



Brisbane Perpetual Motion Physiotherapy Pty

Trading as **BPM PHYSIO**

Shop 4, 12 Blackwood Street  
Mitchelton, QLD, 4053

TEL: (07) 3061 8434  
FAX: (07) 3036 6383  
info@bpmphysio.com.au

**NDIS SERVICE AGREEMENT for \_\_\_\_\_**

1. **BPM PHYSIO** will supply physiotherapy services to the client as clinically indicated at time of review and in accordance with (IAW) the client's specific needs and the detail of the client's plan.
2. **BPM PHYSIO** is a NDIS registered and verified physiotherapy practice. The clinic bills the NDIS directly via the PRODA portal, Plan Manager, or client directly (who seeks reimbursement from NDIS).
3. Plan and Self-managed clients are responsible for payment of all accounts should the NDIS decline payment.
4. **BPM PHYSIO** will provide treatment sessions as follows: (circle)
  - a. 1/2/3 x weekly / fortnightly / monthly / as required for:
    - i. 30 mins \$70
    - ii. 45 mins \$85
    - iii. 60 mins \$95
5. the client will present to **BPM PHYSIO** for the scheduled treatments and will undergo treatment in the presence of an allocated carer, if required, in the vicinity of the treatment room.
6. the client will require ongoing physiotherapy support for (circle):
  - a. the maintenance of muscle mass, strength, and conditioning
  - b. joint range of motion
  - c. decrease pain
  - d. improve function – balance and gait pattern
7. this service agreement shall be reviewed yearly on the renewal date of the clients plan or sooner if deemed necessary.

PERSONAL INFORMATION IN CONFIDENCE

8. problems or concerns and questions can be directed to the treating physiotherapist face to face, by email to [info@bpmphysio.com.au](mailto:info@bpmphysio.com.au), or by telephone (07) 3061 8434.
9. please refer to the NDIS page of the **BPM PHYSIO** website for the client welcome pack. This contains information about how to make a complaint and how **BPM PHYSIO** handles complaints.
10. client's responsibilities:
  - a. always attend appointment at the correct time with a carer present if required
  - b. pay cancellation charges **in accordance with current NDIS policy**
  - c. advise **BPM PHYSIO** as soon as possible in the event of an adverse reaction to treatment
11. **BPM PHYSIO** will work with the participant to provide supports that suit their needs as clinically indicated IAW the client's goals. These supports will require written consent to be held on file and verbal consent to be obtained prior to each treatment.
12. in extreme circumstances (sick leave, bereavement etc) **BPM PHYSIO** reserves the right to substitute for another NDIS registered treating physiotherapist at the clinic should this be required. *The client will always be notified, and consent gained before handover to another clinician.*
13. this service agreement can be terminated **by either party** at any time in writing by email or mail.

I, \_\_\_\_\_, hereby agree to the above service agreement.

This agreement has been explained to me by (Carer, name and role) \_\_\_\_\_.

**PLEASE SIGN BELOW**

PARTICIPANT		Witness/Carer	
Sign	Date	Sign	Date

Russ W Tolland  
Director and Principal Clinician  
**BPM PHYSIO**  
Brisbane Perpetual Motion Physiotherapy Pty Ltd  
ABN 18 620 028 926