Wake Up Australia: The Value of Healthy Sleep 2004

This report commissioned by the Committee of Sleep Health Australia (pre Sleep Health Foundation) and prepared by Access Economics in 2004. The report was funded by an unrestricted grant from the ResMed Foundation Limited who had no part in the direction or findings contained in this report.

Subsequent publications:

The Sleep Health Foundation national survey, 2010

A national landline telephone survey was undertaken of adolescents and adults (14 to > 70 years of age) across successive weekend evenings. The survey contained 14 questions about sleep: five about sleeping difficulty, two about snoring and OSA, one about restless legs, one about sleeping medication, three about daytime impairments usually associated with sleep disturbance, and two about nocturnal sleep duration. There were 1512 respondents from all states and territories, both urban and rural, with sampling proportionate to the populations of those areas, sex and age.

Subsequent publications:

Re-Awakening Australia – the economic cost of sleep disorders in Australia 2010

This economic report commissioned by the Sleep Health Foundation reveals sleep disorders cost the Australian economy more than $5.1 billion a year in health care and indirect costs. In addition, the reduction in life quality caused by sleep disorders has a further cost equivalent of $31.4 billion a year. The report, ‘Re-awakening Australia – The Economic Cost of Sleep Disorders in Australia’ highlights more than 1.5 million Australian adults, 9% of the adult population, now suffer from sleep disorders.

The report was commissioned by the Sleep Health Foundation conducted by Deloitte Access Economics.

Subsequent publications:

Sleep and Mental Wellbeing – exploring the links

A research report from health promotion foundation ViHealth and the Sleep Health Foundation has found Australian teenagers are missing out on crucial sleep, with screen time, caffeine and stress keeping them awake. The research found that the average teenager only got between 6.5 and 7.5 hours of sleep a night, well under the recommended 8-10 hours, and it was seriously impacting their mental wellbeing, with increased rates of depression, anxiety and low self-esteem among sleep-deprived teens.

Subsequent publication: in preparation

2016 Sleep Health Survey of Australian Adults

This study, commissioned by the Sleep Health Foundation and undertaken by a University of Adelaide team, surveyed the sleep health and daytime performance of Australian adults in 2016.

Subsequent publications:


Asleep on the Job: costs of inadequate sleep in Australia

The report, prepared by Deloitte Access Economics, investigated the economic consequences of inadequate sleep in the 2016-17 financial year.

Inadequate sleep and daytime excessive sleepiness can arise from poor personal sleep habits, pressure from other activities, shift work or when people experience common sleep disorders such as insomnia and obstructive sleep apnoea (OSA).

This is the third report commissioned by the Sleep Health Foundation about the costs and consequences of sleep disorders and/or poor sleep. Previous reports were published in 2003 and 2010

Subsequent publications:

Cost effectiveness of CPAP Therapy for the Treatment of Obstructive Sleep Apnoea

This report, commissioned by the Sleep Health Foundation, conducts a comprehensive evidence synthesis from national and international medical literature examining the healthcare impact of obstructive sleep apnoea, and the beneficial effects of CPAP treatment and carefully translates this evidence into an economic assessment. The report concludes that the economic cost of not recognising or not treating obstructive sleep apnoea outweighs the cost of intervention. From this perspective the report illustrates the economic benefits of investing in effective therapies for obstructive sleep apnoea. Australia is a world leader in research and technology relevant to obstructive sleep apnoea. The report conclusions highlight the additional need for healthcare policy initiatives leading to increased diagnosis and affordable treatment of this widespread health condition. Such public health initiatives will provide important benefits at the individual, community and national economic level.
A consensus opinion amongst stakeholders as to benefits of obstructive sleep apnoea treatment for cardiovascular health

Obstructive sleep apnoea (OSA) is a prevalent sleep disorder associated with increased cardiovascular morbidity and mortality. Whether treatment of OSA improves cardiovascular risk remains controversial. Our aim was to determine a consensus opinion of key sleep medicine stakeholder groups as to the cardiovascular benefits of treating moderate–severe OSA.

Subsequent publications:

Sleep Health in Australia's Federal Parliament House

This report describes the sleep habits of individuals working at Parliament House in Canberra. This Actiwatch study of the sleep habits of 50 politicians, staffers and media people was conducted in late 2018 over one week when Parliament was sitting and one week when they were not sitting. It found that half of all participants were not achieving their 7-9 hours of recommended sleep during either of the two time periods and some were sleeping for as little as 3.5 hours per night during sitting.

Future Funding

The Foundation has secured further funding, with the help of untied grants from the ResMed Foundation and the MSD Foundation to examine the cost-effectiveness of CPAP therapy for obstructive sleep apnea (again utilising the health economics expertise of Deloitte Access Economics) and the epidemiology of insomnia (again with the involvement of the University of Adelaide sleep epidemiology team led by Robert Adams). These projects have been commissioned and are currently in progress. We look forward to reporting the results to you and the community generally within the coming year.

All this work is vital in providing informed advice to the community and its leaders regarding the extent of sleep difficulties amongst Australians and their cost to the nation.

Other

Bedtime reading – Parliamentary Inquiry Report

The Federal Government Report on the Inquiry into Sleep Health Awareness was tabled in Parliament on 4 April 2019. We are pleased to report that the recommendations appear to be thorough, well-targeted and helpful towards fulfilling our aim of improving Australia’s sleep health. The next important step is to ensure that the recommendations are funded and fully implemented.

This Report from the Inquiry represents the culmination of the advocacy efforts over the last two years of the Sleep Health Foundation and Australasian Sleep Association, plus the efforts of patient, workplace safety and other community groups. The quality of the report has been enhanced by the very large number of submissions to the inquiry (138), reflecting both the importance of the issues and the neglect of this significant health area. The report has an impressively wide range of recommendations, which have been influenced by the breadth of submissions. These recommendations, if followed, will take sleep health, sleep medicine and sleep science to a new and proper level within the community.

Many thanks to all our supporters and those also working towards the goal of improving the valuing of sleep in our community.


Carers Australia Report: Reducing Sleep Disruption in Carers

Dr Sarah Jay*, Dr Grace Vincent, Ms Katya Kovac, A/Prof Jill Dornian, A/Prof Matthew Thomas, Dr Amy Reynolds, Prof Sally Ferguson CQUniversity - Appleton Institute 44 Greenhill Rd, Wayville SA 5034 *corresponding author; s.jay@cqu.edu.au

This report was funded through a grant from Carers Australia and managed through the Sleep Health Foundation. The research team completed all parts of this report with Professors Dorothy Bruck and David Hillman from the Sleep Health Foundation, providing comments and feedback on the final draft documents.

Carers are those who provide unpaid care to one or more people (usually but not always a relative) with a disability, chronic illness, mental health condition, terminal illness, or who are frail aged. The value of support and assistance provided by Australia’s 2.7 million informal or family carers is significant from both an economic and quality of life perspective for care recipients. However, provision of care 24 hours a day, 7 days a week has obvious repercussions for the carer themselves. Sleep disruption is one of the repercussions.
Go to www.sleephealthfoundation.org.au to download our expert-written Sleep Health Fact Sheets...

