NDIS & Aged Care Allied Health in Adelaide | Bloom

Canonical: https://bloom-healthcare.com.au/locations/adelaide/

Details:

Bloom Healthcare delivers mobile allied health across metropolitan Adelaide. A clinician travels to you rather than asking you to attend a clinic, which usually means your home, but can equally mean a school, a workplace, a day program or another community setting. Telehealth is available where travel is the obstacle rather than the clinical need.

Adelaide sits in a long north-south corridor with the hills on one side and the coast on the other, so the practical question here is rarely "do you cover Adelaide" and almost always "can someone reach my address for the discipline I need, and when". This page explains how that gets answered, what the first appointment involves, and what to have ready so the enquiry does not stall. To check an address, call 1300 771 465 or email hello@bloom-healthcare.com.au .

Areas across metropolitan Adelaide

Enquiries are regularly taken from across the metro area, including:

Adelaide and the inner suburbs

Salisbury and Mawson Lakes in the north

Highbury and Magill in the north-east and the foothills

Seaton and Henley Beach on the western coastline

Blackwood and Stirling in the Adelaide Hills

Morphett Vale and Seaford in the south

Treat that as a guide to the shape of the coverage, not a promise about a specific street. Availability is a travel radius around where individual clinicians are based, and it differs by discipline: a speech pathologist may be available in a suburb where an exercise physiologist is not, and the position changes as clinician capacity changes. A suburb name on its own does not establish availability, which is why the first question on any enquiry is the exact postcode and the discipline you need.

The hills suburbs are worth a specific mention. Blackwood and Stirling are inside the metro area on a map, but the drive from a northern or coastal base is not a metro drive, and that affects both scheduling and the travel component of the cost. If you are in the hills, ask about appointment length and the likely day of the week rather than assuming any slot will work.

If your address sits outside the metro area, say so when you call. Coverage beyond Adelaide is assessed case by case — see the broader South Australia guide for how that is handled.

Which funding stream applies to you

The funding pathway usually matters more than the postcode, because it decides what can be arranged, who approves it and who pays.

NDIS participants. Allied health is normally funded from the Capacity Building budget under Improved Daily Living. You do not need a GP referral to start an NDIS allied health enquiry. If your plan is NDIA-managed you must use a registered provider, and Bloom Healthcare is registered (Registration

no 4-JR6F5KX, Provider no 4050148863). Self-managed and plan-managed participants can use either registered or unregistered providers. The NDIS page sets out the detail.

Older Australians. In-home aged care is funded through the Support at Home program, which 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. Access starts with an aged care assessment through My Aged Care on 1800 200 422 — Bloom does not decide anyone's funding, and no provider can. See the Support at Home hub and aged care services .

Medicare and private. Psychology and counselling can be accessed under a valid referral, and self-funded arrangements are available where no plan is in place. See Medicare services , pricing and the FAQ .

Which disciplines you can ask about in Adelaide

The team covers occupational therapy , physiotherapy , speech pathology , psychology and counselling , exercise physiology , dietetics , positive behaviour support and paediatric therapy .

You do not need to work out which discipline you need before you call. Describe what has become harder — getting in and out of the shower, being understood on the phone, managing the back steps, eating safely, getting out of the house — and the intake team will suggest a starting point. Choosing the wrong discipline is one of the most common reasons an enquiry goes nowhere, and it is avoidable.

Where more than one discipline is relevant, say so. A person whose mobility and confidence have both dropped after a fall may need physiotherapy and occupational therapy, and sometimes psychology as well; arranging that as one enquiry is faster than three separate ones.

How a first appointment runs

The first appointment is an assessment rather than treatment. The clinician looks at what you are trying to do, what is getting in the way, and what would make a measurable difference, then develops an action plan with you.

For occupational therapy especially, the home itself is half of what is being assessed: the step at the back door, the width of the bathroom doorway, where the light switches sit, how the kitchen is laid out, whether there is somewhere safe to sit while dressing. That is the main reason the service is mobile rather than clinic-based — a clinic room tells a therapist very little about the environment you actually live in.

Expect the clinician to ask about the last few weeks rather than the last few years: what you stopped doing, what you now do differently, what you are avoiding. Those answers shape the plan more than a diagnosis does.

Travel, setting and cost

Travel time is priced into in-home and community sessions, so the delivery setting affects what you are charged. This is worth understanding rather than guessing. Ask for an estimate before services begin, check it against the service agreement, and ask specifically how travel is treated for your suburb.

If cost matters, ask whether telehealth or a different setting is clinically appropriate for the specific assessment you need. For some assessments it genuinely is, and for others it is not, and the honest answer depends on the assessment rather than on a general policy.

When telehealth makes sense inside a city

Telehealth is usually discussed as a regional solution, but in a metropolitan area it solves different problems: a carer who cannot take a second morning off work, a person whose fatigue makes a long face-to-face session unproductive, a review that genuinely only needs twenty minutes, or a family member in another suburb who needs to be part of the conversation.

Programme progression, coaching, education for families and carers, planning and check-ins between visits all work well remotely. What does not work remotely is anything where the physical environment or hands-on assessment is the point — home safety, transfers, falls risk, equipment prescription. Ask at booking about the specific assessment rather than about telehealth in general.

You will need a device with a camera, a workable internet connection and somewhere private for the session.

