

ANNUAL REPORT 2021

Australasian Sleep Association



www.sleep.org.au



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Board 2020-2021

President	A/Prof Alan Young
President Elect:	A/Prof Sutapa Mukherjee
Clinical Chair	Dr David Cunnington
Conference Chair	Dr Andrew Gikas
Education Chair	A/Prof Ching Li Chai-Coetzer
Finance Chair	A/Prof Nathaniel Marshall
Membership Chair	Dr Jennifer Walsh
Research Chair	A/Prof Denise O'Driscoll
NZ Branch President	Dr Angela Campbell
Independent Director	Ms Teanau Roebuck (representing ANZSSA)

Vision

A community with healthy sleep practices, supported by best-practice sleep science and sleep medicine

Mission

Lead and promote sleep health and sleep science, provide professional development for members, foster research and establish clinical standards

My second and final year as ASA President has been a challenging yet hugely rewarding experience. My primary goal has been to support our members through difficult times and I think we have achieved this. Our membership has faced further COVID-19 outbreaks nationwide with the delta variant putting pressure on our health systems, sleep services and models of care. Only now can we begin to look forward with some optimism as vaccination rates increase rapidly and plans for opening up are released.

We provided advice for sleep services during the second wave of the pandemic during 2020 and earlier this year updated our 'Consensus statement on the safe use of respiratory therapies' which are available on the COVID-19 resource section of our website. The ASA is represented on the Australian National COVID-19 Clinical Evidence Taskforce by Sutapa Mukherjee and myself with weekly communiques available for members.

We have pivoted to running Sleep DownUnder 2021 as a fully virtual conference and I look forward to another successful meeting under the guidance of our highly skilled Conference Chair Andrew Gikas and Conference Committee.

Another unexpected challenge has been the global recall of Philips devices which has put patients, clinicians and sleep services in a difficult position which we continue to navigate together. We ran a well-attended member forum to update, advise and facilitate discussion around the recall which included representatives from the TGA, Philips and the medico-legal profession. We issued a timely statement to guide members on how to handle the recall. We continue to be represented with the TGA (by Mark Howard), have met with Philips on prioritisation strategies for vulnerable patients and provide regular updates for members on our website. I undertook several media interviews to increase awareness of the recall and provide advice to the general public. I would like to acknowledge the hard work and expertise of David Cunnington and the Clinical Committee in managing the ASA response to the recall.

Despite these challenges, the ASA has continued to carry out our core activities and has been very productive over the last 12 months. As you read through the reports from our committee chairs you will see diversity of activity across the clinical, education and research fields across a range of craft groups. Just to mention a couple of highlights amongst the many:



Annual Report President

- the MOU with the Sleep Research Society that includes free access to the journals *Sleep* and *Sleep Advances*
- creation of the Fellow of Dental Sleep Medicine program (to be launched later this year on our new learning management system), and
- a successful NHMRC partnership grant (Flinders University with ASA as partner).

We have continued with responsible financial management during difficult times and will report a small deficit for the financial year just ended with a break even budget for the upcoming year. I would like to acknowledge the Finance Committee chaired by Nat Marshall and our CEO Marcia Balzer for their hard work in ensuring our long-term financial sustainability.

On the advocacy front we continue to work closely with the Sleep Health Foundation. Getting traction with government in the post-COVID environment has proven difficult. Disappointingly, there was minimal mention of sleep in the Draft National Preventive Health Strategy and we have resubmitted our proposals for sleep to be included.

On a positive note, our submissions to the Mental Health Productivity Commission Report resulted in the inclusion of sleep as an important factor. We continue to work with the Royal Australasian College of Physicians (President John Wilson) to lobby the Federal Health Minister to establish sleep as a specialty in its own right. We have continued to provide media interviews to promote the importance of healthy sleep.

Finally, I would like to acknowledge our wonderful office staff – Marcia Balzer, Mischka Yates, Asha Mohabir, and Kara Nicholson (recently resigned) – and passionate volunteers who generously contribute their time on our Board, committees, councils and working groups. The dedication and expertise of our members who make these contributions are the cornerstone of our organisation and it has been a privilege to work with and be inspired by them.

I look forward to continuing on in the role of Past President and welcome the incoming President Sutapa Mukherjee. She has provided me with tremendous support over the last 12 months for which I am extremely grateful and am sure she will do an amazing job leading our Association into the future.

A/Prof Alan Young

President



Annual Report President Elect

It has been another extraordinary year and as I write this report much of Australia and New Zealand is still in lockdown due to the COVID-19 pandemic. As part of ASA's response to the pandemic I have continued to chair the Guideline Leadership Group of the National COVID-19 Clinical Evidence Taskforce and Alan Young is a member of the Steering Committee of this organisation.

The mandate of this Taskforce has been to provide a unified voice for COVID-19 diagnosis and treatment, and it has been a great experience leading the other 31 partner organisation members as we review the evidence as new therapies for COVID-19 are published. The Taskforce has received far-reaching readership internationally and within Australasia with NHMRC approval of the guideline recommendations. The guidelines are continually being updated and the Taskforce will transition into a focus area of the Australian Living Evidence Consortium soon which will be its permanent home.

I have also been a member of the Fellowship of Dental Sleep Medicine working party and it has been gratifying to work with such passionate individuals to bring the certification program to fruition which will be launched late in 2021. I would especially like to thank Andrew Gikas (Chair), Ramesh Balasubramaniam, Christopher Pantin, Peter Eastwood, Maree Barnes, Dan Andrews, Atqiya Aishah and Kate Sutherland for all their efforts.

I was a member of the Hypersomnolence Masterclass Organising committee which was held virtually in July. This was a terrific educational opportunity, and it was inspiring to work with Sheila Sivam (Chair), Ching Li

Chai-Coetzer, David Cunnington, Simon Frenkel, John Swieca, Brendon Yee, Toby Fothergill, Lachlan Stranks, Moira Junge, Curt Gray and Brad McKay in the virtual space. We were all challenged in many ways but were able to bring it together on the day and we all learnt a great deal about hypersomnolence and the virtual educational space.

Finally, it has been an immense privilege to work closely alongside President Alan Young during the past year in my role as President Elect. Alan has always been calm, respectful, dedicated, and hardworking even when his personal circumstances were difficult due to prolonged lockdown in Victoria. I admire and respect him greatly and would like to formally acknowledge his outstanding leadership as President of the Australasian Sleep Association during the past couple of very challenging years for the association. His term has been defined by an event neither expected nor planned yet his vision and careful stewardship have been instrumental in providing a strong framework for the post-pandemic ASA. We owe him an enormous debt of gratitude for all his efforts. I am fortunate indeed to have access to his wise counsel as he transitions to his role as Immediate Past President.