ADHD and Sleep in Children
Advanced Sleep Phase Disorder (ASPD)
Ageing and Sleep
Anaesthesia, Sleep and Sleep Apnea
Anxiety and Sleep
Bedwetting
Behavioural Sleep Problems in School Aged Children
Body Clock
Caffeine and Sleep
Caffeine, Food, Alcohol, Smoking and Sleep
Caring for your CPAP Equipment
Central Sleep Apnea
Childhood Snoring and Sleep Apnea
Chronic Fatigue Syndrome and Sleep
Common Causes of Inadequate Sleep
Common Sleep Disorders
CPAP - Continuous Positive Airway Pressure
CPAP Making it Work for You
Daylight Saving and Sleep
Delayed Sleep Phase Syndrome (DSPS)
Dementia and Sleep
Depression and Sleep
Diabetes and Sleep
Drowsy Driving
Excessive Daytime Sleepiness
Facts About Dreaming
Facts about Sleep
Facts about Sleep for Parents and School Staff
Fatigue as an Occupational Hazard
Good Sleep Habits
Herbal Remedies and Sleep
How Much Sleep Do You Really Need?
Idiopathic Hypersomnia
Incontinence (Nocturia)
Insomnia
Melatonin
Melatonin and Children
Memory, Thinking and Sleep
Menopause and Sleep
Menstrual Cycle and Sleep
Napping
Narcolepsy
Nightmares
Obstructive Sleep Apnea
Oral Appliances to Treat Snoring and Obstructive Sleep Apnea
Periodic Limb Movements of Sleep (PMLS)
Post Traumatic Stress Disorder
Pregnancy and Sleep
REM Sleep Behaviour Disorder
Restless Legs Syndrome
Safe Sleeping for Babies
Schizophrenia and Sleep
Shiftwork
Sleep Mistakes
Sleep Myths
Sleep Problems and Sleep Disorders in School Aged Children
Sleep Specialists
Sleep Study
Sleep Terrors
Sleep Tips for Children
Sleep Tips for New Mothers
Sleep Tracker Technology
Sleeping Better in Your Hotel
Sleeping Tablets
Sleepwalking
Snoring
Surgery for Obstructive Sleep Apnea (OSA)
Technology & Sleep
Teenage Sleep
Teeth Grinding/Bruxism
Ten Tips for a Good Night Sleep
Tips to Help Baby Sleep Better
Tips to Help Combat Jet Lag
Travelling with CPAP
Treatment Options for Obstructive Sleep Apnea (OSA)
Understanding and Helping Poor Sleep
Our Mission and Priorities

Our mission
Improving people’s lives through better sleep

Our strategic priorities
• Advocacy
• Health Promotion
• Community Education
• Working in partnership
• Assuring sleep therapy best practice
• Research

Our collaborations
To meet our goals we work in partnership with other research, professional and patient advocacy groups including
• Australasian Sleep Association
• Australian Men’s Shed Association
• Australian Idiopathic Hypersomnia All Help and Support Carers Australia
• CRC for Alertness, Safety and Productivity
• HealthDirect
• Healthily
• HerHeart
• Kiddipedia
• Lung Foundation
• Narcolepsy Australia
• Narcolepsy and Overwhelming Daytime Sleep Society (NODSS)
• Wellbeing in Schools
What a momentous year it has been for the Sleep Health Foundation. As you will see in these pages, we have achieved many things in 2018-2019 but the biggest is also a world first.

To our knowledge Australia is the first country where the government has held a national inquiry into sleep health. The joint advocacy efforts of the Sleep Health Foundation and the Australasian Sleep Association in securing this inquiry led to the organisations being jointly awarded the highly prestigious Achievement of the Year 2019 Award by the Associations Forum.

Our joint political advocacy efforts, which sought to convince the federal government to significantly increase the national profile of sleep health, led to the Federal Government announcing a Parliamentary Inquiry into Sleep Health Awareness in September 2018, to be undertaken by its Health, Ageing and Sport Committee. The community response to the call for submissions was overwhelming, with 138 submissions and 30 exhibits being received. Hearings were held in Perth, Melbourne, Canberra and Sydney.

We waited with great anticipation, and some trepidation, for the report of the Inquiry. The trepidation came from the looming end of the parliamentary sitting session in April 2019 and the calling of the election; if it wasn’t tabled before Parliament finally rose then it may all have been (literally) for nothing. Thankfully the report, entitled Bedtime Reading, was tabled at the eleventh hour, just before caretaker mode began. We were all impressed with the report, supported the 11 recommendations, and are now working to ensure as many recommendations as possible get implemented.

The Foundation has developed and submitted a pre-budget proposal for a National Sleep Health Awareness Campaign, requesting $18.3 million and we understand this is still under consideration. In fact, Inquiry Recommendation 9 calls for such a campaign and specifically says our proposal should be seen as ‘a solid basis and estimate of costs for such a campaign’. We are working on further details and are particularly keen that the campaign is ambitious and aims for real change around sleep/wake behaviours.

Another political advocacy activity was our work, as part of a team with the ASA and others, to produce a report describing the sleep habits of individuals working at Parliament House, using wrist actigraphy and sleep diaries. Some participants slept as little as 3.5 hours during the parliamentary sitting period.

A commissioned study on the cost effectiveness of continuous positive airway pressure for obstructive sleep apnoea (OSA) reported what many of us have long suspected; the economic cost of NOT recognising or treating OSA outweighs the cost of intervention. Professor David Hillman’s efforts have led to this report, as well as the 2017 Asleep on the Job report, being published in the international journal Sleep. Our South Australian colleagues, led by Professor Robert Adams, have been busy producing recent publications in Sleep Health, Chronobiology and Sleep Medicine from the SHF Survey of Adult Sleep (2016). We await further details from their recently completed Sleep Health Foundation Prevalence of Insomnia Survey. These reports fill an important gap in our understanding of sleep health within the public health, health economics and epidemiological spheres of sleep health and have only been made possible by generous untied grants from our partners.

In the following pages you will also note that that the Foundation has been very busy with its highly active media profile, ever-growing Speaker Program, collaborations and corporate partnerships. We value the ongoing, critically important, membership of our sponsors who form our Business Council, with the Council offering a purely advisory role to the Foundation. Our Healthy Sleep Partner program has been boosted over the last year with new corporate partners and we have fostered new productive relationships with other not-for-profit organisations such as Carers Australia and Wellbeing in Schools.

As a small, but highly active organisation, we draw significantly on the efforts of our Board Directors, who generously volunteer their time for Foundation activities. We are also fortunate indeed for the ongoing dedication of our Executive Secretary, Helen Burdette.

Thank you for taking the time to peruse this Annual Report. I am sure you will be impressed by the range of activities we undertake and the success of our endeavours. In next year’s annual report, I hope to be able to report that many of the Bedtime Reading report recommendations are being implemented by our Federal and State governments.
Achievements & Advocacy

While continuing to build our case for more government action in improving sleep health we undertook a number of activities.

Announcement of Inquiry into Sleep Health Awareness in Australia

The Sleep Health Foundation and the Australasian Sleep Association were delighted with the announcement on 13 September 2018 that the Federal Parliamentary Standing Committee on Health, Aged Care and Sport had commenced an Inquiry into Sleep Health Awareness in Australia.

