Regional and Remote Allied Health | Bloom Healthcare

Canonical: https://bloom-healthcare.com.au/services/regional-remote-allied-health/

Details:

Bloom Healthcare helps people in regional, rural and remote Australia get allied health when distance, travel or a shortage of local clinicians makes support hard to reach. Depending on the service and your location, that can mean telehealth , an available local community clinician , or a blended arrangement of periodic in-person visits with online sessions in between. Funding comes through the same streams as in a city (the NDIS, Support at Home, Medicare or private payment), although NDIS price limits differ for remote and very remote areas. Bloom does not have a clinic or clinician in every town, so every enquiry starts with your postcode and the discipline you need: call 1300 771 465 , email hello@bloom-healthcare.com.au , or make a referral .

The useful question is not "can I get telehealth" but "which parts of what I need can be done remotely, and which parts need someone in the room". Below you will find what Bloom can and cannot promise outside the major cities, how each delivery option works, which assessments need in-person input, how funding and travel costs work, and how to prepare a referral that can be answered quickly.

Who this is for

Contact Bloom if:

you live in a regional, rural or remote area

travel makes appointments difficult

you cannot find a suitable local clinician

you want to explore telehealth or a blended approach

your support network could join online sessions

It suits children, adults and older people, NDIS participants, Support at Home clients, and people using Medicare or private funding.

What Bloom can promise, and what it cannot

Be clear about this from the start, because it saves time:

Bloom does not have a physical clinic or clinician in every regional town.

National reach does not mean every discipline is available in person in every postcode. Availability differs by discipline as well as by area, and changes with clinician capacity.

No standing outreach schedule is promised. Outreach or local visits depend on actual clinician availability, and logistics and costs must be confirmed for each case.

What Bloom does do is check each enquiry for clinical suitability, required expertise and available clinicians, then agree the scope, fees, delivery setting and timing before the service begins.

Bloom delivers services across New South Wales, Queensland, South Australia, Tasmania, Victoria, Western Australia and the Australian Capital Territory. Regional areas named in Bloom's location guides include Bundaberg, Townsville and Cairns in Queensland, Geelong in Victoria, Wollongong and Newcastle in New South Wales, and Launceston and Devonport in Tasmania. A named area is a

starting point for an enquiry, not a guarantee of a home visit at every address. See all locations .

Three ways support can be delivered

Telehealth

Telehealth connects you with a Bloom clinician by video or telephone. Online therapy, coaching, education, planning, review and some assessment components can be delivered this way when they are clinically suitable. The clinician still tailors the session to your goals, documents it and works to the same professional standards. See telehealth .

A local community clinician

Ask whether an appropriate Bloom clinician is available for your postcode. Bloom's model is mobile, so where a clinician is available they travel to your home, school, workplace, day program or community setting rather than asking you to attend a clinic.

Blended service planning

A blend of periodic in-person visits with telehealth in between usually gets therapy started sooner than waiting for a clinician to be in town, and keeps it going between visits. In-person input is planned for the parts that need it, when feasible and appropriate. This is not a lesser service; it is often the most practical way to keep therapy consistent over long distances.

What works remotely, and what needs someone in the room

Works well by telehealth

Programme progression: reviewing and adjusting a home exercise or practice programme, and checking technique on movements that are safe to observe on video

Coaching and education: teaching a family member, carer or support worker to run a strategy between sessions, in the room where it will be used

Planning and goal setting

Short, frequent reviews that would not justify a travel charge

Keeping therapy going between periodic visits

Including other people from different places, such as family, a support coordinator or a teacher, with consent

Usually needs in-person input

Home safety assessments , where the clinician needs to see the actual bathroom, steps and kitchen

Transfer and mobility assessments where falls risk or home layout is the concern

Equipment and assistive technology prescription , including seating and anything involving measurement, fitting or a trial

Hands-on examination or treatment where clinically appropriate

Community sessions built around a real destination

Ask about the specific assessment you need, not about telehealth in general. Some assessments can be completed online and some cannot, and Bloom checks whether the required observation, trials or measurements can be completed reliably before agreeing to a remote approach.

Local supporters can be part of the plan

With appropriate consent and an agreed purpose, local supporters can join suitable sessions : a family member, carer, support worker, teacher or another professional. A person who is physically present can move the camera, demonstrate a transfer or be coached directly. In remote areas this is often how strategies keep working between sessions. Bloom's approach is to build the skills and confidence of the people who spend the most time with you.

Getting to the right service first time

Bloom directs each enquiry to the relevant allied health discipline rather than a generic booking. Describe the difficulty rather than guessing the profession. In a regional setting, getting the starting point right matters more, because a second attempt may mean waiting for the next visit.