A/Prof Sutapa Mukherjee

President Elect



Annual Report Chief Executive Officer

One of the highlights of the last 12 months was how the whole ASA worked together enthusiastically and flexibly to adapt to extraordinarily challenging circumstances.

Sleep Week was a great success, thanks to a top-notch program prepared by our Conference Committee and Councils, and hard work from staff to make the ambitious vision a reality. Members engaged well with a new ongoing webinar program. And special-purpose working groups explored new territory in setting the scene for new projects such as virtual masterclasses and our first ever certification program (in dental sleep medicine).

It was satisfying to be able to announce a new member benefit. An affiliation agreement with the Sleep Research Society saw us adopt two official scientific journals – *SLEEP* and *Sleep Advances*.

We permanently closed our office in Blacktown and have settled well into working as a fully virtual team. In many ways, this way of working suits our association well, with so much of our focus and efforts taking place in the virtual space. It was fortunate that working from home was enthusiastically embraced by our staff, and we were able to plan to continue this indefinitely. With the resignation of Kara Nicholson, we welcomed Asha Mohabir as our new Sponsorship and Events Specialist in a permanent work-from-home role. Our third team member, Mischka Yates, did sterling work during the year in supporting the courageous goals and activities we adopted in response to the pandemic.

When the Board adopted a new two-year strategy just before the start of the 2020-21 financial year, it set out three clear goals:

- Achieve a break-even financial result
- Ensure the ongoing viability of the association, and
- Have adapted effectively to the post-COVID environment.

At the halfway point of our two-year strategy, I'm pleased to report that we have made significant progress to achieving all three of these goals by 30 June 2022 as planned.

Finally, I've enjoyed enormously positive and collegial relationships with everyone I've worked with the last year. I'd like to say a particular thank you to the President and President Elect, Alan Young and Sutapa Mukherjee, for our supportive and productive partnership that has helped deliver some important achievements this year.

Ms Marcia Balzer
Chief Executive Officer



Annual Report Clinical Chair

Clinical Committee: *David Cunnington (Chair), Linda Schachter (Deputy Chair), Bandana Saini, Brendon Yee, Christopher Pantin, Craig Hukins, Garun Hamilton, Jacob Twiss, John Swieca, John Wheatley, Moya Vandeleur, Roy Beran, Stuart MacKay, Brett Duce, Julie Tolson, Nur Sulaiman and Sutapa Mukherjee*

The major responsibilities of the Clinical Committee are:

- 1 To establish and promote best practice standards in sleep medicine;
- 2 To promote the highest quality of care for patients; and
- 3 To advocate for public funding for sleep medicine services.

The last 12 months have been busy for the committee with a number of urgent requests for input to respond to as well as continuing the usual work of the committee.

COVID-19

The global pandemic continues to impact sleep services throughout Australia and New Zealand. Most sleep services have adapted to continue offering services throughout the pandemic. The Australasian Sleep Association was approached early in 2021 to provide updated guidance on the use of CPAP and non-invasive ventilation in high-risk settings such as hotel quarantine and during inpatient treatment. The statement from the ASA was updated after review by the Clinical Committee and is available via the ASA website as a resource for members and other healthcare providers and health services.

Philips product defect correction

In June 2021 Philips announced a global recall of many of their CPAP and non-invasive ventilation flow generators. Originally the advice from Philips to users of affected devices was to cease using their devices immediately. With over 200,000 affected devices in use in Australia, this was not felt to be a workable solution nor balanced advice. The ASA including representatives from the Clinical Committee engaged with Philips and the TGA early and pro-actively and provided a webinar forum for members to hear directly from Philips and the TGA. Following this Philips changed their recommendation to people with affected devices to discuss their ongoing treatment with their managing physician or healthcare provider. The TGA have issued a product defect correction notice and Philips has begun the process of repairing and replacing affected devices. The ASA and Clinical Committee remain engaged with Philips to help ensure the best outcome possible for people with affected devices and their treating teams who have all been significantly impacted.

Medicines committee

This subcommittee continue to advocate strongly for better access to medications for patients, especially those with narcolepsy and idiopathic hypersomnia. A commentary piece on current treatment options for narcolepsy in Australia has been published in the *Medical Journal of Australia*, and a literature review of medication treatment for narcolepsy is being prepared.

Publication of position statements and guidelines

A new ASA position statement was published in the journal *Respirology* on the latest clinical approach to the role of surgery in managing obstructive sleep apnoea. With increasing publication costs, the ASA is no longer able to fund open access for articles published, but will continue to cover any author fees. A number of working groups continue to work on important guidelines including the guidelines for performing sleep studies which are being updated.

NATA accreditation update

Accreditation visits have been challenging with the pandemic and associated disruption of travel and closure of state borders. However some visits have still been able to be done.

Government policy issues

A working party is continuing to work with MSAC on an application for paediatric home sleep studies. This is close to completion, with progress being disrupted by both the pandemic and the Philips product defect correction issue.

I would like to thank all the members of the Clinical Committee for the time and input they provide to the ASA in helping this committee perform its functions.

Dr David Cunnington

Clinical Chair



Annual Report Conference Chair

Conference Committee: *Andrew Gikas (Chair), Jasneek Chawla (Deputy Chair), Alex Wolkow, Amal Mohamed Dameer, Amanda Phoon Nguyen, Amanda Richdale, Andrew Vakulin, Charli Sargent, David Cunnington, Scott Coussens, Janet Cheung, Leon Kitipornchai, Moya Vandeleur, Barbara Galland, Nicole Grivell, Teanau Roebuck, Trung Ngo, Asha Mohabir, Marcia Balzer*

The Conference Committee of the ASA is tasked with making the ASA/ANZSSA Annual Scientific Meeting the premier sleep meeting in our region, so the pandemic brought with it many challenges, not least our ability to provide a face-to-face annual scientific meeting.

As a result, 2020 saw us host a fully online Sleep Week from the 20-23 October, which allowed members the opportunity to attend virtually from their homes or their workplaces. The program was formulated and developed with significant input from each of our ASA Councils and featured 133 speakers from 12 countries and 18 international speakers focusing on key aspects of sleep health, sleep science and sleep medicine. Two short courses were also included: "Fundamentals of Sleep" and "Challenging aspects of paediatric respiratory medicine".

