Feedback | Share Your Experience | Bloom Healthcare

Canonical: https://bloom-healthcare.com.au/feedback/

Details:

You can use the form on this page, email hello@bloom-healthcare.com.au, call 1300 771 465 , or raise it directly with your clinician, another staff member or the Director. You can also ask a family member, friend or advocate to do it for you, and you can give feedback anonymously.

The most important thing to know before you start: making a complaint is not supposed to cost you anything. You have the right to expect the best possible standard of service, and staff are not permitted to react badly to a complaint. Raising a concern does not put your supports at risk.

What you can give feedback about

Feedback is not only for when something has gone wrong. Bloom asks for input on:

The quality of the supports or services you receive

Whether the service has been consistent

How staff have performed

What is working well and should not change

What needs to change to be more useful to you

Compliments are worth sending too. They tell an organisation which parts of its practice to protect.

How to raise a complaint

Use whichever of these is easiest for you:

The feedback form on this page

Email: hello@bloom-healthcare.com.au

Phone: 1300 771 465

In person or in a session , to your clinician or any staff member

To the Director of Bloom Healthcare

Through someone else , such as a family member, friend or advocate acting on your behalf

If you need an interpreter, ask for one. If you need the information in Easy Read or another format, see the accessibility page .

It helps to include what happened, when, who was involved, what effect it had on you, and what you would like to see done about it. If you do not have all of that, send what you have.

What happens after you complain

Acknowledgement. The Director or their delegate writes to you, by letter or email, to confirm the complaint has been received and to give you a date by which they expect it to be resolved.

A person is appointed. A staff member is assigned to investigate and work on resolving it.

A plan. The complaint is investigated and a plan to resolve it is developed. You are told what that plan is.

Your response. You get to say whether you are satisfied with the plan, whether the matter is now resolved for you, or whether you are still not satisfied.

Change. Feedback and complaints are reviewed by the clinical teams so that what is learned changes how services are delivered, not just how one case ends.

If you are not satisfied at the end of that process, you can take it outside Bloom. That is your right and it does not require Bloom's permission.

Giving feedback anonymously

Feedback can be given anonymously, through written surveys, conversations with staff, or the feedback form. The trade-off is practical rather than procedural: if Bloom cannot contact you, it cannot ask follow-up questions or tell you the outcome. For a general observation about the service, anonymous is fine. For something that needs fixing for you specifically, giving your details will usually get further.

Your right to an advocate

An advocate is someone who listens to you, helps you make decisions and speaks on your behalf so your rights are respected. It can be a family member, a friend you trust, or someone from a formal advocacy service. The National Disability Advocacy Program is the usual route to independent advocacy for people with disability.

You can have an advocate with you:

At your first assessment meeting and at service plan reviews

In any communication with the provider

When you give feedback or make a complaint

Particularly when you are raising allegations of abuse, neglect, violence, exploitation or discrimination

Bloom can give you a list of advocacy services, and there is a form to complete once you have chosen your advocate. With your permission, your advocate is given the information they need to check that services are working in your interests. You can change your advocate at any time.

If something serious has happened

Some events are treated differently from ordinary complaints. A reportable incident is something that happened because of or during service delivery and has caused, or is likely to cause, significant harm to someone's health, safety or wellbeing. That includes unexpected death, serious injury, abuse, neglect, alleged assault, serious unlawful activity involving a worker, and the use of a restrictive practice that was not authorised.

When an incident is reported, it is recorded on an incident report form and reported to the Director, and reportable incidents are notified to the Commissioner under the National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018. Bloom is required to support the person affected, review the incident with them, and change practice to reduce the chance of it happening again.

Bloom's policy position on abuse, neglect, violence, exploitation and discrimination is zero tolerance, and anyone who witnesses or suspects it is encouraged to report without fear of retribution. If you make a report, your identity is protected, with limited exceptions such as where information must be shared

with authorities or to prevent a serious threat. You can report anonymously.

If someone is in immediate danger, call 000 . You can also report to police directly at any time, whether or not you have told Bloom.

Escalating outside Bloom

You do not have to complain to Bloom first, though it is often the fastest way to fix something.

If you are an NDIS participant , the NDIS Quality and Safeguards Commission handles complaints about registered providers and workers independently. Report online at ndiscommission.gov.au/complaints/report . You can also email feedback@ndis.gov.au or call the NDIS on 1800 800 110 , with TTY on 133 677 , and interpreters can be arranged.

If you receive aged care services , complaints go to the Aged Care Quality and Safety Commission. Details are at agedcarequality.gov.au . Complaints can be made in person, by phone or in writing, and can be made anonymously. A report can be about a worker, or about an organisation that has not followed aged care law.