Disciplines you can ask about include occupational therapy , physiotherapy , speech pathology , psychology and counselling , exercise physiology , dietetics , positive behaviour support and paediatric therapy . All use telehealth for the parts of their work that suit it; what differs is the proportion. A dietetics review may be almost entirely remote, while an occupational therapy home assessment cannot be.

How regional and remote support is funded

NDIS

Telehealth is a delivery method, not a separate service, and is funded the same way the in-person session would be, usually from Capacity Building, Improved Daily Living . The NDIS Pricing Arrangements and Price Limits set the rules for travel, and the NDIS pricing schedule includes separate national, remote and very remote price limits for each support item. If your plan is NDIA-managed you must use a registered provider; Bloom is registered (registration no 4-JR6F5KX, provider no 4050148863).

Support at Home

For older Australians, Support at Home replaced the Home Care Packages Program and the Short-Term Restorative Care Programme on 1 November 2025 . Allied health sits in the Clinical Supports category, which is fully funded by the Australian Government. Access begins with an aged care assessment through My Aged Care on 1800 200 422 . See Support at Home and aged care services .

Medicare

Under the Better Access initiative , eligible people can use individual telehealth mental health services no matter where they live, where it is safe and clinically appropriate. You need a mental health treatment plan (or a psychiatrist assessment and management plan) and a valid referral, for example from your GP. Bloom is not a bulk-billing service, so a gap fee applies. See Medicare and the Department of Health, Disability and Ageing's Better Access information .

Private

Privately funded sessions are available, and any private health insurance benefit depends on your policy. See private allied health .

Funding information is general. Coverage and rebates are confirmed for your particular service before you book.

Travel and costs

Travel time is priced into in-home and community sessions. For a regional address it is a larger part of the cost than in a capital city.

Any proposed travel, accommodation or related charges must be explained and agreed before services begin, where they apply.

A telehealth session does not carry the travel component. If cost is part of the decision, ask for the comparison, and ask whether the appointment is clinically suitable for remote delivery.

For Medicare, private health and privately funded services , Bloom's published fees include standard travel charges unless something different is agreed in advance.

Your fees, travel and cancellation terms are written into your service agreement, which is signed before any service or billing. Bloom's general cancellation position is 48 hours' notice, but it varies with the rules of each funding body. See pricing .

Setting up for telehealth

Connection and equipment: a device with a camera, a workable internet connection, and a private, accessible space where you will not be interrupted. Discuss any connection limits at enquiry.

Set up where the activity happens. If the goal is about showering, a phone in the bathroom doorway shows more than a laptop at the kitchen table.

Have the equipment in the room: walking aid, splint, communication device, or the chair that is hard to get out of.

Tell the clinician if it is not working. If the connection keeps dropping or the session is missing what you need, say so; the plan can change to include in-person input.

Interpreters and accessible formats can be arranged; ask when you book.

How it works, step by step

Share the service and postcode. Tell Bloom the need, the location, the funding pathway and any access preferences.

Clinical suitability is checked. Bloom confirms the service scope, an available clinician and a suitable delivery method.

A member of the team is in contact within 24 hours of a referral. A welcome pack and intake form follow, and nothing is scheduled until the intake form is returned.

Arrangements are agreed. Technology, any travel, costs and appointments are discussed and written into a service agreement before services begin.

First appointment. Bloom aims to hold the initial meeting within 5 business days where possible.

Access is reviewed over time. The approach is adjusted if your needs or local availability change.

Full detail of each stage is on your journey with Bloom .

Reviewing progress, and the limits of remote assessment

Agree practical goals and how they will be reviewed in your everyday setting. Goal Attainment Scaling, suitable functional measures and your own feedback may guide support, with the limits of remote assessment considered explicitly. Remote sessions make frequent, short reviews practical, so progress can be checked and adjusted more often than travel would allow.

Agree up front when reviews will happen, how information will be shared, and when an in-person assessment or another provider may be needed. Delivery convenience should support the clinical purpose, not replace it.

Common questions about regional and remote allied health

Do you have a clinic in every regional town?

No. Bloom does not have a physical clinic or clinician in every town. Bloom's model is mobile and community-based, with telehealth where it suits, and each enquiry is checked against the postcode and discipline. Clinic appointments are considered case by case.

Can I receive therapy by telehealth?

It may be suitable, depending on the service, your goals, your technology and your clinical needs. Telehealth works well for therapy, coaching, education, planning and review. The clinician confirms the approach before booking.

Can assessments happen online?

Some components can. Hands-on examination, equipment trials and home measurements may need in-person input. Ask about the specific assessment you need, and Bloom will check whether it can be completed reliably at a distance.

Do you provide outreach visits?

