

# ANNUAL REPORT 2025

Australasian Sleep Association



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<b>Index</b>	<b>3</b>	Board 2024-2025
	<b>4</b>	President
	<b>6</b>	Chief Executive Officer
	<b>7</b>	Clinical Chair
	<b>9</b>	Conference Chair
	<b>10</b>	Education Chair
	<b>12</b>	Finance Chair
	<b>13</b>	Membership Chair
	<b>13</b>	Research Chair
	<b>15</b>	New Zealand Branch President
	<b>17</b>	ANZSSA Representative
	<b>19</b>	Financial Report



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# 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

# Board 2024-2025

President	<b>Clin Prof Garun Hamilton</b>
President Elect	<b>A/Prof Jasneek Chawla</b>
Clinical Chair	<b>Dr David Cunnington</b>
Conference Chair	<b>Dr Camilla Hoyos</b>
Education Chair	<b>Dr Hannah Scott</b>
Finance Chair	<b>A/Prof Melinda Jackson</b>
Membership Chair	<b>Ms Teanau Roebuck</b>
Research Chair	<b>A/Prof Andrew Vakulin</b>
NZ Branch President	<b>Prof Barbara Galland</b>
ANZSSA representative (observer)	<b>Ms Nicole Verginis</b>

It has been a pleasure serving as President of the ASA during the second year of my term. The organisation remains in a very healthy state with highly engaged members.

We have had a very busy year working on our strategic goals as outlined in our 2024-2027 strategy document. It is clear that we are the leaders of sleep health and science and have provided tremendous professional development and research opportunities and clinical standards for our members, and the associated organisations that work in sleep.

A big focus throughout the year has remained our grant programs, the Health Practitioners Advisory Bodies (HPAB) grant and the Quality Use of Medicines (QUMISH) grant. The educational reach of these two programs has been enormous, with over 29,000 individual practitioners accessing at least one educational activity. HPAB, led by Alex Sweetman, has continued to focus on education for GPs, psychologists, nurses, and other health practitioners. The HPAB grant was due to expire on 30 June 2025, however, we received a 12-month extension from the DoHAC until 30 June 2026, meaning we can continue with the great educational work for at least another year. We hope that the government will offer another round of funding next year, although it is unclear at this stage whether the HPAB program will continue beyond 2026.

The QUMISH grant, led by Stacey Putland, has been another strength for us over the past 12 months. Almost 8,000 pharmacists have received sleep education, with a focus on behavioural treatments for insomnia and screening for clinical sleep disorders. It has led to the introduction of a Sleep Health Action Plan, a new website for educational sleep information known as Sleep Central, and an established collaboration with the Pharmaceutical Society of Australia (PSA), which we hope to leverage for future work. However, unfortunately the QUMISH grant is coming to the end of its funding period. As a result we will soon have to say goodbye to Stacey Putland. On behalf of the ASA, I would like to thank Stacey for the amazing job she has done. She has been an exceptional program leader, and her personal hard work has and will continue to lead to improved sleep health across the Australian community.

The online CBTi training program that was developed in association with the Australian Psychological Society has



## Annual Report President

been enormously successful. At the time of writing, 767 people have enrolled in the course. On the CBTi practitioner registry on our Sleep Central website, we now have 173 practitioners listed who either identify as sleep trained psychologists or who have completed this online course. This makes it substantially easier for primary health care practitioners and patients to access skilled practitioners in CBTi, and significantly helps deal with the burden of insomnia in the community.

The Fellowship of Dental Sleep Medicine (FDSM) continues to prosper and remain self-sustaining. Most importantly, we now have an international program and international graduates completing the Fellowship. This shows that the ASA is a world leader in quality dental sleep medicine education and training.

We have continued to promote and perform our advocacy work in collaboration with the Sleep Health Foundation. This has included regular meetings with the Department of Health and Aged Care about a number of issues affecting the field. We continue to lobby for a national 10 year sleep health strategy and work to keep sleep health on the health policy agenda. As part of this, we continue advocating for funding for a community implementation trial of digital CBTi.

We have submitted a second application for paediatric home sleep studies with MSAC, hoping to finally receive an item number for paediatric home sleep studies. Following our unsuccessful application in 2024, significant changes and refinements were made under the advice of the Department of Health and Aged Care

and MSAC. The working group working on this put in an enormous amount of work and we hope for a more positive outcome this time around. I would particularly like to acknowledge the hard work of Jas Chawla, Moya Vandeleur and Karen Waters.