A total of 612 delegates registered for Sleep Week and by all measures it was very successful and well received. There is no doubt that we all missed the opportunity to network with colleagues face to face but this meeting did provide a way to help us to stay connected and allowed the ASA to explore the virtual conference format.

Sleep DownUnder 2021 will be a fully virtual meeting running from 10 -13 October. Although it was originally planned as a hybrid conference the inability to travel has reluctantly forced the postponement of the in-person Brisbane component till 2022. Understandably this has thrown up some challenges and the ability to move quickly and flexibly has been a sign of the times. Our CEO Marcia Balzer, the Conference Company and the Conference Committee have done an outstanding job in putting together a program that will be our 32nd Annual Scientific meeting.

A big thank you to the members of the Conference Committee and ASA/ANZSSA members who have volunteered their time to score session proposals and abstracts submissions to help shape the 2021 SDU program. A significant number of session proposals were received and a total of 221 abstracts were submitted with each of these offered the opportunity to submit an e-poster or a recorded presentation to be hosted on the virtual conference platform.

We do heavily rely on our sponsors and exhibitors to help us achieve our goals. I would like to thank and acknowledge the generous support of all our sponsors, including our 2021 digital partners Eisai, Jazz Pharmaceuticals, Philips, ResMed, SomnoMed, Teva and session sponsors and supporters Aspen Australia, Compumedics, Entoura, Zelira Therapeutics, Choice One Medical and Novo Nordisk.

Next year we are planning a Sleep DownUnder in Brisbane again. Third time lucky?

Dr Andrew Gikas
Conference Chair



Annual Report Education Chair

Education Committee: *Ching Li Chai-Coetzer (Chair), Amy Reynolds (Deputy Chair), Alan Young, Andrew Gikas, Sarah Blunden, Alex Sweetman, Jessica Kennedy, Helen Gilbert, Bandana Saini, Catherine Buchan, Shyamala Pradeepan, Amanda Phoon Nguyen*

The COVID-19 pandemic has continued to present a range of challenges for our Association throughout 2021. Despite this, the ASA remained committed to the delivery of high-quality educational programs to its members during this time.

One of the year's highlights was the inaugural ASA Hypersomnolence Masterclass, a full-day, interactive and multidisciplinary online program featuring three prominent international speakers, alongside a range of Australian sleep medicine experts. The ASA webinar series has continued to run regularly throughout the year, covering a wide variety of interesting topics within the sleep field.

Education subcommittees and working groups have remained highly active during 2021. Some of the key activities during the year include:

- **The GP Education Subcommittee** (chaired by Alan Young) have conducted podcast interviews aimed at GPs and nurses on topics such as "Paediatric snoring and OSA" and "Normal sleep across the lifespan". They have continued to work in close collaboration with NHMRC Primary Care CRE investigators, with the endorsement of an online primary care resource on OSA management which will soon be hosted on the ASA website. They are also planning to survey Australian universities to find out about how much sleep medicine training is in the medical school curriculum.

- **The Behavioural Management of Sleep Disorders Subcommittee** (chaired by Alex Sweetman) has been exploring options for delivery of postgraduate education on CBTi (cognitive behavioural therapy for insomnia).
- **The Advanced Trainee Education Subcommittee** (chaired by Jessica Kennedy) has been reviewing educational materials available on the ASA website with the aim of re-cataloguing the content to make it more user friendly for advanced trainees and other ASA members. In conjunction with the Sleep Physicians Council, they hosted a professional development seminar which discussed the transition from registrar to sleep physician, which was well attended and received highly positive feedback.
- **The Pharmacy Education Subcommittee** (chaired by Bandana Saini and Helen Gilbert) is developing recommended curriculum topics and learning objectives for sleep health within University Pharmacy courses. They also were involved in the delivery of a webinar on chronotherapy and the timing of medication administration.
- **The Dental Sleep Medicine Education Subcommittee** (chaired by Amanda Phoon Nguyen) have presented two dental webinars during 2021. The Dental Sleep Medicine Accreditation Working Party (chaired by Andrew Gikas) have finalised their plans for a Dental Sleep Medicine Fellowship certification program, which will be launched in late 2021.
- **The Indigenous Sleep Health Working Group** (chaired by Sarah Blunden) have completed their Indigenous Sleep Health Report which is currently under review by the Education Committee. This year, they published a systematic review on sleep health in Indigenous Australian children, with a similar review in Indigenous Australian adults due to be submitted for publication by the working group in the near future.
- **The Nursing Education Subcommittee** (chaired by Catherine Buchan) have been in hiatus throughout much of 2021 as a result of the challenges presented by the COVID-19 pandemic, but are seeking to reinvigorate the Subcommittee with a call for new members.

After serving on the ASA Board for the past four years, I will be stepping down from the Board and, consequently, as Chair of the Education Committee at the upcoming ASA Annual General Meeting. I would like to thank each of the Chairs and all of the members of the Education subcommittees and working groups

for their highly valued contributions, hard work, and dedication to improving the education of ASA members – it has been an absolute pleasure working with you during my time in this position.

A/Prof Ching Li Chai-Coetzer

Education Chair



Annual Report Finance Chair

Finance Committee: *Nathaniel Marshall (Chair), Sutapa Mukherjee, Alan Young, Robert Estcourt, Christopher Worsnop, Melinda Jackson, Marcia Balzer (CEO).*

The Association continues to be in a sound financial position. It does, however, have significant but manageable issues with its financial performance and cash flow management. These will require continued attention and action going forward.

Because of the pandemic stimulus-induced effects on asset prices, our investment portfolio has regained the value that it held before the pandemic and our funding of an underlying cash flow problem from retained equity last year. The value of our investment is still substantially more (\$967,674) than our initial investment of \$800,000.

This year's financial performance has seen us post a deficit of \$24,886 which was better than the deficit budgeted for 2020-21 of \$64,598. This shortfall has been funded by drawing on our retained earnings built up over the history of the association. The Board approved this deficit as an extraordinary measure to address the uncertainties that the pandemic was causing given one of our major sources of revenue is our annual conference.

The ongoing cash and financial performance management issue will be to match operating revenues from non-investment activities to the operating expenses of the association's day-to-day activities in a post-pandemic environment that is yet to crystallise. Operating expenses have been substantially controlled by reduction in office costs.