The terms of reference were to inquire into and report on sleep health awareness in Australia, in particular:

1. The potential and known causes, impacts and costs (economic and social) of inadequate sleep and sleep disorders on the community;
2. Access to, support and treatment available for individuals experiencing inadequate sleep and sleep disorders, including those who are: children and adolescents, from culturally and linguistically diverse backgrounds, living in rural, regional and remote areas, Aboriginal and Torres Strait Islander;
3. Education, training and professional development available to healthcare workers in the diagnosis, treatment and management of individuals experiencing inadequate sleep and sleep disorders;
4. Workplace awareness, practices and assistance available to those who may be impacted by inadequate sleep or sleep disorders, with a focus on: rostering practices for shift workers, heavy-work requirements, and the transport industry as compared to international best practice; and
5. Current national research and investment into sleep health and sleeping disorders.

Research to support our Advocacy work

New Report on Cost Effectiveness of CPAP for Treatment of OSA

This Deloitte Access Economics report was commissioned by the Sleep Health Foundation with the support of untied funding from Resmed Foundation, to conduct a comprehensive evidence synthesis from national and international medical literature examining the healthcare impact of obstructive sleep apnoea and the beneficial effects of CPAP treatment, and to carefully translate this evidence into an economic assessment.

The report concluded that the economic cost of not recognising or not treating obstructive sleep apnoea outweighs the cost of intervention. From this perspective the report illustrated the economic benefits of investing in effective therapies for obstructive sleep apnoea. Australia is a world leader in research and technology relevant to obstructive sleep apnoea.

The report conclusions highlight the additional need for healthcare policy initiatives leading to increased diagnosis and affordable treatment of this widespread health condition. Such public health initiatives will provide important benefits at the individual, community and national economic level.

Sleep Health in Australia’s Federal Parliament House

A world-first study involving sleep data from 50 individuals, all working in parliament house was completed. Participants included MPs and senators across all parties, parliamentary staff and a few permanent press gallery senior journalists, all of whom were keen to get involved to better understand their sleep.

MPs, senators and staffers donned ‘actiwatches’ to track their sleep and activity for two sitting weeks of parliament, showing for the first time what hours they keep and how much shut-eye they get.

Of particular concern is that during the weekdays of the sitting period some participants slept as little as 3.5 hours per night.

“Government needs to recognise sleep as the third pillar of health, alongside diet and exercise, and a Parliamentary Inquiry was the way to achieve this”.

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Sleep Health Foundation Annual Report 2019
The project was instigated by the country’s two peak sleep organisations, Sleep Health Foundation and Australasian Sleep Association, with the support of the University of Western Australia, Canberra Sleep Clinic, Actigraph LLC, Curtin University, The Western Australian Pregnancy Cohort (Raine) Study and Executive Counsel Australia.

Pre-budget submission – addressing inadequate sleep in the Australia community

This pre-budget submission to the Federal government was made jointly by the Sleep Health Foundation and Australasian Sleep Association and requested funding to address a growing national problem with important health, well-being and economic consequences: inadequate sleep.

Following the advice of our advocacy consultants we were ambitious. We requested funds for (i) a National Community Education Campaign to improve awareness and behaviours around sleep health and (ii) National Education Programs for Health Professionals to better equip GPs and the allied health workforce to deal with sleep health issues. The total request was $29.2 million over four years. We understand from recent correspondence that our submission is still under active consideration.

All of the above reports are available on our website.

In July we were delighted to receive the Achievement of the Year Award at the Associations Forum National Conference in Canberra.

This honour was awarded jointly to the Sleep Health Foundation and the Australasian Sleep Association for successfully advocating for the Federal Government to call a Parliamentary Inquiry into Sleep Health Awareness. This is a highly competitive and prestigious award which was accepted on behalf of the two organisations by Helen Burdette and Stephanie Blower at Parliament House in Canberra.

A key recommendation from the Inquiry was the acknowledgement of sleep as the third pillar of good health, alongside healthy eating and exercise, paving the way for policy development in the area with an avenue to obtain funding.

The commitment and dedication shown by the two volunteer Boards and members of both associations has been outstanding, and everyone involved should be commended for the energy, drive and passion they provided in achieving a successful outcome.

The success should not be underestimated. We are two relatively small associations, with a total combined staff of three FTE’s. We have demonstrated what is possible when two like-minded not-for-profit organisations join together on an important issue.

Having the Federal Government call a Parliamentary Inquiry, seek submissions, hold hearings and table a report was a success, as was the Government’s acknowledgement that good sleep should be considered a national health priority. The next step for our organisations is to encourage the newly re-elected Coalition Government to provide funding for all of the 11 recommendations in its report.

Thank you to the members and stakeholders of both our organisations for their continued encouragement and support.

Better awareness plus changing behaviours around sleep health is vital to improving the wellbeing of the 40% of Australians who have inadequate sleep.”

— Professor Dorothy Bruck
The Foundation’s working committees provide forums to plan, deliver and review our various strategic goals. The current configuration is:

- Executive Committee
  - Business Council
- Code of Practice Committee
- Finance, Fundraising, Donations and Partnerships Committee
- Marketing, Communications and Membership Committee
- Engagement and Relationships Committee
  - Community Advocacy for Sleep Health sub-committee

The Code of Practice for Suppliers of CPAP therapies now endorses 55 businesses across the spectrum from single centre to multi-outlet chains. The Sleep Health Foundation has been reflecting on the possible transition process for the assessment of applications for the code of practice for the sale of CPAP devices to NATA and it was recently decided not to progress this option. The current process for internal assessment appears to be working more in line with people’s expectations than was previously the case. We hope that this decision to retain the assessment internally will see many more providers apply for certification so that we can list their business details on our website.

Marketing and Communications Committee
Committee members: Moira Junge
(Chair), Siobhan Banks, Dorothy Bruck, Alex Wolkow, Jennifer Low, Helen Burdette

World Sleep Day (WSD)
March 15, 2019

Theme: Ageing and Sleep Health in our society

The SHF led the WSD celebrations in Australia. The focus was on raising awareness about how important sleep is to improve and maintain your future physical and mental health, and how the amount of sleep we need changes as we age. Healthier ageing and a better understanding of how to sleep better as we age will help to reduce the overall burden of poor health.

We had a significant amount of coverage in traditional and social media.

We found more than half (52 per cent) of older people wake a lot in the night, compared to 40 per cent of younger people. They’re also more likely to wake too early (40 vs 33 per cent) and have just as much difficulty falling asleep at night.”

— Professor Robert Adams
Sleep Awareness Week, SAW (August 5-11 2018)

Theme: Could caffeine be masking a sleep disorder?

The focus for this campaign was on raising awareness about how caffeine may affect sleep and possibly disguise symptoms of tiredness associated with sleep disorders. There can be a great deal of pleasure and positivity surrounding the drinking of caffeine but there is also evidence suggesting it’s time to examine our relationship with caffeine more closely. Moreover, thousands of Australian snorers could be using caffeine to mask a sleep disorder that is robbing them of a good night’s sleep.

The media coverage, including social media, was excellent for this event and continues to grow each year.

Sleep Health Foundation activity at Sleep DownUnder conference in 2018

Last year, our committee pledged to have a strong SHF presence at the annual ASA Sleep DownUnder conference. We hosted a high profile evening ‘The Sleep Health Foundation Great Debate’. The topic of the debate “The notion that we are sleeping less than we used to is just fake news!”.

