Brisbane NDIS Psychology Services | Bloom Healthcare

Canonical: https://bloom-healthcare.com.au/services/brisbane-psychology-counselling/

Details:

Bloom Healthcare delivers NDIS psychology and counselling across Brisbane and South East Queensland, mainly by coming to you rather than asking you to come to a clinic. Sessions happen in your home, your school, your workplace or another community setting, and telehealth is available where distance or health makes travel hard. Psychology is normally paid for from the Capacity Building — Improved Daily Living budget in your NDIS plan. To start, call 1300 771 465 or lodge a referral .

This section covers the things the page above does not: exactly where the coverage runs, how the funding works, what the NDIS will and will not pay a psychologist to do, and how NDIS psychology sits alongside Medicare.

Where the coverage runs

Bloom's psychology and counselling services reach across Greater Brisbane and South East Queensland, including:

Brisbane and surrounding metropolitan suburbs

Ipswich

Logan

North Lakes

Redland Bay

Springfield

Gold Coast and Robina

Sunshine Coast

Beyond the south east corner, Bloom also provides services in Bundaberg , Townsville and Cairns , where in-person psychology availability is thinner and telehealth does more of the work.

If your suburb is not on that list, it does not automatically mean no. Check the location guide or call 1300 771 465 and ask whether there is a clinician working your area. Availability changes, and it varies by discipline as well as by postcode.

How sessions are delivered

Community delivery is Bloom's main model, not a fallback. That means:

In your home. The default for most participants. It removes the travel problem and lets the psychologist see the environment where the difficulty actually happens.

At school, work or a day program. Useful when the goal involves participation in that setting.

By telehealth. Video or phone sessions. Telehealth is an approved NDIS delivery method for self-managed, plan-managed and agency-managed participants where it is clinically appropriate. Autism assessments can also be run this way, which matters for people outside the metro area.

In a clinic. Clinic appointments may be available in select cases on request. Ask during intake rather than assuming.

Telehealth and face-to-face can be mixed. Many people use in-person sessions for assessment and telehealth for follow-up. You will need a device with a camera and microphone, a reasonable internet connection and a private space.

Functional capacity assessments can also be conducted remotely, which is often the practical option for participants a long way from Brisbane. Remote psychology sessions can be combined with other Bloom services, such as dietetics or home-based therapy from the wider allied health team, so a regional participant is not forced to choose one discipline.

Contact and hours

Phone: 1300 771 465

Email: hello@bloom-healthcare.com.au

Referrals: book an appointment or make a referral

General enquiries: contact us

Hours: Monday to Thursday 7:30 am to 6:00 pm, Friday 7:30 am to 5:00 pm, Saturday by appointment

Who is eligible

To use NDIS funding for psychology you need an approved NDIS plan with funding available for therapy, and the support has to be reasonable and necessary . In practice that means it must be tied to the functional impact of your disability and to a goal written in your plan.

Common reasons psychology is funded under the NDIS include:

emotion regulation and coping skills

anxiety, low mood, trauma or adjustment related to disability

social skills and relationships

behaviour that gets in the way of participation at home, school, work or in the community

building independence and resilience

Bloom's psychology service works with people aged 6 to 90 for cognitive assessment, and the counselling service covers men, women and children. Clinicians hold expertise across clinical, counselling, developmental and behavioural psychology.

Bloom is a registered NDIS provider, so it can work with NDIA-managed, plan-managed and self-managed participants. NDIA-managed participants must use a registered provider, which rules out many private practices.

NDIS funding is not the only pathway. Bloom also accepts referrals through Medicare, Victims of Crime and private payment. If you are not an NDIS participant, say so when you call so the intake team can point you to the right stream.

What the NDIS funds, and what it does not

The support category

Psychology sits in the Capacity Building budget. Which line depends on the focus:

Improved Daily Living is the usual category. It covers one-to-one therapy, assessment, skills training, emotion regulation work, coping strategies, social skills, identity work and reports for plan review.