The pandemic has had meaningful impacts both on our

conference revenue and in a small decline last year in membership revenue. The company retains the financial assets to continue to weather this turbulence for the immediate future.

My thanks again go out to the team at JB Were, Mark Leslie and Robert Estcourt who provide us with expert advice on how to manage the ASA's financial reserves and scholarship funds sustainably into the future. They have helped steer us through the most recent period and we will continue to work with them to provide income to support the membership services of the association.

A/Prof Nathaniel Marshall

Finance Chair



Annual Report Membership Chair

Membership Committee: *Jennifer Walsh (Chair), Alex Sweetman, Amal Osman, Gorica Micic (maternity leave), Kathleen Maddison, Nicole Lovato (maternity leave), Peter Parslow, Phil Terrill*

Councils Subcommittee: *Amy Reynolds, Christopher Worsnop, Honey Heussler, Jasneek Chawla, Jenny Haycock, Kate Sutherland, Ksenia Chamula, Nick Stow, Prerna Varma, Scott Coussens, Trung Ngo*

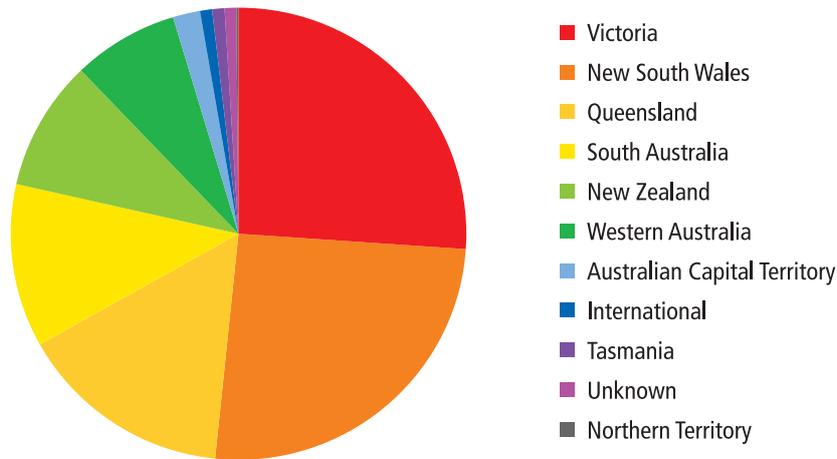
Membership Numbers

Despite the challenges faced by many of our members over the past year, the majority of members were keen to maintain their membership. The total number of members as of 30 June 2021 was 912, a small 4% reduction from last year. This is reflection of the recognition and value of the ASA by our members, even in these difficult times.

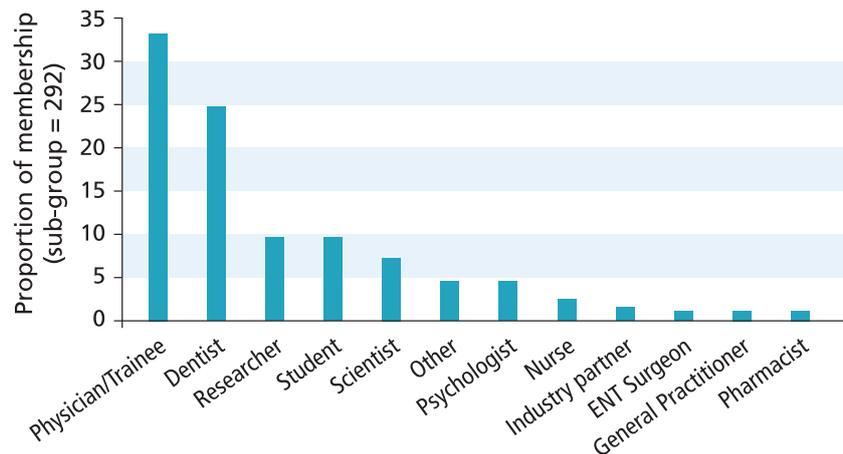
Our members are predominantly Australian based, with the majority residing on the East coast. Approximately 10% of members are based in New Zealand and 8 members are located outside Australia and New Zealand.

Of a sub-group of 292 members in whom we have occupation details, it is apparent that the ASA represents members with diverse backgrounds. The largest group are physicians or trainee physicians, representing approximately one third of our membership. Dentists are the next largest group, followed by students, researchers, and scientists. We also have members who are psychologists, nurses, GPs, ENT surgeons, psychiatrists, physiotherapists and speech pathologists.

ASA Member Location 2021



ASA Member Occupation 2021



State meetings

State meetings are a way for members to network with local peers and keep abreast of current research and clinical practices. State events are organised by a state meeting convenor(s) and are typically held in person. Unfortunately, restrictions associated with COVID-19, or the threat of imminent restrictions, has meant that state meetings have been rare over the past year. The South Australian team led by Amy Reynolds was the only state that managed to see an event to fruition this year. Held in May, the event was very successful with 75 people in attendance.

As we are all Zoom-fatigued and eager to engage and network with our colleagues face to face we look

forward to plentiful state meetings as restrictions are eased, hopefully over the coming months.

Membership categories

A new membership category has been developed specifically for members who reside outside Australia/New Zealand. With the likelihood of continued virtual or hybrid meeting formats in the coming years we envisage that there will be increasing interest from our international colleagues in this International Membership category.

As of June 30, 2021 the majority of our members were Full Members (69%) with Associate (15%) and Student Members (11%) making up the bulk of the remaining membership.

Sub-committee of councils

The ASA councils serve to unify members with similar research and clinical interests. Each council runs independently to serve its members and achieve the goals of the council. Typically, the councils contribute to member, and sometimes community, education via platforms including webinars, seminars and social and mainstream media. Members wishing to be more actively involved in the ASA are encouraged to engage with their council(s) of interest as there are a number of roles within each council, outlined in the Toolbox for Councils, which are important and rewarding. Thank you to all members who have contributed to the councils over the past year.

Communication platforms

Member communication is predominantly through regular email updates and newsletters. The website is updated regularly and remains a valuable source of information in relation to relevant events, position statements and education materials including the webinar library.

Thank you to the Membership committee, secretariat, and all ASA members who have contributed to the ASA over the past year. It is a pleasure to be part of our collegiate organisation, all working together in the pursuit of promoting sleep health and sleep science. I look forward to continued engagement in the year to come.