We have had a number of interactions with the Department of Health and Aged Care and Medicare regarding their specific compliance focus and priorities for 2025. A webinar to help provide information to members was performed which led to a comprehensive series of questions from members. DoHAC and Medicare have provided written answers to these questions which have gone out to the membership. Hopefully this will provide clarity for members moving forward.

Sleep research is incredibly active. We are receiving increasing numbers of requests from research groups to become partners on their grant applications to assist with the promotion and dissemination of their research findings. The Research Committee has done a lot of work to make this application and approval process as streamlined as possible, including ensuring that grants provide funding for work the ASA may need to be involved in.

Our educational activities continued to be well attended. Over the course of the year we have had regular state meetings and a comprehensive webinar program, culminating as always in the Sleep Downunder (SDU) conference. With respect to the conference, the Board has had to make a couple of decisions regarding the venue and timing. The planned conference for Melbourne in 2026 needed to be changed from October to November so that it would not clash with the European Sleep Research Society meeting. This has unfortunately necessitated a change in venue to Brisbane, as the Melbourne Convention Centre was not available at the new proposed time.

Hopefully SDU will be able to return to Melbourne in the near future. The Board also considered a proposal to bring the conference back to New Zealand and approved SDU 2028 to be held in Auckland at their new convention centre. This gives the ASA an opportunity to increase the promotion of sleep and sleep health, and the ASA itself, in New Zealand.

I have thoroughly enjoyed my second year as President of the ASA. I am grateful for the fantastic support that I have received from the whole board and our CEO Marcia Balzer. In particular, I would like to recognise the support and help I have received from Jas Chawla, the President Elect. We have worked very closely as a team and her knowledge and enthusiasm have been incredibly helpful to me over this time. I would also like to acknowledge and thank the ASA office staff for their enormous support and hard work over the past 12 months. We are very blessed to have such capable and hard-working people as part of our organisation. I would like to recognise Marcia Balzer, Mischka Yates, Cassie Real, Alex Sweetman, Stacey Putland, Asha Mohabir, Dinukshi Daniels, and Phillipa Ward.

Finally, I am particularly grateful to all the ASA members who have volunteered their time to work on our various committees, working groups and subcommittees. We are such a vibrant and successful organisation predominantly because of the great engagement of our members and the hard work of our volunteers.

It has been an honour and a privilege to serve as the ASA president over the past 12 months as I complete my term. I'm looking forward to another successful year for the organisation and supporting Jas Chawla when she takes over as President in October 2025.

**Clinical Professor Garun Hamilton**  
President



## Annual Report Chief Executive Officer

We're a year in to our current **three-year strategy**<sup>1</sup> and we can already feel the landscape of the sleep world changing and moving forwards since we came up with our current roadmap.

At the same time, 2024-2025 saw the ASA chalk up some significant accomplishments to help realise our organisation's **vision and mission**.<sup>2</sup>

Our two Commonwealth grant programs have funded and coordinated a broad collaborative effort across Australia to educate primary healthcare practitioners in sleep medicine and sleep health. Through incredibly productive collaborations with the Pharmaceutical Society of Australia, the Sleep Health Foundation, the Australian Psychological Society, the Royal Australian College of General Practice, and the Australian Primary Care Nurses Association among others, these two grant programs have helped to raise awareness and improve clinical skills among more than 29,000 GPs, pharmacists, psychologists and nurses.

Over 200 ASA members have worked on these programs, delivering education and training, providing advice, and working on committees and stakeholder groups. If you're one of those people, I want to say a heartfelt thank you. You've been part of this major national effort to implement one of the 11 recommendations of the 2019 Parliamentary Inquiry into Sleep Health Awareness in Australia:

### Recommendation 9

The Committee recommends that the Australian Government in consultation with the Royal Australian College of General Practitioners and other key stakeholders:

- Assess the current knowledge levels of general practitioners, nurses and psychologists in relation to sleep health, and
- Develop effective training mechanisms to improve the knowledge of primary healthcare practitioners in diagnosing and managing sleep health problems.

What an extraordinary achievement for an association of just 1000 members in just 3 years!

A key focus of our grant programs has been the development of the **Sleep Central website**.<sup>3</sup> Sleep Central provides tailored sleep health information, clinical resources and education for primary care providers. The two most popular sections of this website to date have been the Sleep Health Action Plan page and the CBTi providers directory. Both of these have quick-access buttons on the Sleep Central home page.

A significant proportion of my work is to support and guide the ASA's advocacy work. Some of the details are included in other reports, but some key achievements for the year included:

- Lodging our second application to secure Medicare funding for home sleep studies for children and adolescents. The results of this application will be available by the time this report is published.
- In partnership with the Sleep Health Foundation, we progressed our national advocacy agenda with a Pre-Budget submission calling on the development of a 10-year National Sleep Health Strategy.
- Together with the Foundation, we also explored options to trial a broad-based implementation of digital Cognitive Behavioural Therapy for Insomnia in primary care.

