Aged Care Exercise Physiology & Falls Prevention | Bloom

Canonical: https://bloom-healthcare.com.au/services/exercise-physiology-5/

Details:

If you are over 65 and worried about falling, losing strength, or coping at home after a hospital stay, exercise physiology is the allied health service built for that problem. Under the aged care system it is classed as a clinical support and is funded through Support at Home , which replaced Home Care Packages on 1 November 2025. Clinical supports are fully funded by the government and do not attract a participant contribution. You need an aged care assessment first, arranged through My Aged Care on 1800 200 422 . Bloom Healthcare delivers exercise physiology in your home and community. Call 1300 771 465 or make a referral .

This page is for older people, their families and carers. If you are an NDIS participant, see Exercise Physiology for the NDIS side of things.

Who can get aged care funded exercise physiology

To access government funded aged care services in Australia you generally need to be:

65 years or older , or

50 years or older if you are Aboriginal or Torres Strait Islander, or

50 years or older if you are at risk of or experiencing homelessness

The NDIS works to a different rule. It is for people with a permanent and significant disability who are under 65 when they apply . Turning 65 does not automatically push an existing participant off the scheme. NDIS participants already receiving supports under their plans are not automatically transferred to Support at Home, and continue with their NDIS funded services. There can be some overlap for older Australians receiving both aged care and disability support. How that applies to you specifically is a question for your planner or for My Aged Care, not something to assume from a web page.

Falls prevention: the main reason older people are referred

More than one third of people aged 65 and over fall each year, and those falls often end in a fracture or a hospital admission. Falls prevention is the clearest thing exercise physiology does for this age group.

What gets assessed

At the first consultation an Accredited Exercise Physiologist looks at your current movement patterns, strength, balance and endurance, and takes baseline measures so progress can be compared later. They ask about your health goals and your medical history, and they may ask your GP for approval before starting, to confirm you are safe to exercise.

What gets prescribed

Balance training to improve stability and reaction time. In practice this looks like standing on one leg, heel-to-toe walking and similar movements, progressed as you get steadier.

Strength training using resistance bands, free weights or your own bodyweight. Simple things such as leg lifts and wall push-ups. Building muscle mass and tone is what gives you the ability to catch yourself.

Flexibility and mobility work to improve range of movement and reduce stiffness that limits how you move.

Functional task practice for the movements that actually matter to you, such as getting off a low chair, managing steps, or getting up from the floor.

Education on movement safety and injury prevention, so you know what to avoid and how to pace yourself.

Alongside the exercise, falls risk work includes formal risk assessment to identify your particular vulnerabilities, and changes to the home environment to make the space safer. Where home changes are needed, that is usually occupational therapy work, and the two services often run together.

The aim is fewer falls, less injury, better balance and strength, and staying independent in your own home for longer.

The other things this service targets as you age

Losing strength and becoming frail

Strength and resistance training builds muscle mass and tone and improves circulation. For someone with age related decline in strength, a program designed by an Accredited Exercise Physiologist is aimed at keeping the strength required for daily independence, rather than at fitness for its own sake.

Osteoporosis

Exercise is central to slowing bone loss and keeping functional capacity. Strength training and targeted programs support bone density and reduce fracture risk. Adequate calcium and vitamin D intake alongside regular exercise supports bone health. For the nutrition side, our dietitian service can work alongside your exercise program.

Dementia and cognitive change

Programs for people living with dementia are designed around routine, motivation, sleep, self-efficacy and confidence, as well as physical capacity. Regular activity supports mood, energy and engagement. This is support for wellbeing and function. It is not a treatment for dementia, and no exercise program should be presented to you as one.

After a hospital stay, a fall or surgery

Structured rehabilitation after an acute event helps restore strength, physical function and confidence in movement, and reduces the risk of the next decline. Under Support at Home there is a specific restorative care pathway for exactly this situation, described below.

Managing several conditions at once

Most older people are dealing with more than one thing. Exercise physiology programs are designed around your primary and secondary conditions together, which is the difference between a clinical program and a general one.

None of this is a treatment recommendation for you as an individual. What is safe and useful in your case is decided at assessment, with your GP involved where that is needed.

How aged care funds it

Support at Home

Support at Home commenced on 1 November 2025 and replaced both the Home Care Packages Program and the Short-Term Restorative Care Programme. It funds services through:

8 ongoing funding classifications based on assessed need rather than fixed package levels

4 transitioned Home Care Package classifications for people already approved under the old system

3 short-term pathways : assistive technology and home modifications, restorative care, and end-of-life care

Instead of a fixed annual package, funding is allocated as a quarterly budget adjusted to your assessed needs . If your needs increase, the budget can be adjusted at review rather than making you wait for an upgrade to a higher package level.