Dr Jennifer Walsh

Membership Chair



Annual Report Research Chair

Research Committee: *Denise O'Driscoll (chair), Romola Bucks, Jennifer Cori, Scott Coussens, Angela D'Rozario, Danny Eckert, Bradley Edwards, Rosemary Gibson, Camilla Hoyos, Roo Killick, Fergal O'Donoghue, Andrew Vakulin, Jennifer Walsh, David Wang*

The Research Committee has continued to work on a number of key strategic goals to achieve our overall mission to strengthen and encourage high quality sleep research in Australia and New Zealand.

Awards

Excitingly the ASA awards were back with gusto for 2021 after a hiatus for 2020. The Research Committee received and reviewed a large number of applications for the prestigious awards offered by our association including: the Nick Antic Career Development Award, the Helen Bearpark Memorial Scholarship, the Rob Pierce Grant in Aid, and the Philips Sleep Research Grant. The calibre of the applicants this year was exceptionally high and selecting winners from the impressive candidate list proved challenging. Awardees will be announced virtually at Sleep DownUnder. Due to the challenging travel restrictions imposed this year, the new Fisher & Paykel Sleep Travel Award will be held over to 2022.

The committee also reviewed a high volume of applications for the 2021 New Investigator Award. The top six finalists will present their research online at Sleep DownUnder 2021. We look forward to hearing their presentations in competition for the top prize.

We were able to award the New Investigator prize during Sleep Week in 2020. Congratulations to Hannah Scott who was the successful presenter.

Research funding

While research funding remains very challenging, there have been several key successes from our members that warrant celebration. ASA members and their colleagues were collectively awarded over \$3 million for their sleep-related applications via the NHMRC, Heart Foundation, Health Research Council New Zealand and Lotteries Health Research New Zealand. This includes a successful NHMRC Ideas Grants for lead investigators Tracey Sletten, Juha Toyras, Sean Drummond and Daniel Hoyer and a successful NHMRC Clinical Trials Grant for Bei Bei. In addition Camilla Hoyos was awarded a Heart Foundation Future Leader Fellowship. Success in New Zealand included Health Research Council Activation Grants for lead investigators Leigh Signal and Angela Campbell, as well as Lotteries Health Research NZ funding for Dee Muller and Rosie Gibson. Congratulations to all these members and their colleagues.

We continue in our political advocacy efforts to raise the profile of sleep research and the need for more research funding in this area. We prepared a submission to the Australian National Audit Office on the Department of Health's Management of the Medical Research Future Fund. Our submission served to highlight the need of including sleep research in the medical research initiatives.

Sleep DownUnder

As we did in 2020, we will be hosting a dedicated Early Career Researcher Session at Sleep DownUnder 2021. This free session was developed in collaboration with the newly formed NEST Council (Network of Early career Sleep researchers in Training). Entitled "Funding 101: ECR Funding opportunities in Australia and New Zealand" the session will include presentations and discussion from three local guest speakers – Rick Wassing, Rosemary Gibson, Tracey Sletten and will include a panel Q&A including Andrew Vakulin. As with previous years, this session will be a key session for junior researchers starting their career and the search for research funding.

After a pause in 2020, the ASA mentorship program re-opened this year to all members at any career stage with a streamlined model including a strong focus on the new normal of virtual meetings.

I'd like to personally thank the committee members for their continued hard work and enthusiasm this year, as well as the ASA office for the support this year. We look forward to another exciting and productive year ahead.

A/Prof Denise O'Driscoll

Research Chair



Paediatric sleep in New Zealand is working towards a new model of care and the NZ Paediatric Sleep Network are currently canvassing opinion on this.

We hope that 2022 will bring a chance for us all to reconnect face to face.

Dr Angela Campbell

New Zealand Branch Chair

Annual Report New Zealand Branch

New Zealand Branch Executive Committee:

Angela Campbell (Chair), Karyn O’Keeffe, Barbara Galland, Rachelle Love, Andrew Davis, Bronwyn Sweeney, Sonia Cherian, Sally Powell, Patyrk Szulakowski, Jacob Twiss

After our annual NZ sleep meeting, Sleep in Aotearoa, was cancelled due to COVID-19 in 2020, it was nice to at least have an online session with local hubs this year. This would not have been possible without the support of the ASA team who ran the Zoom meeting in the background – thank you.

The actigraphy workshop organised primarily by Prof Barbara Galland and Dr Karyn O’Keeffe received excellent feedback. Also specifically thanks to Dr Rachelle Love and Dr Bronwyn Sweeney who organised sessions with excellent speakers from outside the New Zealand sleep medicine community.

Congratulations to Irene Northey who was our New Investigator winner. We would also like to extend a special thank you to our conference sponsors who despite not getting the chance to see anyone face to face still supported the meeting: Fisher & Paykel Healthcare, Intermed and ResMed.

As it has, at least so far, been a messy year, the number of new projects started by the Committee has been limited. Thanks to Dr Andrew Davies who was involved with the team who have been providing advice to the NZ Transport Agency in relation to the Fitness to Drive guidelines.



Annual Report ANZSSA Representative

Firstly, on behalf of ANZSSA, I would like to thank Alan for his excellent work as President through one of the most challenging of times. He has led the ASA, its board and membership in navigating difficult decisions. ANZSSA appreciates the leadership roles that both he and Sutapa took in releasing and updating guidelines for sleep services throughout the pandemic. Additionally, fully engaging with clinical Sleep Scientists in this process, including providing a voice for Scientists at forums. One of the learnings from this was the lack of representation of clinical Sleep Scientists on the Clinical Committee. This has now been addressed with the presence of a couple of Scientists on this committee.

The ASA – ANZSSA relationship is as strong as ever. ANZSSA representatives have collaboratively and eagerly worked with the Conference Committee to provide content for this year's Sleep DownUnder conference. We are optimistic with regards to holding a joint meeting next year in the 'traditional' face to face format, as I am sure the membership of both societies hope for.

ANZSSA has just completed the first year of a new board structure. It is working well, and ANZSSA will be holding elections at this year's AGM for half of the board positions.

ANZSSA is working on increasing educational content for the membership with the addition of more webinars over the next 12 months. A focus of education will also be to cover content relevant to Sleep Scientists wishing to sit an Australian Sleep Science examination. This is in

the process of becoming available, it will be of great benefit to have a local qualification available to Sleep Scientists in Australia. Our New Zealand colleagues have been most helpful with this evolution.

