you are not sure which allied health service you need or which funding stream would pay for it. The line is attended Monday to Thursday 7:30am to 6:00pm and Friday 7:30am to 5:00pm.

Email: hello@bloom-healthcare.com.au

Email suits anything that involves attachments or needs a written record. Send existing reports, a copy of an NDIS plan or plan goals, a GP or specialist referral, a completed intake form, or a written concern. Putting the participant's name and, where relevant, the NDIS number in the subject line helps the message reach the right team faster.

Referral form: /referrals

The referral form is the fastest way to start a new service. It is built to collect the details the intake team needs in one pass, which avoids a round of follow-up questions. Anyone can use it: participants and families referring themselves, or a professional referring on someone's behalf.

Your treating clinician

Once a clinician has been allocated to you, they become your direct contact for session times, therapy questions, report timing and progress. Contact the main line rather than your clinician for billing questions, changes to funding, or anything you want handled by the office.

Locations: find a location near you

Bloom is a mobile service, so the location pages are about which clinicians work in which region rather than shopfronts to visit. Use them to check whether a discipline is available in your area before you call.

Choosing the right route for your situation

You are a participant, parent or carer starting a new service. Use /referrals , or call 1300 771 465 if you would rather talk it through first. You do not need a doctor's referral to enquire about NDIS-funded allied health.

You are a GP, paediatrician, psychiatrist, child and family health nurse, support coordinator, plan manager, school learning support team member or allied health colleague. Use the referral form and attach the reports you already hold. Referrals from professionals are accepted with the participant's or family's consent.

You are an existing client changing or cancelling an appointment. Contact your clinician directly where you can, and the main line if you cannot reach them. Notice periods and any charges that apply are set out in the service agreement you signed, so check that document or ask on 1300 771 465.

You have a question about an invoice or how a service is being billed. Call 1300 771 465. Billing depends on how your funding is managed, and the office can look at your file rather than answer in general terms.

You want to give feedback or make a complaint. You can raise it with your clinician, or contact the office on 1300 771 465 or hello@bloom-healthcare.com.au. You can also complain to an external body instead of or as well as Bloom, and you never have to go through the provider first. See the section below.

You are applying for a job. Career enquiries go through the careers section of the site rather than the clinical intake line, so that clinical enquiries are not held up behind them.

You are an organisation wanting a referral pathway or partnership. Call 1300 771 465 or email hello@bloom-healthcare.com.au and say what kind of arrangement you are asking about, so the enquiry reaches the right person.

What to have ready before you call or refer

You can make contact with none of this. Having it to hand simply means fewer follow-up calls before an appointment can be booked.

Who the service is for : name, age, and the best contact details for the person who should be called back.

The main concerns : the top two or three things that are hard right now, at home, at school, at work or in the community. Concrete examples help more than a diagnosis label.

Funding details : your NDIS number if you have one, and how your plan is managed, meaning self-managed, plan-managed, or NDIA-managed. If you are an older person, whether you are going through My Aged Care. If you are using Medicare, whether a GP has written a care plan.

Plan goals : copy them from your NDIS plan if you can. Goals decide what a therapist can work on and what can be claimed.

Existing reports : previous therapy reports, assessments, discharge summaries, or reports from childcare, preschool or school.

Relevant medical history and precautions : conditions, medications, and anything a clinician needs to know before a first session.

Where you would like to be seen : home, school or early learning centre, workplace, another community setting, or by telehealth.

Anything that affects safety or communication : falls risk, seizures, behaviours of concern, sensory needs, whether an interpreter is required, or whether a support person or advocate will attend.

What happens after you send a referral

Acknowledgement. The intake team registers the referral and aims to make contact within 24 hours. If a professional referred you, the team may go back to them for missing documents such as a care plan.

Welcome pack and intake form. You are emailed a welcome pack with an intake form. This is the step that most often causes delay, because nothing further can happen until the form comes back. If it has not been returned in about a day, someone will follow up and offer help completing it.

