NDIS Emergency Management Policy | Bloom Healthcare

Canonical: https://bloom-healthcare.com.au/emergency-management-policy/

Details:

If an emergency affects your services, Bloom Healthcare will contact you. You will either be told not to attend a scheduled service, or told what the alternative arrangement is, which is often telehealth. You should have an individual emergency plan built around your own medical, mobility and communication needs, and you should be part of writing it. In a life-threatening emergency, call 000 first. For anything else, Bloom's number is 1300 771 465 .

Easy Read version of the emergency management policy

The policy

Purpose

At Bloom Healthcare, we are committed to ensuring the health, safety, and well-being of all NDIS participants during emergency situations. This policy outlines the procedures for planning, responding, and ensuring continuity of supports during emergencies, such as natural disasters, health crises (including pandemic), and other emergencies. The aim is to safeguard participants' well-being and ensure their needs are met during times of crisis.

Scope

This policy applies to all Bloom Healthcare staff, service providers, and partners involved in the delivery of services to NDIS participants. It addresses emergencies such as bushfires, floods, cyclones, pandemics, and other emergencies that may affect participants and disrupt their normal services.

Objectives

Ensure the ongoing health, safety, and well-being of NDIS participants during emergencies.

Guarantee the continuity of essential services and supports that participants rely on during emergencies.

Empower participants by involving them in emergency preparation, fostering a sense of agency and control in crisis situations.

Provide clear guidance for staff and participants on communication, PPE usage, and emergency response training.

Ensure the ongoing use of telehealth and other alternative support methods when appropriate.

Emergency management planning

Comprehensive emergency planning. Good emergency management requires careful planning to prepare for and respond to emergencies. At Bloom Healthcare, we will ensure that:

Personal emergency plans: in the event of emergency every participant will have an individualised emergency plan tailored to their unique needs, detailing support modalities and any relevant requirements including the usage of PPE if necessary, with the objective to ensure their safety and well-being.

Regular review and testing: these personal emergency plans will be regularly reviewed and updated during the course of the emergency, at a frequency to be determined when the initial plan is completed.

Involvement of participants: we believe it is essential to include participants in the emergency planning process, as well as any supports such as plan nominees and support workers. This ensures that each participant's unique needs and preferences are considered, and it fosters their understanding of emergency procedures, giving them a sense of control over their own safety.

Individual needs and preparation. Emergency plans will specifically account for individual needs such as:

Medical needs: medications, medical equipment, and healthcare protocols.

Mobility needs: support for mobility issues, whether it be assistance during evacuation or adapting living spaces for accessibility.

Communication needs: consideration of communication preferences and ensuring accessible formats for information.

Communication with support networks.

To participants: emergency plans will be communicated clearly to each participant in a format that best suits their individual needs (for example verbal, written, or visual aids).

To support networks: participants' families, guardians, and other support networks will be informed and involved in the planning and response process to ensure they understand their roles in an emergency.

To staff: Bloom Healthcare staff will be well-trained and kept informed of their responsibilities during emergencies. Any changes or updates to emergency plans will be promptly communicated to staff via email and internal notifications.

Types of emergencies covered

Natural disasters: bushfires, floods, cyclones, severe storms, and earthquakes.

Health crises: pandemics or other infectious disease outbreaks.

Other emergencies: power outages, accidents, or any unforeseen disruptions to services.

Communication protocols

Availability of emergency plans. Bloom Healthcare will include the emergency management policy in the welcome pack provided to new participants, and the policy will be available on the Bloom Healthcare website for easy access by all participants, their families, and staff. If the emergency management plan needs to be activated, emails and other communication channels will be used to notify participants, staff, and support networks promptly.

Effective communication during emergencies. Bloom Healthcare will ensure real-time updates and clear communication with participants and staff during an emergency. This includes information on steps to take, locations to evacuate to, and any changes to service delivery or schedules.

Please note that individualised emergency management plans are to only be used in the event of disaster, however can be used at the clinician's discretion.

Training and preparedness

PPE training and implementation. All Bloom Healthcare staff will be trained in the proper use of Personal Protective Equipment (PPE) as part of our emergency preparedness. This includes mandatory initial training covering proper PPE use during emergencies, completed through our existing infection control e-learn module, and ongoing annual refresher training to ensure staff are up to date with the latest procedures and protocols.

Training for participants. Bloom Healthcare will consider providing training resources to participants on staying safe during emergencies. This training may include information on emergency preparedness, how to use telehealth services, and how to respond to different types of emergencies.

Telehealth and continuity of care

During emergencies, Bloom Healthcare will leverage telehealth to ensure that critical support services continue if there is an inability to deliver face to face services. This includes virtual check-ins, consultations, and remote delivery of services where in-person visits are not possible.

Continuity of critical supports

Bloom Healthcare is committed to maintaining critical supports during emergencies. This includes:

Ensuring essential services: personal care, healthcare, and other critical services will continue without disruption, either through on-site or remote support.