Thanks to the two teams who provided interesting and inventive arguments to the audience at this very well attended event. Nat Marshall, Nick Glozier, Angela Campbell, Slobhan Banks, Michael Hlavac, Sarah Jay and Sean Drummond (adjudicator).

Hans Van Dongen, one of the keynote speakers at the conference participated in the SHF symposium “Paying Homage to the Circadian System”. This was a very well attended and deemed a success.

We look forward to the 2019 conference where we will be hosting another debate and breakfast symposium.

Membership

The Sleep Health Foundation membership totalled 268 as at 30 June 2019. Membership fees support the community education work of the Foundation and the network of members enable us to recruit new speakers for our Speaker Program. While the Foundation is gaining ground in its efforts to educate the community, industry and government about the importance of sleep our membership remains static rather than growing. There will need to be a concerted effort in the coming year to grow the membership numbers.

Regular partnership with radio segment on ABC 774

The Sleep Health Foundation were invited this year to have a regular monthly sleep segment on the first Monday of every month at 3pm. Different sleep topics are discussed and talk back calls are fielded by various SHF experts. It is a very popular and successful segment and we will look at expanding this to be a national initiative in 2020 and beyond.

“Up to 40 per cent of Australians don’t get enough sleep to function at their peak, and we suspect our politicians, with their demanding work schedules, may be among the worst offenders.” — Dr Stuart Miller
Sleep Health Foundation Fact sheets

Alex Wolkow

The number of new fact sheets on the Sleep Health Foundation (SHF) website has continued to grow over the past year. In total, there has been the addition of 5 new fact sheets this year which have spanned areas such as Diabetes and Sleep, Daylight Savings and Sleep, and Safe Sleeping for Babies. This year, the SHF also launched the new Memory, Thinking and Sleep fact sheet which coincided with the theme of the 2019 Sleep Awareness Week of ‘Sleep on it – memory and problem solving’. We also added the Sleep Facts for Parents and Teachers which was developed in collaboration with WISA Wellbeing in Schools Australia and University of South Australia.

The SHF is also committed to ensuring our current fact sheets stay up to date with the latest research and treatment practices. To achieve this goal, the SHF has continued to conduct reviews of some of its most popular fact sheets on the website, which this year included an expert review of the Ageing and Sleep and Herbal Remedies and Sleep fact sheets. The SHF are extremely grateful to all the experts that have generously volunteered their time to updating and developing these evidence-based fact sheets for the SHF website.

The review and development of fact sheets is an important task for the SHF, and I have had the privilege of leading this as part of my role with the SHF Marketing and Communications Committee. This role has provided me with a unique opportunity to manage the development, review and distribution of sleep fact sheets designed to enhance sleep health in the Australian community. Through this rewarding experience, I have also developed skills in leadership and effective science communication, and have broadened my knowledge and professional networks in different areas of sleep health. It is an absolute pleasure to be involved in the SHF and work alongside a group of inspiring and talented individuals who are committed towards achieving the SHF goal of improving people’s lives through better sleep.

Media campaigns

This year the Foundation had a lot of sleep health related information to share. The following media releases were distributed, enabling key messages to reach the Australian community through extensive print, radio, TV and online media:

• One in three Aussies ‘Socially jet-lagged’ – study

Social jetlag – when a person’s natural body clock and daily routine don’t align – is robbing many adult Australians of refreshing quality sleep at night, new research from a Sleep Health Foundation survey found. The study’s lead author was Robert Adams, Professor of Medicine from the University of Adelaide and the findings were published in the prestigious international journal Sleep Medicine. It found that in 31 per cent of those surveyed, the time they sleep is more than an hour out of sync with their body clock on weekends compared with work nights.

• Congratulating the Hon Greg Hunt MP

The Sleep Health Foundation and the Australasian Sleep Association congratulate the Hon Greg Hunt MP on his re-appointment as Federal Minister for Health in the new Federal Cabinet.

• National Parliamentary Inquiry Tackles Looming Sleep Crises

Australian sleep experts are applauding a parliamentary decision to tackle head on the dire sleep epidemic that is damaging the mood, health and safety of the nation.

The two peak national sleep health

“This is a defining moment internationally for sleep health. For the first time in the world a comprehensive government-level document has acknowledged that quality sleep is as important for health as a good diet and adequate exercise. It also calls for sleep health to be recognised as a national priority.” — Professor Dorothy Bruck.

Sleep Health Foundation Annual Report 2019
organisations, the Sleep Health Foundation and the Australasian Sleep Association, welcomed news that Canberra has launched a national inquiry into poor sleep.

- **Caffeine a crutch for most sleep deprived – Experts**
  Do you love your morning coffee jolt a little too much? Do you follow your first double shot with a second a little too quickly? Chances are you’re one of the caffeine addicts making Australia’s sleep specialists worried.
  Experts at the Sleep Health Foundation are seeking to uncover the full extent of Australia’s caffeine addiction out of concern that too many people are using the stimulant to mask their sleep deprivation.

- **Sleep Habits of MPs in spotlight**
  A world-first study is set to reveal just how much sleep our politicians are getting while running the country.
  Dozens of MPs, senators and their staffers have donned ‘watches’ that will track their sleep and activity for two sitting weeks of parliament, showing for the first-time what hours they keep and how much shut-eye they get.

- **Not treating snorers costs Australia millions: Report**
  Treating all Australians with the snoring condition obstructive sleep apnea (OSA) would earn $880 million for the nation’s coffers and significantly boost wellbeing, a new report has found.
  Sleep specialists have welcomed a new Deloitte Access Economics report that confirms CPAP, or continuous positive airway pressure, is not only a cost-effective treatment – it actually costs the nation not to use it to treat OSA.

- **Refreshing Sleep a Retirement Perk: Expert**
  Older Australians might toss and turn at night, but they’re still more likely than younger people to bounce out of bed in the morning, new sleep data shows.
  Uplifting research released today on World Sleep Day has found that people aged 65 and over are happier with their shut-eye than those who are younger.

- **How sleep fit are you?**
  World Sleep Day sees the launch of Australia’s first national, personalised sleep test – “How sleep fit are you”? On this World Sleep Day, SleepFit and the Sleep Health Foundation have teamed up to launch Australia’s first national, personalised sleep test.

- **World-first Parliamentary Inquiry report marks defining moment for Australia’s sleep health**
  The final report of a bi-partisan parliamentary inquiry into the nation’s ‘Sleep Health’ has been hailed as a defining moment for patients, clinicians and health experts, according to Australia’s two peak bodies on the critical subject of sleep.

- **Parliamentary Sleep Inquiry Outcomes**
  National campaign to get Australians sleeping better gets government support.
  One of the eleven recommendations from the recent federal Sleep Health Awareness Inquiry specifically calls for a national campaign to make the nation sleep better.

- **How to boost your grey matter in the bedroom**
  Your memory not what it used to be? Australians are quick to blame their forgetfulness on ageing when the real reason is closer to home, sleep experts warn.
  The Sleep Awareness Week specialists at the Sleep Health Foundation are raising concerns many adults don’t understand just how much their sleep is affecting their daytime functioning, particularly their memory and their mood.