Improved Relationships is used where behaviour support, social interaction and relationship skills are the main focus, often alongside positive behaviour support.

Core Supports is occasionally used for ongoing support work where a plan is designed that way and capacity building funding is short.

Check which lines your plan actually holds before booking. Your plan manager or support coordinator can confirm this in a minute.

What the NDIS will not pay for

This is the part that catches people out. The NDIS is not a general mental health service. It does not fund:

general mental health treatment or symptom stabilisation. That stays with the health system, through Medicare or other clinical pathways.

short-term life stress on its own , where there is no link to disability-related functional impact.

clinical treatment that duplicates another government system's responsibility. For psychosocial disability the mental health system generally holds clinical diagnosis and treatment, while the NDIS holds the non-clinical supports that build function, independence and participation.

A psychologist can still do diagnostic assessment work under the NDIS. What the scheme resists is paying for ongoing clinical treatment of a mental health condition that the health system should be delivering.

How NDIS psychology differs from Medicare

Many people use both. The rule is that a single session is funded by one system only. You cannot claim the same appointment twice.

	Medicare Better Access	NDIS psychology
Purpose	Clinical treatment of a diagnosed mental disorder	Disability-related functional capacity and participation
How you get in	Mental Health Treatment Plan from your GP, or referral from a psychiatrist or paediatrician	NDIS plan with psychology funding, meeting reasonable and necessary
Session limit	Up to 10 individual and up to 10 group sessions per calendar year (1 January to 31 December)	Set by the funding in your plan, not by a fixed cap
Typical session content	Assessment, treatment planning, evidence-based treatment, review after the initial referral block	Functional and goal-based assessment, practical strategies for participation, skill building with carers, coordination with your support team
Cost to you	A rebate applies and the provider sets the fee, so there is usually a gap	No gap where the support is within your plan budget and claimed correctly

Mental Health Treatment Plans do not expire once created, so you do not need a new one every 12 months. Referrals are usually written in blocks, commonly up to six sessions, with a GP review before

the rest of the annual entitlement is used. From 1 November 2025 the preparation, referral and review of Mental Health Treatment Plans was linked to your MyMedicare practice or usual medical practitioner, with some exceptions for psychiatrist pathways. Medicare rebate amounts change, so confirm the current figure with Services Australia or your GP rather than relying on a number quoted on a website.

Use Medicare when the goal is symptom relief and clinical treatment. Use the NDIS when the goal is functional capacity, independence and participation.

Assessments, and what the reports are used for

Bloom's Brisbane psychology team provides cognitive assessment from age 6 to 90, along with diagnostic assessment for conditions including autism spectrum disorder, ADHD, and depressive and anxiety disorders.

Autism assessment uses the Autism Diagnostic Interview-Revised, behavioural observation, and supplementary tools such as the Empathy Quotient. It can be conducted in the home or by telehealth. Reports and recommendations are written in a neuro-affirming way, and a feedback session follows so the person and their care team understand what the results mean.

Functional capacity assessment looks at areas including quality of social interaction, emotion regulation, behavioural regulation, financial management and routine management, using psychometric screening tools that can indicate the presence and severity of symptoms and their effect on daily living. Bloom offers psychology and occupational therapy functional assessment separately, or as a joint multidisciplinary assessment and report.

A cognitive or diagnostic assessment is not a single appointment. Work of this kind commonly runs to 12 or more hours of clinician time spread across several sessions, covering history, testing, scoring, report writing and the feedback session. The exact scope depends on the referral question and the person, so confirm the plan with your clinician before it starts.

What the reports are for:

supporting an NDIS access request by evidencing functional impact

supporting a plan reassessment, by showing outcomes and progress against goals

Administrative Review Tribunal reporting and appearances, which Bloom's psychology service provides

giving your support team, school or GP a shared picture of what helps

The NDIA expects a reassessment report to explain the therapy approach and show what changed. Reports written for the NDIA should be in plain language and focus on real-life functional change, not only how someone felt in session.