Triage and matching. The completed form is reviewed and, where it is needed, a risk management plan is put in place before anyone visits. You are then matched to a clinician based on their location, availability, clinical interest and skill set, and any risks identified.

Your clinician contacts you. The allocated clinician gets in touch to agree how the service will be delivered, whether that is in your home, in the community, at a clinic by arrangement, or by secure video. They check whether an interpreter is needed and arrange a first appointment time.

Consent and service agreement. Before the first session you are asked to sign a consent form. It covers what the service is, the approach being used, the limits of confidentiality, and the costs you can expect. For aged care and privately funded work, a service agreement covers hours, session structure, travel arrangements, reporting and fees. Read it, ask about anything that is unclear, and do not sign until you are satisfied.

First appointment. The initial session is an assessment rather than treatment. The clinician gathers history, current function, your environment, your priorities and any risks, and works with you on goals and next steps. What happens after that depends on the discipline and what the assessment finds.

Waiting times vary by discipline and region, and no single figure applies across the country. Ask about current availability for your service and postcode when you call.

Where Bloom sees people

Bloom is a mobile, community-based service. Most appointments happen where the person already spends their time, which usually means at home, at school or an early learning centre, at a day program, at work, or elsewhere in the community. Telehealth by secure video is used for regional and remote areas and for people who find travel or leaving home difficult. Clinic appointments can be arranged on request in some areas.

Services run across New South Wales, Victoria, Queensland, South Australia, Western Australia, Tasmania and the Australian Capital Territory. Regions covered include Sydney, Parramatta, Penrith, Liverpool, Campbelltown, Hornsby, the Northern Beaches, Newcastle, Wollongong and Tweed Heads in New South Wales; Melbourne, Geelong, Frankston, Dandenong, Glen Waverley, Craigieburn, Cheltenham, Melton and Werribee in Victoria; Brisbane, the Gold Coast, the Sunshine Coast, Ipswich, Logan, Caboolture, North Lakes, Springfield, Redland Bay, Bundaberg, Cairns and Townsville in Queensland; Adelaide, Salisbury, Mawson Lakes, Morphett Vale, Seaford, Seaton, Henley Beach, Highbury, Magill, Blackwood and Stirling in South Australia; Perth, Joondalup, Osborne Park, Midland, Ellenbrook, Canning Vale, Baldivis, Rockingham and Mandurah in Western Australia; Launceston and Devonport in Tasmania; and Canberra. Availability by discipline differs from region to region, so check on 1300 771 465 or through /locations/ .

If you need an interpreter or information in another format

Tell the team when you first make contact rather than at the appointment, because interpreting has to be booked in advance. Interpreting can be arranged through TIS National, the free Australian Government translating and interpreting service, at no cost to you. If you are deaf, hard of hearing, or have a speech disability, you can use the National Relay Service to reach the phone number above.

If reading standard documents is hard, ask for information in easy read. Easy read versions exist for the topics that matter most at the start of a service, including service agreements, privacy, your rights, travel and billing, complaints and feedback, and therapy plans. The NDIS Commission also publishes easy read information about rights and behaviour support at ndiscommission.easyread.com.au.

You are entitled to bring a support person, family member, nominee, guardian or independent advocate to any contact with a provider, including the first phone call. If you are contacting Bloom as a nominee or guardian on behalf of someone else, be clear about the scope of your role, because it determines what you can consent to.

Questions about money and invoices

How you are billed depends on how your funding is managed, and general answers on a website will not tell you what you personally will pay. Fees, travel and any cancellation terms are set out in the service agreement you sign before services start, and anything specific about your account should go to 1300 771 465 so the team can look at your file. Bloom works with NDIS participants across all three management types, Medicare-funded clients where a GP has written the relevant care plan, older people funded through aged care programs, and privately funded and insured clients. If you are funded through another scheme, ask when you call.

Feedback, concerns and complaints

Raising a concern must never affect the services you receive. Providers are required to have a complaints system that lets you complain safely, including anonymously if you prefer, and they are prohibited from threatening you or trying to stop you complaining. You can ask for an advocate to be present at any point.