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“We now have hard evidence that, used effectively, CPAP both relieves the country’s coffers and improves the wellbeing of people with this common chronic condition. This is a powerful message which needs to resonate in the minds of health planners and professionals who have a collective responsibility to find and treat this problem.” — Professor David Hillman
Speaker Program

The Foundation Speaker Program saw presentation from sleep health experts about the importance of sleep, many common sleep problems and the treatment options available for children, adolescents and adults. During 2018-19, the Foundation fulfilled over 80 requests for presenters to address business, school and community audiences including older people and parents. Most of these requests could be met as we have presenters in Queensland, New South Wales, Victoria, ACT, South Australia and Western Australia.

A few of our speaker program colleagues have provided us feedback on their experiences delivering talks to the community or businesses over the past year. Here is what they have had to say.

Where can the SHF take you?

Gemma Paech

There’s not many people who can say they’ve been to an underground mine site. Thanks to the speaker program with the Sleep Health Foundation (SHF), I can now say that I am one of these people.

In March, I travelled to an underground coal mine about 500km northwest of Sydney. While travelling to a remote location may not be the idea of a good time for some, I jumped at the chance to share my knowledge and to educate employees on the importance of sleep, how they can improve sleep while working shift work and how they can manage their fatigue under difficult and at times risky conditions.

Over the course of two weeks, I presented to almost every employee on site. Workers were engaged and eager to learn about how they could improve their sleep, as evidenced by their ability to stay awake (which is always a risk when talking about sleep) and by asking me questions about sleep and fatigue. One employee told me how he’d tried one of my tips and as a result had had the best sleep he’d had in a long time. It was great to know that the advice I was giving was being taken on board and that I was actually able improve people’s sleep.

Of course, it wasn’t all work and no play. After getting decked out into some highly flattering PPE, I was escorted deep underground into the coal mine. It was dark, hot (I was not expecting it to be hot that far underground), muddy (gum boots were an essential part of the PPE) and noisy, but it was an experience I’ll never forget. I was also able to get out and explore the local area including hiking up a mountain and seeing the Australia Telescope Compact Array.

Without being a member of the SHF and a participant in the SHF speaker program, I would never have had the opportunity to have the experience I had. Being a member of the SHF not only allows me to be involved in something I am passionate about – sharing the importance of good sleep health – but it has allowed me to have this once-in-a-lifetime-experience. So, if you are thinking about joining the SHF, there’s really only one question you should ask yourself and that is, “where will the SHF take me?”

Jasneek Chawla

I became a speaker for the Sleep Health Foundation in 2015 and have really enjoyed the experience. It has given me the opportunity to promote sleep health to a wide range of different audiences. I have found that people are always really interested in learning about how to sleep well and often quite surprised at how many aspects of general health are affected by your sleep. As a paediatric specialist this experience has allowed me to keep up to date with adult literature whilst also raising awareness of some of the important areas in my own field, such as the impact of inadequate sleep on adolescents. Recently I have been asked to help with the development of an online education module for a company and have recorded some presentations about different aspects of sleep health for this purpose. This was something totally different to do compared to daily clinical work and was a great way to learn new presentation skills. I would really encourage people to consider joining the SHF speaker program - it gives you the chance to promote sleep health in a completely different forum to normal but also helps you gain personally - you meet some really lovely people who are enthusiastic and really interested in what you have to tell them.

“Being a member of the SHF not only allows me to be involved in something I am passionate about but it has allowed me to have this once-in-a-lifetime-experience. If you are thinking about joining the SHF, there’s really only one question you should ask yourself and that is, ‘where will the SHF take me?’” — Gemma Paech
I love to talk about sleep, and I am privileged to get to speak to individuals about improving sleep as part of my job as a sleep psychologist. But as a speaker for the Sleep Health Foundation, I’ve had fantastic opportunities to help get the ‘sleep message’ out to the broader public! These opportunities have helped build my skills in presenting to different audiences and engaging with the media, and while daunting at first, has been a great learning experience!

My favourite Sleep Health Foundation speaker opportunity so far was going ABC Radio National studios in Melbourne to talk about the impact of blue light on sleep with Associate Professor Sean Cain from Monash University. You don’t get many opportunities to get behind the scenes at ABC radio (or see Charlie Pickering walking around!), and the radio interview generated some great discussion about sleep in the community. In addition, we were able to direct listeners to the Sleep Health Foundation website so they know where to go to access good quality sleep information!

Another highlight was when the Sleep Health Foundation arranged for me to travel to Ballarat and present to Central Highlights Water employees about sleep. We had two presentations on the one day to cater for staff on different shifts. After the presentations, staff reported back that they had learnt a lot about sleep and also got some good tips on how to improve their sleep. Afterwards, a pub meal overlooking Lake Wendouree was a great way to finish a busy sleep presentation day.

So, do consider becoming a volunteer speaker for the Sleep Health Foundation! There is a real need in the community to have skilled sleep professionals ready to take media interviews and present on sleep to different audiences and you can help to fill this gap.

We thank all of the members who have helped us to deliver talks throughout Australia this year. Without their support we would not be able to do so much in the community.

I would really encourage people to consider joining the SHF speaker program - it gives you the chance to promote sleep health in a completely different forum to normal but also helps you gain personally - you meet some really lovely people who are enthusiastic and interested in what you have to tell them.” — Jasneek Chawla.
and teachers about technology use and sleep health in school-aged children, now distributed widely in hard copy and online on several websites. Further outputs are planned.

**Indigenous Sleep Health.** A group of researchers, including several experienced in investigating sleep health issues in indigenous families, is currently pursuing several avenues to obtain funding for sleep health related research and projects in indigenous communities.

Peer-reviewed publications that arise from research projects facilitated by the SHF are incredibly important in building our reputation and enhancing our profile as a highly credible, evidence-based organisation. During 2018-2019 five such papers were published or in press.


**Community Advocacy for Sleep Health sub-committee**

Andrew Vakulin

Over the past 12 months the committee has successfully completed a number of initiatives to promote sleep health awareness in Australia. This includes running a short course together with the Neuroscience Council, at the 2018 SDU meeting in Brisbane, on “Assessment and treatment of excessive daytime sleepiness: Risk, rewards and patient perspectives on stimulant use”. This course was well attended and was a great success and has highlighted the challenges and knowledge gaps on the important clinical problem of diagnosis and management of disorders of hypersomnia from a clinical and patient perspective. The committee also had a presence at the Sleep Health Foundation stand at the Sleep DownUnder industry exhibition towards further engaging with conference attendees, highlight the important challenges and clinical/research needs of sleep disorder patients.

Furthermore, the SHF and members of the committee through their respective organisation have all contributed to the Parliamentary Inquiry into Sleep Health Awareness in Australia, a very important advocacy achievement for sleep medicine and research in Australia. The committee has been developing ideas and potential projects to leverage the important recommendations arising from the inquiry, including raising awareness and improving access to medication for disorders of hypersomnia.

The committee has also been considering and better defining its scope and terms of reference towards improving communication and collaboration between the patient advocacy group members moving forward. The committee looks forward to utilising and implementing the new framework in the next 12 months and continuing to work together in 2020 to drive new strategic projects to raise awareness, education, engagement and clinical practice through government, media and community initiatives.

It’s very common to hear people pass off their forgetfulness and their fogginess as the result of getting old. What many fail to recognise is that sleep – or lack of it – is playing a pivotal role in memory and mood. Age is a factor too, but improve your sleep and you’ll be surprised at the brain boost that follows.” — Professor Dorothy Bruck
The Sleep Health Foundation is a not for profit health promotion charity that aims to raise community awareness about sleep and its common disorders, and to improve public health and safety.