Alternative service delivery: if in-person services are disrupted, Bloom Healthcare will make alternative arrangements, including reassignment of staff, the use of telehealth, or other technology-based solutions.

Review and continuous improvement

Bloom Healthcare will conduct regular reviews and testing of emergency management plans to assess their effectiveness and ensure they remain relevant. This may include drills and emergency simulations to test the plans, and collecting feedback from staff and participants after each test or real emergency to improve future responses.

Lessons learned from each emergency will be used to refine and enhance the preparedness and response strategy. This includes regularly seeking feedback from staff, participants, and support networks.

Training

All managers and clinicians will receive training on this policy during their induction. Bloom Healthcare will provide regular training to ensure that all employees and contractors are aware of this policy and understand their responsibilities.

Monitoring and evaluation

Bloom Healthcare will monitor and evaluate the effectiveness of this policy on an ongoing basis, using feedback from employees, clients, and customers, as well as data on referral allocation time frames, allocation compliance and waitlist management.

The Director/s and management team will be responsible for ensuring that the policy is implemented effectively, and that progress is tracked and reported to relevant stakeholders. Employees and contractors are encouraged to provide feedback and suggestions for improving the policy and related procedures.

Review

This policy will be reviewed annually to assess its effectiveness and compliance with legal and regulatory requirements. Any necessary revisions or updates will be made in a timely manner and recorded on the Policy and Procedure Register.

What this means for you

Your personal emergency plan

The centre of the policy is a plan written for you, not a generic evacuation notice. It is built around three areas: your medical needs (medications, equipment you depend on, health protocols that have to keep running), your mobility needs (what help you would need to evacuate, and what your living space needs in order to stay usable if you cannot leave), and your communication needs (how you prefer to receive information, in a format you can actually use).

Two things about how the plan is made matter as much as what is in it. First, you are meant to be part of writing it, along with anyone who supports you. A plan made about you without you will not survive a real emergency, because nobody will know the details that only you know. Second, the plan is reviewed and updated, including during an emergency as circumstances change.

If you do not have one and you think you need one, ask. Call 1300 771 465 .

What you can do before anything happens

Give Bloom emergency contact details. Provide the name and number of the person or people to contact on your behalf. These are recorded in your service agreement and should be reviewed as your services continue. Update them when they change; an out-of-date contact is worse than none.

Write down what you depend on. Medications and doses, equipment, who supplies it, and what happens if the power goes out. If you rely on powered equipment, work out your back-up plan before you need it, not during a blackout.

Say how you want to be contacted. If phone calls are hard for you, if you need Easy Read, if you use an interpreter or Auslan, or if a family member should be called instead of you, make sure that is written down.

Talk it through with the people around you. Families, guardians and support networks are meant to be informed and involved so they know their role. That only works if the conversation has actually happened.

Know your local warnings. Bloom's plan covers your services. It does not replace your state emergency service, fire service or council warnings, which are the authority on evacuating your area.

Telehealth, and what it can and cannot replace

Telehealth is the main way therapy keeps going when face-to-face visits are not possible. It is clinically effective across a range of allied health services including physiotherapy, occupational therapy, speech pathology and psychology.

It does have limits. Not every assessment or intervention suits remote delivery, and some assessments have to be done in person. Whether a particular session works by telehealth is a clinical decision your therapist should make with you, not a default.

What you need for a telehealth session: a device with a camera and microphone; an internet connection that holds up; a quiet, well-lit, private room; the device positioned so the clinician can see

you clearly; any documents or equipment ready beforehand; and a few minutes before the start to check sound and camera. If you have never used it, say so — a practice call beforehand takes the pressure off.

If something goes wrong

Immediate danger. If there is an immediate risk to life, harm or injury, call 000 . That comes before contacting any provider.

Your supports have stopped. Contact your support coordinator or plan manager to arrange alternatives. Note the date your services stopped and the effect it had on you. Under the NDIS Practice Standards, a provider must help you move to another provider, and must notify the NDIS Commission of service changes.

You feel unsafe, or the response was not good enough. Raise it with Bloom first if you can. Providers must act promptly when someone raises a concern about the quality and safety of supports. Threatening someone or trying to stop them complaining is against the law and carries penalties.

Going to the regulator. You can report an issue or complain directly to the NDIS Quality and Safeguards Commission , and you can do it anonymously. Anyone can do this: participants, family, carers, workers or providers. You can bring an advocate; see the advocacy policy for how to find a free independent one.

Serious incidents get reported whether or not you complain. Registered providers must notify the NDIS Commission of reportable incidents, which include death, serious injury, abuse or neglect, unlawful sexual or physical contact or assault, sexual misconduct, and unauthorised restrictive practices. Most of these must be notified within 24 hours , with a further form within five business days. Unauthorised restrictive practices that have not caused immediate harm are notified within 5 business days . See the incident management policy .