Start with your clinician or the office on 1300 771 465 or hello@bloom-healthcare.com.au if you are comfortable doing so. A good response acknowledges the complaint quickly, gives you a timeframe, explains what happened, sets out what will be done, and apologises where an apology is owed.

You can also go straight to an external body, or escalate if you are not satisfied with the response, if nothing happens in a reasonable time, or if you think the NDIS Code of Conduct has been breached. For disability services, that is the NDIS Quality and Safeguards Commission, which has an online complaint form and contact details at ndiscommission.gov.au. The NDIS can also be reached on 1800 800 110, TTY 133 677, with interpreters arranged on request. For aged care services, complaints go to the Aged Care Quality and Safety Commission, online, by phone or by letter, with details available through myagedcare.gov.au. The Older Persons Advocacy Network can help an older person make a complaint.

Business and registration details

Legal name: Bloom Healthcare Pty Ltd · ABN: 64 649 276 273 · ACN: 649 276 273

NDIS registration no: 4-JR6F5KX · Provider no: 4050148863

Registered address: 111 Cecil St, South Melbourne, Victoria — a business address, not a clinic. Bloom is a mobile service, so do not attend without an arranged appointment.

Common questions about contacting Bloom Healthcare

What are Bloom Healthcare's opening hours?

Monday to Thursday 7:30am to 6:00pm, Friday 7:30am to 5:00pm, and Saturday by appointment. Appointment times outside standard business hours depend on clinician availability in your area, so ask when you book.

How quickly will someone get back to me?

The team aims to make contact within 24 hours of receiving a referral. How soon an appointment can then be offered depends on the discipline, your region and clinician availability.

Do I need a doctor's referral to contact Bloom?

Not for NDIS-funded allied health. You or a family member can refer directly. A GP referral and care plan are needed for Medicare-funded services, because Medicare requires them before a rebate can be paid.

Can someone else contact Bloom on my behalf?

Yes. Family members, carers, support coordinators, plan managers, GPs, paediatricians, psychiatrists, child and family health nurses, allied health clinicians, school staff and rehabilitation specialists all refer, with consent. Nominees and guardians should be clear about the limits of their role when they do.

Is there a Bloom clinic I can walk into?

Bloom is primarily mobile, so services are delivered where you already are rather than at a walk-in clinic. Clinic appointments can be arranged on request in some areas. Always book first on 1300 771 465 rather than turning up.

What is the fastest way to get a new service started?

Submit /referrals with the participant's age, main concerns, contact details, NDIS number and management type, plan goals, and any existing reports attached, then return the intake form as soon as it arrives. The intake form is the most common cause of delay.

Can I get an appointment by video?

Yes. Telehealth by secure video is offered across disciplines and is often used in regional and remote areas or where travel is difficult. Not every assessment suits video, so the clinician will tell you if part of the work needs to be done in person.

Who do I contact about a bill I do not understand?

Call 1300 771 465. Billing depends on your plan management type or aged care program, and the office can check your file and your service agreement rather than answering in general terms.

What if I want to change clinicians?

Ask. Choosing who supports you is part of choice and control under the NDIS, and asking for a different clinician is a normal request, not a complaint. Raise it with the office on 1300 771 465.

How do I complain if I do not want to talk to Bloom about it?

Go directly to the regulator. For disability supports that is the NDIS Quality and Safeguards Commission at ndiscommission.gov.au, and for aged care it is the Aged Care Quality and Safety Commission. Neither requires you to complain to the provider first, and complaints can be made anonymously.

I need an interpreter. How do I arrange one?

Say so on your first contact or on the referral form. Interpreting is arranged through TIS National at no cost to you and needs to be booked before the appointment rather than on the day.

Before you call

If you are not yet sure what you need, about Bloom Healthcare sets out who Bloom supports, where services are delivered and how to start, and where to start points to the right page for your situation.

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What is Bloom Healthcare's phone number?

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