Our organisation

We strive to deepen community understanding of the importance of sleep for health and performance; why sleep disorders need professional diagnosis and treatment; and to provide information about common sleep difficulties and how to address them.

The Foundation receives no government funding. Support is provided by membership fees, corporate sponsorship, partnership program, donations, brokering research grants and fees for expert speakers. The Foundation is endorsed to receive charity tax concessions and as a deductible gift recipient.

All of the educational resources produced by the Foundation are developed and/or reviewed by independent experts selected for their knowledge of a particular subject.

Sleep Health Foundation Organisational Chart 2019

<table>
<thead>
<tr>
<th>Committee</th>
<th>Chair</th>
<th>Current Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board</td>
<td>Dorothy Bruck</td>
<td>Siobhan Banks, Darren Mansfield (deputy chair), Moira Junge, Jennifer Low, Darren Mansfield, Shantha Rajaratnam, Michael Rundus, Jason Van Schie, Anthony Williams, (Helen Burdette, Executive Secretary)</td>
</tr>
<tr>
<td>Executive Committee (incl Political Engagement)</td>
<td>Dorothy Bruck</td>
<td>David Hillman, Helen Burdette</td>
</tr>
<tr>
<td>Code of Practice</td>
<td>Darren Mansfield</td>
<td>Helen Burdette</td>
</tr>
<tr>
<td>Finance, Fundraising, Donations &amp; Partnerships</td>
<td>Michael Rundus</td>
<td>David Hillman, Jason Van Schie, Moira Junge, Helen Burdette</td>
</tr>
<tr>
<td>Marketing, Communications &amp; Membership</td>
<td>Moira Junge</td>
<td>Siobhan Banks, Dorothy Bruck, Alex Wolkow, Jennifer Low, Helen Burdette</td>
</tr>
<tr>
<td>Engagement &amp; Relationships</td>
<td>Dorothy Bruck</td>
<td>Shantha Rajaratnam, Andrew Vakulin, Moira Junge, Darren Mansfield, Robert Adams, Helen Burdette</td>
</tr>
<tr>
<td>Community Advocacy for Sleep Health</td>
<td>Andrew Vakulin</td>
<td>Dorothy Bruck, Shantha Rajaratnam, Melissa Jose, Elizabeth Hickey, Amanda Jackson</td>
</tr>
<tr>
<td>Business Council</td>
<td>Anthony Williams</td>
<td>Laure Heraud, (Air Liquide), Justin Mitchell (Fisher and Paykel), Penny Stewart (Philips), Catherine Delamare (Resmed), Andrew Ferguson, Julie Mullan (MSD), Dorothy Bruck, Helen Burdette and Darren Mansfield (SHF)</td>
</tr>
</tbody>
</table>
Our Governance
The Sleep Health Foundation is governed by a Board, comprising
- Four directors appointed by the members
- Two directors appointed by the Board of the Australasian Sleep Association (the peak professional body of Australian and New Zealand sleep clinicians and scientists)*
- Three independent directors appointed by the Board itself.

Our Board
Board members as at 30 June 2019 were:
- Professor Dorothy Bruck, Chair
- Professor Robert Adams
- Professor Siobhan Banks
- Dr Moira Junge
- Ms Jennifer Low
- Associate Professor Darren Mansfield
- Professor Shantha Rajaratnam
- Mr Michael Rundus (resigned August 2019)
- Mr Jason van Schie (resigned March 2019)
- Ms Helen Burdette

The Board meets four times a year and its work is supported by the Sleep Health Foundation Business Council and several working committees.

If you are interested in volunteering for one of our committees or joining the speaker program please contact the office 02 8814 8655 or email: admin@sleephealthfoundation.org.au.

Our Business Council
As Australia’s leading sleep health advocate the Foundation strives to develop policy informed by multiple perspectives including consumers of sleep health services, the sleep therapy industry and a broad range of clinicians. The Foundation’s Business Council was established in 2012 and comprises representatives from our major sponsors. As at 30 June 2019, the Business Council was made up of representatives of the following organisations:
- CRC for Alertness, Safety and Productivity
- Fisher and Paykel Healthcare
- MSD
- Philips Home Healthcare Solutions
- ResMed Asia Pacific Ltd

Unfortunately, due to structure changes leading to financial changes within the organisation Air Liquide are not able to support the Foundation in 2019-20 but we hope to see them back in 2020-21.

The terms of reference, and responsibilities of the Business Council are:
- To identify other potential corporate partners to help extend the role and influence of the Foundation for the public good
- To assess and evaluate the quality of business practices relevant to the provision of services or products relevant to improving sleep quality and/or length
- Development of a communications plan for the Foundation’s key commercial activities
- Identify opportunities for the Foundation to lobby government at all levels to improve sleep health funding
- Review, monitor and report to the board on business development opportunities
- To assist the Board in evaluation of SHF business practices and in other matters for which the Board seeks its advice.

Our Healthy Sleep Partners
Through our Healthy Sleep Partner Program, the Sleep Health Foundation encourages businesses who have direct contact with consumers interested in a good night's sleep, to partner with us and become informed advocates for healthier sleep.

We are keen to help businesses with a customer focus to help spread the healthy sleep message.

We would like to thank Adjusta Mattress (partner for the last 2 years), Qantas Wellbeing, and SleepFit. We look forward to continuing to work with all of our Healthy Sleep Partners.

Our Thanks
The Foundation Board is grateful to all those who support the Foundation financially. In particular we acknowledge our members, the Business Council members, our Healthy Sleep Partners and the Australasian Sleep Association.

We are also very grateful to all those who are part of our Speaker’s Program, presenting in 2018-19 to business, community and school groups throughout Australia.

Special thanks to Andrew Vakulin who Chairs the Community, Advocacy for Sleep Health subcommittee; Alex Wolkow – a member of the Marketing Communications and Membership Committee who manages the enormous task of updating of the 90+ Fact sheets on the Foundation website.

The Board would also like to extend thanks to Executive Officer Helen Burdette, who is the company secretary and provides secretariat support for the Board and all its committees including the Business Council; plans and executes health promotion and community education initiatives and manages communications including the media, the website and social media platforms.
Sleep Health Foundation is supported by

Air Liquide Healthcare

CRC for Alertness, Safety and Productivity

Fisher and Paykel Healthcare

MSD

Philips Home Healthcare Solutions

ResMed Asia Pacific Ltd

Healthy Sleep Partners

Adjusta Mattress

Qantas Wellbeing

Sleepfit
Financial Report

FOR THE YEAR ENDED 30 JUNE 2019

Sleep Health Foundation ABN 91 138 737 854
Suite 114, 30 Campbell Street, Blacktown NSW 2148
T 61 02 8814 8655  www.sleephealthfoundation.org.au

Liability limited by a scheme approved under Professional Standards Legislation

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<td>Statement of profit or loss and other comprehensive income</td>
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<td>Statement of financial position</td>
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<td>Statement of cash flows</td>
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<td>Directors’ declaration</td>
<td>33</td>
</tr>
<tr>
<td>Independent Auditor’s report</td>
<td>34</td>
</tr>
</tbody>
</table>
Directors’ Report

The directors present their report on the company for the financial year ended 30 June 2019.