Clinical supports are fully funded

Support at Home groups services into three categories. Clinical supports covers allied health and nursing aimed at maintaining health, function, safety and wellbeing. These are fully funded by the government and do not require a participant contribution . Exercise physiology sits in this category, alongside:

occupational therapy for daily living safety, home modifications and independence

physiotherapy for mobility, falls prevention and strength

speech pathology for swallowing, communication and nutrition support

psychology and counselling for mental health and emotional wellbeing

The other two categories, independence services and everyday living services, can require participant contributions depending on your financial circumstances. These cover things such as personal care, domestic assistance, transport and community support, not allied health.

The restorative care pathway

One of the three short-term pathways. It provides short-term support aimed at improving functional ability and slowing or reversing the difficulties that come with ageing. It suits people recovering from a hospital stay, an illness or injury, surgery, a fall, or a change in health or function. It is goal oriented and time limited, and can bring together allied health, nursing, personal care and home modifications. You have to be assessed and approved for it like any other pathway.

Commonwealth Home Support Programme

CHSP offers entry level home support and can fund exercise physiology. It continues to operate separately and is scheduled to transition into Support at Home no earlier than 1 July 2027.

Home Care Packages

Home Care Packages have been replaced as the primary program, with transition arrangements for people previously approved under that system. If you are on a package now, you have not lost your services. Ask your provider how your package maps to the new classifications.

Outside aged care

If you are not eligible for an aged care program, a GP can refer you under a GP Chronic Condition Management Plan. Exercise physiologists are one of the eligible professions under that plan. Private health insurance and self funding are also options. Aged care residents with a multidisciplinary care plan can access GP care plan allied health services too, though hospital in-patients cannot.

Fees. What you are charged where a service is not fully funded, along with travel and cancellation terms, is set out in your service agreement before services begin. For your specific situation, call 1300 771 465 .

How to start

1. Register with My Aged Care. Go to myagedcare.gov.au or call 1800 200 422 , Monday to Friday 8am to 8pm and Saturday 10am to 2pm. This is the first step and there is no way around it for government funded aged care.
2. Have the assessment. My Aged Care refers you to an assessor. Support at Home introduced a single unified assessment that replaces the separate ACAT and Regional Assessment Service processes used under the old programs, so you should not need to be reassessed when your level of care changes. The assessor talks with you about your health and medical conditions, your daily activities, your support needs and goals, and your living arrangements and current supports.
3. Get your support plan. This sets out the services you have been approved for, your funding classification and budget, and the providers available to you.
4. Choose your provider and book. Call Bloom Healthcare on 1300 771 465 , make a referral or contact us . Referrals also come from GPs, hospital discharge teams, family and carers.
5. First consultation. Physical function is assessed, goals are discussed, baseline measures are taken and a plan is agreed. GP approval may be sought at this point if there is any question about exercise safety.

A plain English guide is available: download the Exercise Physiology Easy Read PDF .

Where sessions happen

Sessions are delivered in the home, in community settings such as local parks and walking routes, or in a therapy room or clinic, and telehealth can be used for coaching, review and program updates. Bloom Healthcare's primary method of delivery is in the community, which for older clients usually means at home, where the stairs, the chairs and the bathroom you actually use are the ones being worked on.

We have clinicians across New South Wales , South East Queensland , Victoria , Western Australia , South Australia , Tasmania and the Australian Capital Territory. Check the location guide for your area.

How this differs from physiotherapy and from a gym program

Physiotherapy in aged care concentrates on mobility, hands-on treatment, pain and recovery after fracture or surgery. Exercise physiology concentrates on structured, progressive exercise that builds capacity, endurance and confidence over weeks and months. Both are clinical supports under Support at Home and both are used for falls prevention. Many older people see both, sequentially rather than at

the same time.

A personal trainer holds a Certificate III or IV in fitness and works with generally healthy people. An Accredited Exercise Physiologist holds a university degree in exercise or health science plus graduate qualifications in clinical exercise physiology, accredited by Exercise and Sports Science Australia, including over 500 hours of supervised clinical placement in settings such as hospitals and clinics. The difference that matters at 78 with a heart condition and a replaced hip is the clinical assessment before anything starts.

Common questions about exercise physiology for older adults

Do I have to pay for exercise physiology under Support at Home?

Clinical supports, which include allied health such as exercise physiology, are fully funded by the government and do not require a participant contribution. Independence and everyday living services can require contributions depending on your finances. If you are accessing the service outside an aged care program, fees are set out in your service agreement before services start.

Do I need a GP referral?

Not for the aged care pathway. The gateway there is an aged care assessment arranged through My Aged Care. Your exercise physiologist may still ask for GP approval before starting if there is a safety question. If you are going through a GP Chronic Condition Management Plan instead, then yes, a valid GP referral is required and the GP decides whether you would benefit.