What therapy looks like over time

Referral. By phone on 1300 771 465 , or through the referral form . Participants, families, carers, support coordinators, GPs, paediatricians and schools can all refer.

Intake. The team confirms the service you want, the funding stream, the service agreement, consent and privacy, and billing.

First appointment. The psychologist builds rapport, talks through what is difficult day to day, reviews the goals in your NDIS plan, gathers your history, does an initial assessment, and works out an action plan with you.

Therapy. Frequency, session length and setting are planned with you and your family, taking into account your current skills, the best environment for the goal, your preferences, and the funding available. There is no standard schedule.

Review. Goals are reviewed roughly every three to six months. Goals that are met can be replaced, and goals that no longer matter can be dropped.

Progress report. Before your plan ends, a formal review of therapy outcomes is completed against the initial assessment, and a progress report summarises the therapy provided, the outcomes achieved and the recommendations for the next plan.

Wait times vary by location and by service. Bloom states it works to keep wait times low and to get you into service as quickly as it can, but the honest answer for any given suburb is to ask when you call.

Costs

Plan-managed and NDIA-managed participants are covered by the NDIS Pricing Arrangements and Price Limits , which cap the rate for psychology and set the rules for claiming travel and non-face-to-face work such as report writing. The specific rates, travel arrangements and cancellation terms that apply to you are set out in the service agreement you sign before therapy starts. Ask for those in writing during intake, or call 1300 771 465 . If you are coming through Medicare or private payment, ask for the fee and the expected gap before your first appointment.

Psychology or positive behaviour support?

They are different services and they often run together.

Psychology works on mental health, emotional wellbeing, cognition and internal experience. It explores why something is happening: anxiety, depression, trauma, emotion regulation, relationships, life transitions, coping and resilience. It uses structured approaches such as cognitive behavioural therapy.

Positive behaviour support works on behaviours of concern and what is happening in daily life. It identifies triggers, works out what the behaviour is communicating, builds a behaviour support plan, coaches families, carers and support workers to respond consistently, and reduces the need for restrictive practices under the NDIS Quality and Safeguards framework.

Bring in a behaviour support practitioner when behaviour puts the person or others at risk, when distress or escalation is frequent, when the support team is unsure how to respond consistently, or when restrictive practices are in place or being considered.

Use both when behaviour is tied to trauma, anxiety or sensory processing, when someone is working out what a new autism or ADHD diagnosis means for them, or where an intellectual disability sits alongside a mental health condition. A common pattern is the psychologist working with the person on emotion regulation while the behaviour support practitioner works with the family and school on a consistent plan.

Psychology is usually funded under Improved Daily Living. Positive behaviour support is usually funded under Improved Relationships. Specialist behaviour support also requires the provider to be registered, regardless of how your plan is managed.

Images on this page

Text descriptions of the images shown, for readers and agents that cannot see them.

Photograph: a parent and child sitting together with a clinician during a counselling session, with the clinician holding a sheet of paper.

Bloom Healthcare logo: a green circular mark combining a crescent, a human figure, leaves and a cupped hand, beside the words "Bloom Healthcare — Services with Passion".

"We ♥ ndis" badge: a purple circle carrying the words "We ndis" with a green heart in place of the word "love".

The remaining images are decorative interface icons — the phone, envelope, clock and accessibility symbols beside the contact details, and the Facebook, Instagram and LinkedIn icons — which repeat information already given in text and carry no additional meaning.

Common questions about NDIS psychology in Brisbane

Do you come to my house, or do I go to a clinic?

Bloom's psychologists come to you. Home, school, workplace and other community settings are the primary delivery model across Brisbane and South East Queensland. Clinic appointments may be available in select cases on request.

Which suburbs do you cover?

Brisbane and surrounds, Ipswich, Logan, North Lakes, Redland Bay, Springfield, Gold Coast, Robina and the Sunshine Coast, with services also available in Bundaberg, Townsville and Cairns. Check the location guide or call 1300 771 465 for your specific area.

Can I get psychology by telehealth if I live outside Brisbane?