You can enquire about local or in-person options. Availability, logistics and costs must be confirmed for each case, and no scheduled outreach service is promised. Where in-person input is needed, a blended plan with telehealth in between is often the practical answer.

Can a local support worker join?

Yes, with appropriate consent and an agreed purpose. Local supporters such as a family member, carer, support worker or teacher may join suitable sessions. They can often be coached directly, which helps strategies continue between sessions.

Will telehealth cost less than a home visit?

Often, because travel is priced into in-home and community sessions and a telehealth session does not carry that component. Under the NDIS, travel rules and remote price limits are set by the NDIS Pricing Arrangements. Ask Bloom for the comparison for your service and postcode.

Is telehealth funded by the NDIS?

Yes. Telehealth is a delivery method, not a separate service, and is funded the same way the in-person session would be, usually from Capacity Building, Improved Daily Living. Check that your plan has funds in the relevant category.

Can I use Medicare for telehealth psychology from a remote area?

Under Better Access, eligible people can access individual telehealth mental health services no matter where they live, where it is safe and clinically appropriate. You need a mental health treatment plan and a valid referral, such as from your GP. Bloom is not a bulk-billing service, so a gap fee applies.

How do I check availability?

Provide the discipline or assessment required and the postcode through the enquiry or referral pathway, or call 1300 771 465. Include the town, any access details such as road access, and your funding type.

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 workforce retention figures are organisation-wide, so they do not guarantee the same clinician at every appointment.

How will you review whether support is helping me?

You agree practical goals and ways to review them in your everyday setting. Goal Attainment Scaling, suitable functional measures and your feedback may help guide support, with the limits of remote assessment considered explicitly.

More on regional and remote access

Telehealth

All Bloom locations

Allied health in Queensland

Pricing and fees

How to make a referral

Aged care services

Does Bloom Healthcare have a physical clinic in every regional town?

No. Bloom Healthcare does not have a physical clinic or clinician in every town. Its model is mobile and community-based, with telehealth used where it suits, and each enquiry is checked against the postcode and discipline. Clinic appointments are considered case by case.

Can I receive therapy by telehealth from Bloom Healthcare?

It may be suitable, depending on the service, your goals, your technology and your clinical needs. Telehealth works well for therapy, coaching, education, planning and review, and the clinician confirms the approach before booking.

Can assessments be completed online with Bloom Healthcare?

Some components can be completed online, but hands-on examination, equipment trials and home measurements may need in-person input. You should ask about the specific assessment you need, and Bloom Healthcare will check whether it can be completed reliably at a distance.

Does Bloom Healthcare provide outreach visits to regional and remote areas?

You can enquire about local or in-person options, but availability, logistics and costs must be confirmed for each case, and no scheduled outreach service is promised. Where in-person input is needed, a blended plan with telehealth in between is often the practical answer.

Can a local support worker or family member join a telehealth session?

Yes, with appropriate consent and an agreed purpose. Local supporters such as a family member, carer, support worker or teacher may join suitable sessions, and they can often be coached directly, which helps strategies continue between sessions.

Does telehealth cost less than a home visit?

Often, because travel is priced into in-home and community sessions while a telehealth session does not carry that component. Under the NDIS, travel rules and remote price limits are set by the NDIS Pricing Arrangements, and you can ask Bloom Healthcare for a comparison for your service and postcode.

Is telehealth funded by the NDIS?

Yes. Telehealth is a delivery method, not a separate service, and is funded the same way an in-person session would be, usually from Capacity Building, Improved Daily Living. You should check that your plan has funds in the relevant category.

Can I use Medicare for telehealth psychology if I live in a remote area?

Under Better Access, eligible people can access individual telehealth mental health services no matter where they live, where it is safe and clinically appropriate. You need a mental health treatment plan and a valid referral, such as from your GP. Bloom Healthcare is not a bulk-billing service, so a gap fee applies.

How do I check whether a service is available in my area?

Provide the discipline or assessment required and the postcode through the enquiry or referral pathway, or call 1300 771 465. Include the town, any access details such as road access, and your funding type.

Can I request continuity with the same clinician?

Yes. You can tell Bloom Healthcare your preferences, and it 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 workforce retention

figures are organisation-wide, so they do not guarantee the same clinician at every appointment.

How does Bloom Healthcare review whether remote or regional support is helping?

You agree practical goals and ways to review them in your everyday setting. Goal Attainment Scaling, suitable functional measures and your feedback may help guide support, with the limits of remote assessment considered explicitly.

What delivery methods does Bloom Healthcare use for regional and remote clients?

Bloom Healthcare supports regional and remote clients through telehealth, locally available clinicians, or a blended delivery plan, confirmed by postcode and discipline, with service available across Australia.