Another organisation that ANZSSA works with is the Australian Council for Clinical Physiologists (ACCP). This organisation promotes the professional standards of clinical Scientists – Sleep, Respiratory, Cardiology and Neurophysiology.

I look forward to serving on the ASA Board over the next year as we adapt to the ever-changing environment in which we operate.

Ms Teanau Roebuck
ANZSSA Representative



financial report

FOR THE YEAR ENDED 30 JUNE 2021

Liability limited by a scheme approved under Professional Standards Legislation

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Statement of changes in equity

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Directors' Report

The directors present their report on the company for the financial year ended 30 June 2021.

Information on Directors

The names of each person who has been a director during the year and to the date of this report are:

Ching Li Chai-Coetzer

Andrew Gikas

Alan Charles Young

Nathaniel Stuart Marshall

Sutapa Mukherjee

Angela Jane Campbell

Jennifer Walsh

Denise O'Driscoll

Teanau Roebuck

Directors appointed 22 October 2020:

David Cunnington

Directors resigned 22 October 2020:

Peter Raymond Eastwood

Directors have been in office since the start of the financial year to the date of this report unless otherwise stated.

Operating Results

The loss of the company amounted to \$24,886 (2020 loss: \$151,474).

Significant Changes in State of Affairs

There have been no significant changes in the state of affairs of the Company during the year.

Principal Activities

The principal activities of the company during the financial year were:

- Drawing up of clinical standards and guidelines
- Overseeing training in the area of clinical sleep medicine
- Provision of quality assurance through credentialing of sleep services, together with the National Association of Testing Authorities (NATA)
- Organisation of an Annual Scientific Meeting, where the latest practice and research is showcased.
- Advocacy with Government and Department of Health

No significant change in the nature of the company's activity occurred during the financial year.

Events After the Reporting Date

No matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of the company, the results of those operations, or the state of affairs of the company in future financial years.

Environmental Issues

The company's operations are not regulated by any significant environmental regulations under a law of the Commonwealth or of a state or territory of Australia.

Indemnification and Insurance of Officers and Auditors

No indemnities have been given or insurance premiums paid, during or since the end of the financial year, for any person who is or has been an officer or auditor of the company.

Auditor's Independence Declaration

The lead auditor's independence declaration in accordance with section 307C of the *Corporations Act 2001*, for the year ended 30 June 2021 has been received and can be found on the following page.

Signed in accordance with a resolution of the Board of Directors:

Director:



Alan Young

Director:



Nathaniel Marshall

Dated this 13th day of September 2021



Auditor's Independence Declaration

UNDER SECTION 307C OF THE CORPORATIONS ACT 2001
TO THE DIRECTORS OF AUSTRALASIAN SLEEP ASSOCIATION

We hereby declare, that to the best of my knowledge and belief, during the financial year ended 30 June 2021 there have been no:

- (i) contraventions of the auditor independence requirements as set out in the *Corporations Act 2001* in relation to the audit; and
- (ii) contraventions of any applicable code of professional conduct in relation to the audit.

Name of Firm: Boyd Audit
Chartered Accountants

Name of Auditor: 
Nathan Boyd
Registered Company Auditor No. 471054

Address: 1.06, 10 Century Circuit, Norwest NSW 2153

Dated this 13th day of September, 2021

Statement of Profit or Loss and Other Comprehensive Income

for the Year ended 30 June 2021

	Note	2021 \$	2020 \$
Income			
Revenue	3	484,742	559,785
Other income	3	(723)	20,755
		484,019	580,540
Expenditure			
Accountancy expenses		(11,607)	(17,007)
Auditor's remuneration		(9,152)	(9,110)
Depreciation and amortisation expenses		(1,572)	(3,550)
Employee benefits expenses		(341,607)	(394,492)
Other expenses	4	(229,895)	(253,466)
Current year loss before income tax		(109,814)	(97,085)
Tax expense		–	–
Net current year loss		(109,814)	(97,085)
Other comprehensive income			
Fair value remeasurement gains/(losses) on available-for-sale financial assets	3	84,928	(54,389)
Other comprehensive income for the year		84,928	(54,389)
Total comprehensive income for the year		(24,886)	(151,474)

The accompanying notes form part of these financial statements.

Statement of Financial Position

as at 30 June 2021

	Note	2021 \$	2020 \$
ASSETS			
Current Assets			
Cash and cash equivalents	5	270,269	245,138
Trade and other receivables	6	322,421	238,426
TOTAL CURRENT ASSETS		592,690	483,564
Non-current assets			
Financial assets	7	967,674	841,305
Property, plant and equipment	8	2,725	12,113
TOTAL NON-CURRENT ASSETS		970,399	853,418
TOTAL ASSETS		1,563,089	1,336,982
LIABILITIES			
Current Liabilities			
Trade and other payables	9	786,516	534,676
Provisions	10	11,172	14,690
TOTAL CURRENT LIABILITIES		797,688	549,366
Non-current Liabilities			
Provisions	10	14,836	12,165
TOTAL NON-CURRENT LIABILITIES		14,836	12,165
TOTAL LIABILITIES		812,524	561,531
NET ASSETS (LIABILITIES)		750,565	775,451
EQUITY			
Retained surplus	11	750,565	775,451
TOTAL EQUITY		750,565	775,451

The accompanying notes form part of these financial statements.

Statement of Changes in Equity

for the Year ended 30 June 2021

	Note	Retained surplus \$	Total \$
Balance at 1 July 2019		926,925	926,925
Loss attributable to members of the entity		(151,474)	(151,474)
Balance at 30 June 2020		775,451	775,451
Loss attributable to members of the entity		(24,886)	(24,886)
Balance at 30 June 2021		750,565	750,565

Statement of Cash Flows

for the Year ended 30 June 2021

	Note	2021 \$	2020 \$
Cash Flows from Operating Activities			
Membership fees received		269,106	312,589
Conference income received		181,224	102,401
Grant income		36,323	45,000
Other income received		59,342	153,945
Payments to suppliers, employees & others		(511,522)	(816,534)
Interest received		2,140	3,437
Net cash provided by (used in) operating activities	12	36,613	(199,162)
Cash Flows from Investing Activities			
Proceeds from sale of property, plant and equipment		323	–
Proceeds from sale of available-for-sale investments		176,511	409,959
Earnings received from investments		25,062	62,236
Payments for available-for-sale investments		(213,378)	(321,713)
Net cash provided by (used in) investing activities		(11,482)	150,482
Net increase/(decrease) in cash held		25,131	(48,680)
Cash at beginning of financial year		245,138	293,818
Cash at end of financial year	5	270,269	245,138

The accompanying notes form part of these financial statements.