Information on directors

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

Dorothy Bruck
Siobhan Banks
Jason Lee Van Schie
Shantha Rajaratnam
Darren Mansfield
Moira Francis Junge
Michael Rundus
Jennifer Ellen Low
Robert Adams (appointed 5 November 2018)
Anthony Williams (resigned 22 March 2019)
David Russell Hillman (resigned 30 October 2018)

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 $21,218 (2018 profit: $14,744). The operating loss incurred this year was primarily due to the withdrawal of support from one of our sponsors.

Significant changes in the 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:

- Advocacy of sleep health issues to government, employer bodies, road safety authorities and other organisations;
- Raising public awareness and community involvement about sleep health issues and their resolution; and
- Undertaking targeted education and service delivery programmes in relation to sleep health issues.

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 2019 has been received and can be found on the following page.

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

Director: Prof Dorothy Bruck

Dated this 16th day of September 2019
UNDER SECTION 307C OF THE CORPORATIONS ACT 2001
TO THE DIRECTORS OF THE SLEEP HEALTH FOUNDATION

I hereby declare, that to the best of our knowledge and belief, during the financial year ended 30 June 2019 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 16th day of September 2019
# Statement of Profit or Loss and Other Comprehensive Income

for the Year ended 30 June 2019

<table>
<thead>
<tr>
<th>Note</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Revenue</td>
<td>3</td>
<td>304,593</td>
</tr>
<tr>
<td>Expenditure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Audit fees</td>
<td></td>
<td>(3,500)</td>
</tr>
<tr>
<td>Advertising expenses</td>
<td></td>
<td>(41,964)</td>
</tr>
<tr>
<td>Depreciation and amortisation expenses</td>
<td></td>
<td>(165)</td>
</tr>
<tr>
<td>Other expenses</td>
<td>4</td>
<td>(280,173)</td>
</tr>
<tr>
<td>(Loss) Profit for the year</td>
<td></td>
<td>(21,209)</td>
</tr>
<tr>
<td>Retained surplus at the beginning of the financial year</td>
<td></td>
<td>146,275</td>
</tr>
<tr>
<td>Retained surplus at the end of the financial year</td>
<td></td>
<td>125,066</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.
## Statement of Financial Position

**as at 30 June 2019**

<table>
<thead>
<tr>
<th>Note</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>5</td>
<td>141,198</td>
</tr>
<tr>
<td>Trade and other receivables</td>
<td>6</td>
<td>18,846</td>
</tr>
<tr>
<td><strong>TOTAL CURRENT ASSETS</strong></td>
<td></td>
<td>160,044</td>
</tr>
<tr>
<td>Non-current Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Property, plant and equipment</td>
<td>7</td>
<td>662</td>
</tr>
<tr>
<td><strong>TOTAL NON-CURRENT ASSETS</strong></td>
<td></td>
<td>662</td>
</tr>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td></td>
<td>160,706</td>
</tr>
<tr>
<td><strong>LIABILITIES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trade and other payables</td>
<td>8</td>
<td>35,640</td>
</tr>
<tr>
<td><strong>TOTAL CURRENT LIABILITIES</strong></td>
<td></td>
<td>35,640</td>
</tr>
<tr>
<td><strong>TOTAL LIABILITIES</strong></td>
<td></td>
<td>35,640</td>
</tr>
<tr>
<td><strong>NET ASSETS (LIABILITIES)</strong></td>
<td></td>
<td>125,066</td>
</tr>
<tr>
<td><strong>EQUITY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retained surplus</td>
<td>9</td>
<td>125,066</td>
</tr>
<tr>
<td><strong>TOTAL EQUITY</strong></td>
<td></td>
<td>125,066</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.
## Statement of Changes in Equity

for the Year ended 30 June 2019

<table>
<thead>
<tr>
<th>Note</th>
<th>Retained earnings</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Balance at 1 July 2017</strong></td>
<td>131,531</td>
<td>131,531</td>
</tr>
<tr>
<td>Total comprehensive income attributable to members of the entity</td>
<td>14,744</td>
<td>14,744</td>
</tr>
<tr>
<td><strong>Balance at 30 June 2018</strong></td>
<td>146,275</td>
<td>146,275</td>
</tr>
<tr>
<td>Total comprehensive income attributable to members of the entity</td>
<td>(21,209)</td>
<td>(21,209)</td>
</tr>
<tr>
<td><strong>Balance at 30 June 2019</strong></td>
<td>125,066</td>
<td>125,066</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.
# Statement of Cash Flows

for the Year ended 30 June 2019

<table>
<thead>
<tr>
<th>Note</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Cash Flows from Operating Activities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Membership &amp; partnership fees received</td>
<td>180,867</td>
<td>175,795</td>
</tr>
<tr>
<td>Donations received</td>
<td>5,285</td>
<td>97,658</td>
</tr>
<tr>
<td>Grants received</td>
<td>74,238</td>
<td>43,670</td>
</tr>
<tr>
<td>Payments to suppliers &amp; others</td>
<td>(358,495)</td>
<td>(339,570)</td>
</tr>
<tr>
<td>Interest received</td>
<td>545</td>
<td>581</td>
</tr>
<tr>
<td>Other income received</td>
<td>33,020</td>
<td>40,855</td>
</tr>
<tr>
<td><strong>Net cash used in operating activities</strong></td>
<td>(64,540)</td>
<td>18,989</td>
</tr>
<tr>
<td><strong>Net decrease in cash held</strong></td>
<td>(64,540)</td>
<td>18,989</td>
</tr>
<tr>
<td><strong>Cash at beginning of financial year</strong></td>
<td>205,738</td>
<td>186,749</td>
</tr>
<tr>
<td><strong>Cash at end of financial year</strong></td>
<td>141,198</td>
<td>205,738</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.
Notes to the Financial Statements
for the Year ended 30 June 2019

The financial statements cover the business of The Sleep Health Foundation as individual entity incorporated and domiciled in Australia. The Sleep Health Foundation is a company limited by guarantee.

The financial statement was authorised for issue on 16 September 2019 by the directors of the company.

1 Basis of preparation

The directors have prepared the financial statements on the basis that the company is non-reporting since there are unlikely to be any users who would rely on the general purpose financial statements. These financial statements are therefore special purpose financial statements that have been prepared in order to meet the requirements of the Corporations Act 2001. The company is a not-for-profit entity for financial reporting purpose under Australian Accounting Standard.

The special purpose financial statements have been prepared in accordance with the mandatory Australian Accounting Standards applicable to entities reporting under the Corporation Act 2001 and the significant accounting policies described below, which the directors have determined are appropriate to meet the needs of the members.

The financial statements, except for the cash flow information, 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.

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.

The depreciable amount of all property, plant and equipment, except for freehold land is depreciated on a straight line method from the date that management determine that the asset is available for use.

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 are expensed 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.

Purchases and sales of available-for-sale investments are recognised on settlement date.

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, except for goodwill.

Revenue and other income
Revenue is recognised when the business is entitled to it.

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.

Other income
Other income is recognised on an accruals basis when the company is entitled to it.

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.