Yes. Telehealth is an approved NDIS delivery method where it is clinically appropriate, and it is used specifically to reach participants in regional areas. Autism assessment and functional capacity assessment can both be delivered remotely.

Which part of my NDIS plan pays for psychology?

Usually Capacity Building — Improved Daily Living. Improved Relationships is used where behaviour, social interaction and relationships are the main focus. Core Supports is occasionally used depending on how the plan was written. Confirm with your plan manager, support coordinator or Local Area Coordinator.

Will the NDIS fund therapy for my depression or anxiety?

It depends on the link to your disability. The NDIS funds psychology where it addresses disability-related functional impact and plan goals. It does not fund general mental health treatment or symptom stabilisation, which sits with the health system through Medicare. Many people run both pathways at once for different purposes.

Can I use Medicare and the NDIS at the same time?

Yes, but not for the same session. Better Access provides up to 10 individual and up to 10 group sessions per calendar year with a Mental Health Treatment Plan or a psychiatrist or paediatrician referral. NDIS funding is set by your plan. Keep the purposes separate: clinical treatment on Medicare, functional capacity on the NDIS.

Do I need a GP referral?

Not for NDIS-funded psychology. You, a family member, a carer, a support coordinator, a school or a health professional can refer directly. A GP referral and a Mental Health Treatment Plan are required if

you want to claim through Medicare.

Can I get an autism or ADHD assessment through the NDIS?

Diagnostic and cognitive assessment is provided under the NDIS, typically funded under Capacity Building — Improved Daily Living, and the report is often what a planner needs to make a decision. Whether your current plan has the funding for it is a separate question. Check your plan first, then call 1300 771 465 to discuss scope.

How long will the assessment take?

Assessments of this kind commonly involve 12 or more hours of clinician time across several appointments, covering history, testing, scoring, report writing and a feedback session. The exact scope depends on the referral question. Ask for the plan and the timeframe in writing before it starts.

How often will I see a psychologist?

There is no set frequency. It is planned with you based on your goals, your current skills, the setting that suits the goal, your preferences and the funding in your plan. Progress is reviewed every three to six months.

What report will I get for my plan review?

A progress report summarising the therapy provided, the outcomes achieved during the plan period, and recommendations for the next plan. It is written in plain language for the NDIA and focuses on functional change. Bloom's psychology service also provides Administrative Review Tribunal reporting and appearances.

What should I have ready when I call?

Your NDIS number, plan start and end dates, plan management type, the goals in your plan, a short description of what is difficult day to day, any recent reports or diagnoses, your suburb, and whether you want in-home, community or telehealth sessions.

What service delivery options are available for psychology and counselling in Brisbane?

Bloom Healthcare offers in-home therapy delivered in a client's own residence, community-based services in schools, day programs, and community settings, and Telehealth options for remote consultations.

What types of psychology and counselling services does Bloom Healthcare provide in Brisbane?

Services include Individual and Family Counselling, Cognitive Behavioural Therapy (CBT), Trauma Counselling, Cognitive and Diagnostic Assessments (including for Autism Spectrum Disorder, ADHD, anxiety, and depression), Adjustment to Disability Support, and Emotional Regulation Support.

What funding options can be used to access Bloom Healthcare's Brisbane psychology and counselling services?

Funding pathways include NDIS for eligible participants, Medicare Better Access through Mental Health Care Plans with GP referrals, Private Payment for self-funded options, and Aged Care funding for older adults.

Who delivers Bloom Healthcare's psychology services in Brisbane?

Bloom Healthcare's psychology team in Brisbane is comprised of AHPRA-registered psychologists.

Who is eligible for Bloom Healthcare's psychology and counselling services in Brisbane?

The services are designed to support individuals with disabilities, older adults, and general clients seeking mental health support through various funding pathways.

How can someone start receiving psychology support from Bloom Healthcare in Brisbane?

Individuals can book an in-home or Telehealth session to start personalised psychology support from Bloom Healthcare.

What is Bloom Healthcare's contact information?

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

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