Check the relevant commission's website for its current phone number before you call, as contact details change.

Common questions about feedback and complaints

Will complaining affect my services?

No. Staff are not permitted to react badly to a complaint, and protections exist for people who report concerns. If you feel you have been treated differently after raising something, that is itself a complaint, and it is one the external commission will take seriously.

Can my carer or family member complain for me?

Yes. So can an advocate, a support coordinator or a plan manager acting with your permission.

How long will it take?

The acknowledgement you receive will state the date by which Bloom expects to have resolved it. If that date passes without contact, follow up on 1300 771 465.

What if I do not want to talk to the person involved?

You do not have to. Send it to the Director, use the form, use email, or have someone else raise it for you.

Can I complain about a decision made by the NDIS rather than by Bloom?

That is a different process. Funding decisions are reviewed by the NDIA, starting with an internal review and then external review. A provider cannot change an NDIA decision. Ask the NDIA how to request a review of a decision.

Do I need evidence?

No. Say what happened as you experienced it. Anything you do have, such as dates, notes or emails, is useful but not a precondition.

What if English is not my first language?

Ask for an interpreter. Bloom can arrange one through TIS National, and the external commissions can arrange interpreters too.

Contact

Email: hello@bloom-healthcare.com.au. Phone: 1300 771 465. Opening hours: Monday to Thursday 7:30 am to 6:00 pm, Friday 7:30 am to 5:00 pm, Saturday by appointment. Information you submit is handled under Bloom's privacy policy . To find services near you, see locations .

Bloom Healthcare acknowledges the Traditional Custodians of the land, pays respect to Elders past and present, and recognises their continuing connection to land, waters and culture.

What happens to feedback that is not a complaint

Not everything worth saying is a complaint, and feedback that is simply an observation is still useful. A clinician arriving at a time that does not suit, a report written in language that was hard to follow, a strategy that did not fit the household, or a service that worked particularly well — all of it changes how the next arrangement is set up.

The practical difference is what you should expect back. A complaint gets a response and a record. General feedback may simply be acted on. If you want a response, say so when you raise it, because that is not always obvious from the message itself.

Raising something on behalf of someone else

Family members, carers, support coordinators, plan managers and advocates can all raise a concern. Where the person receiving the service can express a view, their view remains central, and consent matters: a concern raised about someone's services will generally involve discussing their information, so the pathway for that is confirmed rather than assumed.

Where someone needs support to make or communicate a decision, supported decision-making sets out how that support is provided in a way that builds capacity rather than replacing their voice. The advocacy policy covers your right to an advocate and how to arrange one, including an independent advocate who does not work for Bloom.

If you are not satisfied with the response

You do not have to accept an internal answer as final. External bodies exist precisely because providers should not be the last word on their own conduct, and using them does not put your services at risk.

Depending on the service and the funding stream, the relevant body may be the NDIS Quality and Safeguards Commission, the Aged Care Quality and Safety Commission, a health complaints body in your state or territory, or the regulator for a particular profession. The team can tell you which applies to your situation, and the incident management policy explains how incidents are recorded and notified where that is required.

What can feedback help Bloom Healthcare achieve?

Feedback helps Bloom Healthcare identify problems that may arise in service delivery, maintain existing strengths in service provision, and develop strategies to enhance overall service quality.

What methods does Bloom Healthcare use to collect feedback from participants?

Bloom Healthcare collects feedback through written surveys, conversations (direct dialogue with service participants), and anonymous feedback that allows participants to provide input without disclosing their identity.

What topics can participants give feedback on to Bloom Healthcare?

Participants can give feedback on the quality of supports or services, consistency of services, staff performance, what is working well for them, what needs to change to assist them, and what they like and do not like.

Who is involved in the feedback dialogue at Bloom Healthcare?

Feedback enables both clients and their Key Workers to engage in a collaborative dialogue, allowing participants to inform Bloom Healthcare about necessary changes and provide suggestions for more effective and responsive healthcare services.

Does Bloom Healthcare have a system for managing feedback and complaints?

Yes, Bloom Healthcare maintains a well-managed feedback and complaints system to handle participant input.

How can someone contact Bloom Healthcare?

Bloom Healthcare can be contacted by email at hello@bloom-healthcare.com.au or by phone at 1300 771 465.

What type of organisation is Bloom Healthcare?

Bloom Healthcare is a boutique disability and aged care allied health provider that believes all people have the right to access quality healthcare, focusing on evidence-based practice and client centricity delivered by qualified health practitioners across Australia.

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