Notes to the Financial Statements

for the Year ended 30 June 2021

The financial statements cover the business of Australasian Sleep Association as an individual entity, incorporated and domiciled in Australia. Australasian Sleep Association is a company limited by guarantee. The financial statements were authorised for issue on 13 September 2021 by the directors of the company.

1 Basis of Preparation

The Company is non-reporting since there are unlikely to be any users who would rely on the general purpose financial statements.

The special purpose financial statements have been prepared in accordance with the significant accounting policies described below and do not comply with any Australian Accounting Standards unless otherwise stated.

The financial statements have been prepared on an accruals basis and are based on historical costs modified, where applicable, by the measurement at fair value of selected non-current assets, financial assets and financial liabilities.

The significant accounting policies adopted in the preparation of these financial statements are presented below and are consistent with prior reporting periods unless otherwise stated.

2 Summary of Significant Accounting Policies

Property, Plant and Equipment

Each class of property, plant and equipment is carried at cost or fair value less, where applicable, any accumulated depreciation and impairment.

Plant and equipment

Plant and equipment are measured using the cost model.

Depreciation

Property, plant and equipment excluding freehold land, is depreciated on a straight line basis over the asset's useful life to the Company, commencing when the asset is ready for use.

Leased assets and leasehold improvements are amortised over the shorter of either the unexpired period of the lease or their estimated useful life.

The depreciation rates used for each class of depreciable asset are shown below:

Plant & Equipment **20%**

Financial Instruments

Financial instruments are recognised initially using trade date accounting, i.e. on the date that company becomes party to the contractual provisions of the instrument.

On initial recognition, all financial instruments are measured at fair value plus transaction costs (except for instruments measured at fair value through profit or loss where transaction costs expenses as incurred).

Loans and receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. They arise principally through the provision of goods and services to customers but also incorporate other types of contractual monetary assets.

After initial recognition these are measured at amortised cost using the effective interest method, less provision for impairment. Any change in their value is recognised in profit or loss.

The company's trade and most other receivables fall into this category of financial instruments.

In some circumstances, the company renegotiates repayment terms with customers which may lead to changes in the timing of the payments, the company does not necessarily consider the balance to be impaired, however assessment is made on a case-by-case basis.

Available-for-sale financial assets

Available-for-sale financial assets are non-derivative financial assets that do not qualify for inclusion in any of the other categories of financial assets or which have been designated in this category. The company's available-for-sale financial assets comprise listed securities.

All available for sale financial assets are measured at fair value, with subsequent changes in value recognised in other comprehensive income.

Gains and losses arising from financial instruments classified as available-for-sale are only recognised in profit or loss when they are sold or when the investment is impaired.

In the case of impairment or sale, any gain or loss previously recognised in equity is transferred to the profit or loss.

A significant or prolonged decline in value of an available-for-sale asset below its cost is objective evidence of impairment, in this case, the cumulative loss that has been recognised in other comprehensive income is reclassified from equity to profit or loss as a reclassification adjustment. Any subsequent increase in the value of the asset is taken directly to other comprehensive income.

Impairment of Non-Financial Assets

At the end of each reporting period the company determines whether there is an evidence of an impairment indicator for non-financial assets.

Where this indicator exists and regardless for goodwill, indefinite life intangible assets and intangible assets not yet available for use, the recoverable amount of the assets is estimated.

Where assets do not operate independently of other assets, the recoverable amount of the relevant cash-generating unit (CGU) is estimated.

The recoverable amount of an asset or CGU is the higher of the fair value less costs of disposal and the value in use. Value in use is the present value of the future cash flows expected to be derived from an asset or cash-generating unit.

Where the recoverable amount is less than the carrying amount, an impairment loss is recognised in profit or loss.

Reversal indicators are considered in subsequent periods for all assets which have suffered an impairment loss.

Cash and Cash Equivalents

Cash and cash equivalents comprises cash on hand, demand deposits and short-term investments which are readily convertible to known amounts of cash and which are subject to an insignificant risk of change in value.

Employee Benefits

Provision is made for the company's liability for employee benefits arising from services rendered by employees to the end of the reporting period. Employee benefits that are expected to be wholly settled within one year have been measured at the amounts expected to be paid when the liability is settled.

Employee benefits expected to be settled more than one year after the end of the reporting period have been measured at the present value of the estimated future cash outflows to be made for those benefits. In determining the liability, consideration is given to employee wage increases and the probability that the employee may satisfy vesting requirements. Cash flows are discounted using market yields on high quality corporate bond rates incorporating bonds rated AAA or AA by credit agencies, with terms to maturity that match the expected timing of cash flows. Changes in the measurement of the liability are recognised in profit or loss.

Provisions

Provisions are recognised when the company has a legal or constructive obligation, as a result of past events, for which it is probable that an outflow of economic benefits will result and that outflow can be reliably measured.

Revenue and Other Income

Revenue is recognised when the amount of the revenue can be measured reliably, it is probable that economic benefits associated with the transaction will flow to the company and specific criteria relating to the type of revenue as noted below, has been satisfied.

Revenue is measured at the fair value of the consideration received or receivable and is presented net of returns, discounts and rebates.

Interest revenue

Interest revenue is recognised using the effective interest rate method.

Rendering of services

Revenue in relation to rendering of services is recognised depends on whether the outcome of the services can be measured reliably. If this is the case then the stage of completion of the services is used to determine the appropriate level of revenue to be recognised in the period. If the outcome cannot be reliably measured then revenue is recognised to the extent of expenses recognised that are recoverable.

Comparative Amounts

Comparatives are consistent with prior years, unless otherwise stated.

Where a change in comparatives has also affected the opening retained earnings previously presented in a comparative period, an opening statement of financial position at the earliest date of the comparative period has been presented.