Children, school and early childhood in Adelaide

For children, therapy is usually delivered where the child already spends their day: home, childcare, preschool or school. Sessions held at a school need the school's agreement and the family's consent arranged in advance, so mention it on the first call. It adds a step that is much easier to organise up front than retrospectively.

The NDIS early childhood approach applies to children younger than 9 . Children younger than 6 with developmental delay can access support without a formal diagnosis, and children aged 6 to 9 with an identified disability are eligible. Paediatric therapy covers what is available at each age, and Thriving Kids covers the newer programme and what is and is not yet confirmed about it.

Aged care in Adelaide

Under Support at Home, allied health is a Clinical Support. The practical starting point is an aged care assessment arranged through My Aged Care, not through Bloom. Where allied health forms part of an approved support plan, the disciplines most often involved are occupational therapy for equipment, home safety and daily activities, physiotherapy for mobility, balance and falls prevention, and exercise physiology for strength and endurance.

Assistive technology and home modifications run through a separate pathway with their own funding, so a person does not need to save up their ongoing budget to get approved equipment. Home modifications must be prescribed by an occupational therapist.

What to have ready when you call

The postcode of the address where support would be delivered

The discipline you think you need, or a plain description of the difficulty

Your funding type , and for NDIS how the plan is managed

Any existing reports or assessments

The goals that matter to you or the family

Whether the setting is home, school, workplace or community

Whether an interpreter or an Easy Read format is needed — ask when you make contact, and see the accessibility statement

How to start

Call 1300 771 465 , email hello@bloom-healthcare.com.au , or use the referrals page . Anyone can refer: the person themselves, a parent or carer, a GP or paediatrician, a support coordinator, a plan manager, a school, a SIL provider, another health professional, or a nominee or guardian.

Useful information to include is the person's age, the main concerns, any existing reports or assessments, relevant history, the goals that matter to the family, and the best contact details.

A member of the team will be in contact within 24 hours of receiving a referral. The referral is then triaged and matched to a clinician on capacity, location, skill set and the specific need. A welcome pack and intake form follow, and nothing is scheduled until the intake form is completed and returned. Bloom aims to schedule the initial meeting within 5 business days where possible. Rates, hours, travel and reporting are set out in a service agreement that is discussed and signed before service delivery and billing begin.

If something is not working once services start, the feedback page explains how to raise it, the advocacy policy covers your right to an advocate, and the incident management policy sets out how incidents are handled and reported.

Which Adelaide suburbs can I enquire about for Bloom Healthcare services?

Examples include Salisbury, Mawson Lakes, Highbury, Magill, Seaton, Henley Beach, Blackwood, Stirling, Morphett Vale and Seaford. Bloom checks current availability for the exact postcode and discipline, and this list does not guarantee coverage.

Does Bloom Healthcare operate a physical clinic in Adelaide that I can visit?

No. Bloom primarily delivers services in homes and community settings, with suitable telehealth also considered. Clinic appointments may be available on a case-by-case basis, but any clinic appointment, actual address and access arrangements must be explicitly confirmed, and people should not travel to a presumed clinic address.

Can I request a home visit from Bloom Healthcare in Adelaide?

Yes, you can enquire about home or community appointments. Bloom checks the requested discipline, exact service postcode, clinical suitability and current clinician availability before confirming a visit, and travel and fees are agreed before booking.

What funding pathways can I discuss for allied health services in Adelaide?

You can ask about NDIS, aged care and Support at Home, Medicare psychology, private services, or another relevant referral pathway. Eligibility, service scope, practitioner requirements and payment arrangements vary, and an enquiry does not establish funding approval.

Do I need a referral to contact Bloom Healthcare's Adelaide pathway?

No, you can begin with an enquiry without having every document ready. Bloom confirms the referral, clinical information, consent and funding requirements for the service, and health records should be sent only through the approved secure referral process.

What allied health disciplines does Bloom Healthcare offer in Adelaide?

Bloom Healthcare offers Occupational Therapy, Physiotherapy, Speech Pathology, Psychology and Counselling, Exercise Physiology, Dietetics, Positive Behaviour Support, and Paediatric Therapy in

Adelaide.

How is allied health funded for NDIS participants through Bloom Healthcare?

Allied health for NDIS participants is typically funded through the Capacity Building budget under Improved Daily Living, and no GP referral is required.

How do older Australians access in-home aged care allied health with Bloom Healthcare?

In-home aged care is funded through the Support at Home program, with allied health classified as a Clinical Support, and access begins with an aged care assessment through My Aged Care.

What audience does Bloom Healthcare's Adelaide service target?

The service is intended for NDIS, aged care, Medicare and privately funded clients, as described in the page's service details.

What should I have ready when I call?

The exact service address and postcode, the discipline you think you need, the person's age, which funding stream applies if you know it, the main functional difficulties, and any existing reports. The postcode matters most, because availability is checked against the real address rather than against the city.

How does a first appointment run?

It starts with an assessment of needs, goals and circumstances, followed by an agreed plan. Your service agreement, including fees and travel, is discussed and signed before services and billing begin.

When does telehealth make sense inside a city?

Where travel is difficult, where a review does not need a visit, or where waiting for an in-person slot would delay the start. It does not replace a visit when the home environment, an equipment fitting or a swallowing assessment is the thing that needs assessing.