If you receive aged care rather than NDIS supports

The Aged Care Act 2024 and the seven strengthened Aged Care Quality Standards both commenced on 1 November 2025 . Providers must be registered with the Aged Care Quality and Safety Commission to receive government funding, and are audited against those standards.

The Act is rights-based. You have the right to safe and quality care, to be treated as an individual, to have your decision-making respected, and to have your wishes, needs and preferences communicated in a format that works for you. You also have the right to speak up if emergency procedures are not being followed, and to be protected from any punishment for doing so.

Common questions about emergencies and your supports

Who contacts me if an emergency affects my appointment?

Bloom does. You will be contacted either to be told not to attend, or to be told what the alternative arrangement is. Activation notices go out by email and other channels to participants, staff and support networks.

Do I have to have a personal emergency plan?

The policy provides for an individual plan tailored to your needs in an emergency. If you do not have one and you think your situation needs one, ask on 1300 771 465 . Individual emergency management plans are intended for use in a disaster, and can also be used at a clinician's discretion.

What emergencies does this cover?

Natural disasters including bushfires, floods, cyclones, severe storms and earthquakes; health crises such as pandemics and infectious disease outbreaks; and other disruptions including power outages and accidents.

Will my therapy just stop?

The commitment is that critical supports continue, either on-site or remotely. Where face-to-face visits are not possible, telehealth and other alternative arrangements are used, including reassigning staff.

Is telehealth as good as an in-person session?

For many allied health services it is clinically effective and it keeps your therapy continuous. Some assessments and interventions do need to be face to face. Your clinician should decide the mode with you rather than defaulting to one.

Who do I call first in a life-threatening emergency?

1. Then let Bloom know when it is safe to do so.

Who else should have a copy of my emergency plan?

Anyone with a role in it: family, guardian, plan nominee, support workers, and anyone else you rely on. A plan only one person has read is not a plan.

What if my emergency contact details have changed?

Tell Bloom straight away. Emergency contacts are recorded in your service agreement and are meant to be reviewed as your services continue.

What if the emergency response was handled badly?

Raise it with Bloom first if you feel able to. If that does not resolve it, complain to the NDIS Quality and Safeguards Commission, or the Aged Care Quality and Safety Commission if you receive aged care. Both accept complaints from family members and carers, not only from the person receiving services, and you can bring an advocate.

Can I get this information in Easy Read or another language?

Yes. The Easy Read version of the policy is linked at the start of this page, and information should be provided in a format that suits your communication needs. Ask if you need an interpreter or a different format.

Where do I get the official warnings for my area?

From your state or territory emergency service, fire service and local council. Bloom's plan covers your supports; the emergency services are the authority on what to do about the emergency itself.

Contact

Registration no: 4-JR6F5KX Provider no: 4050148863

Phone: 1300 771 465

Email: hello@bloom-healthcare.com.au

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

What does Bloom Healthcare's Emergency Management Policy cover?

Bloom Healthcare's NDIS Emergency Management Policy outlines disaster planning, response steps, telehealth support, and continuity of care for participants during emergency situations.

What types of emergencies does the policy address?

The policy addresses natural disasters (bushfires, floods, cyclones, severe storms, and earthquakes), health crises (pandemics and infectious disease outbreaks), and other emergencies (power outages, accidents, and other unforeseen service disruptions).

Who does the Emergency Management Policy apply to?

The policy applies to all Bloom Healthcare staff, service providers, and partners involved in delivering services to NDIS participants.

What are the key objectives of Bloom Healthcare's emergency management policy?

The key objectives are to ensure ongoing health, safety, and well-being of participants during emergencies; guarantee continuity of essential services and supports; empower participants by involving them in emergency preparation; provide clear guidance for staff and participants on communication, PPE usage, and emergency response training; and ensure ongoing use of telehealth and alternative support methods when appropriate.

What is a personal emergency plan under this policy?

A personal emergency plan is an individualized emergency plan developed for each participant, tailored to their unique needs, including medical needs (medications, medical equipment, and healthcare protocols), mobility needs (support for mobility issues and accessibility considerations), and communication needs (accessible formats for information delivery).

How often are personal emergency plans reviewed?

Personal emergency plans are regularly reviewed and updated during emergencies.

Who is involved in developing and responding to a participant's emergency plan?

Participants, their families, guardians, and support networks are actively involved in the planning and response process to ensure their understanding and agency in emergency procedures.

Does Bloom Healthcare use telehealth as part of its emergency management approach?

Yes, the policy ensures the ongoing use of telehealth and alternative support methods when appropriate to maintain continuity of care during emergencies.

How can someone contact Bloom Healthcare regarding this policy or its services?

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

Who contacts me if an emergency affects my appointment?

Bloom does. You will be contacted either to be told not to attend, or to be told what the alternative arrangement is. Activation notices go out by email and other channels to participants, staff and support networks.

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