	2021	2020
	\$	\$
3 Revenue and Other Income		
Income		
Membership subscriptions	246,846	257,032
Conference income	181,224	112,728
Grant received	36,323	45,000
Sleep Health Foundation fees	3,094	70,405
Sundry income	15,432	70,771
Foreign currency translation gains	–	412
Interest received	1,823	3,437
	484,742	559,785
Other income		
Dividend and investment (losses)/earnings received	(723)	20,755
Fair value remeasurement gains /(losses) on available-for-sale financial assets	84,928	(54,389)
	84,205	(33,634)
	568,947	526,151

During the year, net realised and unrealised gains of \$127,366 was earned from available-for-sale financial assets held. This amount comprised of unrealised gains of \$127,503 and realised losses of \$137. Earnings have been allocated to special funds held on trust on a pro-rata basis, with the balance recognised as earnings of the company. The total earnings allocated to special funds for the current year totalled \$42,530, representing 33.4% of total net investment earnings.

4 Expenses

Advertising & promotion	2,455	5,550
Awards & grants	1,000	18,700
Bank charges	3,507	5,015
Cleaning	1,217	3,976
Consultants fees	1,100	29,565
Conference expenditure	115,598	36,785
Donations	3,104	175
Filing fees	340	–
Foreign currency translation losses	643	–
Insurance	4,178	6,359
Computer & IT service expenses	11,602	9,542
Legal costs	5,888	–

	2021	2020
	\$	\$
Loss on sale of fixed assets	7,493	–
Board meeting expenses	4,846	4,065
Office expenses	3,002	7,871
Printing & stationery	5,935	3,164
Rent & outgoings	17,596	33,738
Research & special projects	33,485	81,312
Staff & board training	969	378
Subscriptions	2,498	2,963
Telephone & internet	2,736	3,875
Travelling, accommodation & meals	703	433
	<u>229,895</u>	<u>253,466</u>

5 Cash and Cash Equivalents

Cash at bank	205,489	175,604
Savings account	8	218
Petty cash	31	31
Cash at bank - NZ	23,434	17,826
Cash at bank - JBWere	4,154	15,451
Deposits at call	37,153	36,008
	<u>270,269</u>	<u>245,138</u>

Reconciliation of cash

Cash and cash equivalents reported in the statement of cash flows are reconciled to the equivalent items in the statement of financial position as follows:

Cash and cash equivalents	270,269	245,138
	<u>270,269</u>	<u>245,138</u>

6 Trade and Other Receivables

Trade debtors	1,873	20,350
Prepayments	121,507	91,091
Other debtors	22,616	29,737
Deposits paid	176,425	97,248
	<u>322,421</u>	<u>238,426</u>

7 Other Financial Assets

Non-Current

Available-for-sale financial assets	967,674	841,305
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	2021	2020
	\$	\$
8 Property, Plant and Equipment		
Plant and Equipment:		
At cost	7,323	51,657
Accumulated depreciation	(4,598)	(39,544)
Total Plant and Equipment	2,725	12,113
9 Trade and Other Payables		
Current		
Trade creditors	49,459	15,477
Credit card liabilities	1,574	1,386
GST liabilities	14,326	16,082
PAYG tax payable	4,727	7,381
Income in advance	311,659	146,536
ASA research grant	40,000	40,000
Other creditors	9,201	3,139
Rob Pierce Fund	38,840	34,180
Helen BearPark Fund	267,364	232,562
Nick Antic Fund	44,366	37,933
Travel Grants Held	5,000	–
	786,516	534,676
10 Provisions		
Current		
Provision for annual leave	11,172	14,690
Non-Current		
Provision for long service leave	14,836	12,165
11 Retained Surplus		
Retained surplus at the beginning of the financial year	775,451	926,925
Net loss attributable to members of the company	(24,886)	(151,474)
Retained surplus at the end of the financial year	750,565	775,451

	2021	2020
	\$	\$
12 Cash Flow Information		
Reconciliation of Cash Flow from Operations with Profit after Income Tax		
Loss after income tax	(24,886)	(151,474)
Non-cash flows in profit		
Depreciation expense	9,065	3,550
(Gains)/losses on available-for-sale investments	(84,205)	32,633
Changes in assets and liabilities		
(Increase)/Decrease in trade and other receivables	(71,612)	(47,964)
(Increase)/Decrease in prepayments	(30,416)	(67,669)
Increase/(Decrease) in payables	35,822	8,505
Increase/(Decrease) in income in advance	203,692	86,990
Increase/(Decrease) in employee provisions	(847)	(63,733)
	36,613	(199,162)

13 Company Details

The registered office and principal place of business of the Company is:

Australasian Sleep Association
Level 1, 5 George Street
North Strathfield NSW 2137

14 Members' Guarantee

The entity is incorporated under the Corporations Act 2001 and is a company limited by guarantee. If the company is wound up, the constitution states that each member is required to contribute a maximum of \$10 each towards meeting any outstanding obligations of the company. At 30 June 2021 the number of members was 915 (2020: 950).

Directors' Declaration

The directors have determined that the company is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies described in Note 1 to the financial statements.

The directors of the company declare that:

1. The financial statements and notes, as set out in this report, for the year ended 30 June 2021 are in accordance with the Corporations Act 2001 and:
 - (a) comply with the Australian Accounting Standards applicable to the company; and
 - (b) give a true and fair view of the financial position of the company as at 30 June 2021 and of its performance for the year ended on that date in accordance with the accounting policies described in Note 1 to the financial statements.
2. In the directors' opinion there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Board of Directors.

Director:



Alan Young

Director:



Nathaniel Marshall

Dated this 13th day of September, 2021



Independent Auditor's Report

TO THE MEMBERS OF AUSTRALASIAN SLEEP ASSOCIATION
ABN 51 138 032 014

Opinion

We have audited the accompanying financial report, being a special purpose financial report, of Australasian Sleep Association which comprises the statement of financial position as at 30 June 2021, the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the directors' declaration by those charged with governance.

In our opinion, the accompanying financial report presents fairly, in all material respects, the financial position of the Company as at 30 June 2021, and of its financial performance and its cash flows for the year then ended in accordance with Australian Accounting Standards.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of our report. We are independent of the Entity in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Information Other than the Financial Report and Auditor's Report Thereon

Those charged with governance are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 30 June 2021, but does not include the financial report and our auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of Management and Those Charged with Governance for the Financial Report

Management is responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards, and for such internal control as management determines is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

In preparing the financial report, management is responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Company's financial reporting process.



Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists.

Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial report.

Name of Firm: Boyd Audit
Chartered Accountants

Name of Auditor: 
Nathan Boyd
Registered Company Auditor No. 471054

Address: 1.06, 10 Century Circuit Norwest NSW 2153

Dated this 13th day of September, 2021



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