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.
### Notes to the Financial Statements

for the Year ended 30 June 2019

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>3 Income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Membership fees</td>
<td>15,169</td>
<td>13,132</td>
</tr>
<tr>
<td>Partnership fees</td>
<td>131,591</td>
<td>163,751</td>
</tr>
<tr>
<td>Donations</td>
<td>5,285</td>
<td>49,132</td>
</tr>
<tr>
<td>Special projects/grants</td>
<td>117,907</td>
<td>71,025</td>
</tr>
<tr>
<td>Interest received</td>
<td>546</td>
<td>582</td>
</tr>
<tr>
<td>Other income</td>
<td>34,095</td>
<td>30,718</td>
</tr>
<tr>
<td><strong>Total Income</strong></td>
<td>304,593</td>
<td>328,340</td>
</tr>
<tr>
<td><strong>4 Other expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bank charges</td>
<td>880</td>
<td>778</td>
</tr>
<tr>
<td>Audit, accounting &amp; bookkeeping fees</td>
<td>9,450</td>
<td>8,900</td>
</tr>
<tr>
<td>Computer expenses</td>
<td>120</td>
<td>-</td>
</tr>
<tr>
<td>Conference costs</td>
<td>2,872</td>
<td>-</td>
</tr>
<tr>
<td>Consultants fees</td>
<td>1,250</td>
<td>7,075</td>
</tr>
<tr>
<td>Donations</td>
<td>500</td>
<td>-</td>
</tr>
<tr>
<td>Dues &amp; subscriptions</td>
<td>1,399</td>
<td>2,198</td>
</tr>
<tr>
<td>Fees - partnerships</td>
<td>40,000</td>
<td>40,000</td>
</tr>
<tr>
<td>Grant educational</td>
<td>-</td>
<td>9,294</td>
</tr>
<tr>
<td>Office expenses</td>
<td>818</td>
<td>1,815</td>
</tr>
<tr>
<td>Insurance</td>
<td>1,830</td>
<td>1,900</td>
</tr>
<tr>
<td>Meetings</td>
<td>3,918</td>
<td>7,182</td>
</tr>
<tr>
<td>Printing &amp; stationery</td>
<td>4,470</td>
<td>3,086</td>
</tr>
<tr>
<td>Research grants</td>
<td>-</td>
<td>9,000</td>
</tr>
<tr>
<td>Secretarial fees</td>
<td>67,427</td>
<td>66,160</td>
</tr>
<tr>
<td>Special projects</td>
<td>121,449</td>
<td>76,932</td>
</tr>
<tr>
<td>Speakers - education</td>
<td>10,940</td>
<td>6,789</td>
</tr>
<tr>
<td>Staff training &amp; conferences</td>
<td>1,156</td>
<td>4,415</td>
</tr>
<tr>
<td>Travelling</td>
<td>318</td>
<td>1,046</td>
</tr>
<tr>
<td>Website costs</td>
<td>11,376</td>
<td>7,983</td>
</tr>
<tr>
<td><strong>Total Other Expenses</strong></td>
<td>280,173</td>
<td>254,553</td>
</tr>
</tbody>
</table>
## Notes to the Financial Statements

for the Year ended 30 June 2019

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>$</td>
<td></td>
</tr>
</tbody>
</table>

### 5 Cash and cash equivalents

<table>
<thead>
<tr>
<th>Description</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash at bank</td>
<td>19,238</td>
<td>84,323</td>
</tr>
<tr>
<td>Savings accounts</td>
<td>121,960</td>
<td>121,415</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>141,198</strong></td>
<td><strong>205,738</strong></td>
</tr>
</tbody>
</table>

**Reconciliation of cash**

Cash and cash equivalents reported in the cash flow statement are reconciled to the equivalent items in the balance sheet as follows:

<table>
<thead>
<tr>
<th>Description</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>141,198</td>
<td>205,738</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>141,198</strong></td>
<td><strong>205,738</strong></td>
</tr>
</tbody>
</table>

### 6 Trade and other receivables

<table>
<thead>
<tr>
<th>Description</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade debtors</td>
<td>18,846</td>
<td>30,385</td>
</tr>
<tr>
<td>Other debtors</td>
<td>-</td>
<td>8,963</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>18,846</strong></td>
<td><strong>39,348</strong></td>
</tr>
</tbody>
</table>

### 7 Property, plant and equipment

**Plant and equipment**

<table>
<thead>
<tr>
<th>Description</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>At cost</td>
<td>1,189</td>
<td>1,189</td>
</tr>
<tr>
<td>Accumulated depreciation</td>
<td>(527)</td>
<td>(362)</td>
</tr>
<tr>
<td><strong>Total Plant and Equipment</strong></td>
<td><strong>662</strong></td>
<td><strong>827</strong></td>
</tr>
</tbody>
</table>

### 8 Trade and Other Payables

**Current**

<table>
<thead>
<tr>
<th>Description</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade creditors</td>
<td>18,253</td>
<td>33,065</td>
</tr>
<tr>
<td>Other creditors</td>
<td>5,015</td>
<td>6,880</td>
</tr>
<tr>
<td>Income in advance</td>
<td>11,125</td>
<td>55,875</td>
</tr>
<tr>
<td>Credit card liabilities</td>
<td>1,247</td>
<td>3,818</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>35,640</strong></td>
<td><strong>99,638</strong></td>
</tr>
</tbody>
</table>
### Notes to the Financial Statements

for the Year ended 30 June 2019

<table>
<thead>
<tr>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>9 Retained Surplus</strong></td>
<td></td>
</tr>
<tr>
<td>Retained surplus at the beginning of the financial year</td>
<td>146,275</td>
</tr>
<tr>
<td>(Net loss) Net profit attributable to members of the company</td>
<td>(21,209)</td>
</tr>
<tr>
<td>Retained surplus at the end of the financial year</td>
<td>125,066</td>
</tr>
<tr>
<td><strong>10 Cash flow information</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Reconciliation of cash flow from operations with profit for the year</strong></td>
<td></td>
</tr>
<tr>
<td>Profit (Loss) for the year</td>
<td>(21,209)</td>
</tr>
<tr>
<td><strong>Non-cash flows in profit</strong></td>
<td></td>
</tr>
<tr>
<td>Depreciation</td>
<td>165</td>
</tr>
<tr>
<td><strong>Changes in assets and liabilities</strong></td>
<td></td>
</tr>
<tr>
<td>Decrease/(Increase) in trade and other receivables</td>
<td>20,502</td>
</tr>
<tr>
<td>(Decrease)/Increase in payables</td>
<td>(19,248)</td>
</tr>
<tr>
<td>(Decrease)Increase in income in advance</td>
<td>(44,750)</td>
</tr>
<tr>
<td></td>
<td>(64,540)</td>
</tr>
</tbody>
</table>

### 11 Company details

The registered office and principal place of business is:

Suite 114, 30 Campbell Street
Blacktown NSW 2148

### 12 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 and obligations of the entity. At 30 June 2019 the number of members was 302 (2018: 234).
**Director’s 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, 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 2019 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: [Signature]

Prof Dorothy Bruck

Director: [Signature]

Michael Rundus

Dated this 16th day of September 2019
Independent Auditor’s Report

TO THE MEMBERS OF
THE SLEEP HEALTH FOUNDATION
ABN 91 138 737 854

Opinion

We have audited the financial report of The Sleep Health Foundation which comprises the statement of financial position as at 30 June 2019, and 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 2019, 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 2019, 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.

The accompanying notes form part of these financial statements.
Independent Auditor’s Report

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 16th day of September 2019

The accompanying notes form part of these financial statements.