How do I get an aged care assessment?

Register with My Aged Care online at myagedcare.gov.au or call 1800 200 422. They refer you to an assessor, who meets with you to discuss your health, daily activities, support needs and living situation. You then receive a support plan setting out what you have been approved for.

I am on a Home Care Package. What happens now?

Home Care Packages have been replaced by Support at Home as the primary program, with transition arrangements for people already approved. There are four transitioned Home Care Package classifications inside the new system. Your services do not stop. Talk to your existing provider or My Aged Care about how your package maps across.

I have just come out of hospital. Is there a faster pathway?

Ask your assessor about the restorative care pathway. It is one of three short-term pathways under Support at Home, designed for people recovering from a hospital stay, illness, injury, surgery or a fall. It is time limited and goal oriented, and it can combine allied health with nursing, personal care and home modifications.

Can I do this if I use a walker or cannot stand unsupported?

Programs are matched to your ability and to the equipment you have. Balance work can be done with support, and strength work can be done seated. The assessment establishes what is safe for you before anything is prescribed.

Will exercise physiology stop me falling?

No one can promise that. What the service does is work on the things that raise your risk, which are balance, strength, mobility, confidence and the safety of your home environment. Progress is tracked with practical measures such as balance tests, leg strength markers, near misses and how confident you feel doing transfers.

I am 66 and have a disability. Am I NDIS or aged care?

If you were already an NDIS participant, you are not automatically moved to Support at Home and your NDIS supports continue. If you are applying for the first time after 65, the NDIS access rules require you to have been under 65 when applying, so aged care is usually the pathway. There is some overlap for people receiving both. Confirm your own situation with your planner or My Aged Care.

How often would I be seen, and for how long?

That depends on your goals, your assessed needs and your budget rather than a fixed schedule. Exercise physiology is intended to build your independence, so the plan should include a point where you are managing on your own. Ask your exercise physiologist at the start what they are recommending and what progress should look like.

Can I have exercise physiology and physiotherapy at the same time?

Sometimes, but it depends on the funding and on whether the two programs are coordinated rather than working against each other. Tell us who else you are seeing when you refer, so it can be sorted out before sessions start.

My parent has dementia. Can they still take part?

Yes. Programs are designed around routine, motivation, sleep, confidence and self-efficacy as well as physical capacity, and can be delivered at home where the environment is familiar. Family and carers are usually involved so the routine continues between sessions.

What should I have ready when I call?

Your My Aged Care client number and support plan if you have one, your relevant diagnoses and medications, what has changed recently such as a fall or hospital admission, what you are finding hard day to day, and any risks such as falls, dizziness or fatigue. Call 1300 771 465 and describe the problem. Working out whether this is the right service is part of the conversation.

What service does this Bloom Healthcare page describe?

The page describes Exercise Physiology services offered by Bloom Healthcare, an NDIS provider in Australia.

How does the page define Exercise Physiology?

The page states that Exercise Physiology involves improving function through exercise aligning with a person's capacity and disability.

Is Bloom Healthcare's Exercise Physiology service related to the NDIS?

Yes, the page is titled 'Exercise Physiology Services - NDIS Provider - Bloom Healthcare Australia,' indicating Bloom Healthcare offers this service as an NDIS provider.

What organisation provides the Exercise Physiology service described on this page?

The service is provided by Bloom Healthcare Pty Ltd, a boutique disability and aged care allied health provider.

How does Bloom Healthcare describe its overall healthcare approach?

Bloom Healthcare describes itself as a boutique disability and aged care allied health provider that wants to change the status quo, believing all people have the right to access quality healthcare, with a model focused on evidence-based practice, client centricity, and delivery by highly qualified health practitioners across Australia.

What contact details are provided for Bloom Healthcare?

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

What does Exercise Physiology examine scientifically?

Exercise Physiology is a science-based discipline that examines how the body responds and adapts to physical activity, studying processes such as oxygen consumption, blood flow, and systemic adaptations.

What kinds of programs do Accredited Exercise Physiologists create?

Accredited Exercise Physiologists create tailored, progressive exercise programs targeting the strengthening of muscles, improvement of balance, enhancement of endurance, and building of functional capacity.

What health conditions can Exercise Physiology help manage?

Exercise Physiology can support the management of chronic conditions, disabilities, injuries, rehabilitation needs, and mental health conditions, while addressing physical, social, emotional, mental, and spiritual health dimensions.

What physical health benefits can Exercise Physiology provide?

Benefits include increased strength and muscle function through resistance exercises, enhanced balance and coordination to reduce fall risk, improved cardiovascular function through aerobic activities, better management of chronic conditions like diabetes, arthritis, and heart disease, and enhanced flexibility and mobility.

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