ASA has also provided expert advice and feedback on multiple occasions to the Department of Health and Aged Care, Transport for NSW, the Australian Bureau of Statistics, the National Transport Commission, Therapeutic Guidelines, RACP and the Australian Dental Association during the year.

1 [www.sleep.org.au/common/Uploaded%20files/Public%20Files/About/ASA%20strategy%202024-2027%20final.pdf](http://www.sleep.org.au/common/Uploaded%20files/Public%20Files/About/ASA%20strategy%202024-2027%20final.pdf)

2 [www.sleep.org.au/Public/Public/About/About.aspx](http://www.sleep.org.au/Public/Public/About/About.aspx)

3 <https://sleepcentral.org.au>

I was able to attend gatherings in Adelaide, Sydney, Melbourne and Tauranga this year, updating members on ASA news, consulting them on policy and advocacy topics, and hearing the latest local sleep news. Sleep DownUnder on the Gold Coast was a vibrant and engaging meeting, exceeding both attendance and financial targets and offering great opportunities for members to meet, collaborate, learn and have fun together.

Our high-performing professional staff team outdid themselves during 2024-2025, running a record number of events, two major grant programs and multiple other projects in addition to the normal operational requirements to keep the wheels turning. Our small team of 8 employees working approximately 6.3 FTE alongside our extraordinary army of volunteers has delivered all the work described in this annual report. Not only are they impressive in their achievements, but they are a joy to work with! Well done and thank you for all you've done, Mischka Yates, Cassie Real, Alex Sweetman, Dinukshi Daniels, Phillipa Ward, Stacey Putland and Asha Mohabir.

Thank you also to the Board, committees, working groups and sponsors who have been such a delight to work with this year. It's so rewarding to work with you, and enjoy the achievements we accomplish together. Thank you especially to Garun Hamilton and Jas Chawla for your personal support and appreciation during the year.

**Ms Marcia Balzer**  
Chief Executive Officer



## Annual Report Clinical Chair

**Clinical Committee:** *David Cunnington (Chair), Linda Schachter (Deputy Chair), Julia Crawford, Brett Duce, Garun Hamilton, Craig Hukins, Roo Killick, Alexander McDonald, Sutapa Mukherjee, John Swieca, Denise O'Driscoll, Moya Vandeleur, Julie Tolson, Bandana Saini, Sameh Samuel, Nur Sulaiman, Brendon Yee*

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.

Over the last 12 months, the Clinical Committee has responded to a steady stream of requests for input, as well as continuing to work towards the Association's goals.

### **Medicare and the Department of Health and Aged Care**

The paediatric home sleep study working group has continued to respond to requests for information from the Department of Health and Aged Care, as the re-submission works its way towards being considered at the Medical Services Advisory Committee (MSAC) meeting on July 31-August 1 2025. We recognise the very significant undertaking this project has been for the ASA and members of the working group over the last 5 years.

The Australasian Sleep Association, led by the Clinical Committee and the Board, has continued to liaise with Medicare and the Department of Health and Aged Care on a range of issues, including:

- Discussing current compliance priorities, helping the Department understand why particular patterns of claiming may have occurred, and communicating to members areas of compliance activity and expectations of Medicare.
- Clarification of questions from members regarding claiming of Medicare items, including hosting a joint webinar for members with Medicare and the compliance team, and developing a list of answers to questions from members that has been circulated to all members.
- Maintaining eligibility for 85% rebate for attended sleep study item numbers in recognition that these services are being provided in non-hospital settings, which provide an important service for patients.

### **Assessment of high-risk transport drivers**

Following on from the work on the assessment of rail safety workers, the Clinical Committee, together with the Sleep Health Foundation, have been working with the National Transport Commission on the assessment of high-risk transport drivers. The working group aims to maintain a consistent approach across different transport groups.

### **Hypersomnolence registry working group**

A working group has continued to meet, together with lived experience representatives, to map out options for the development of a registry for patients with disorders of hypersomnolence, including narcolepsy. Access to treatment and services continues to be a challenge for this patient group, and a registry is an important part of capturing the burden of these disorders and advocating for access to diagnosis, treatment and services for people with disorders of hypersomnolence.

### **Medicines sub-committee**

This sub-committee continues to advocate strongly for better access to medications for patients, especially those with narcolepsy and idiopathic hypersomnia. The sub-committee is preparing a commentary on equity of access to medications, particularly in disorders of hypersomnolence.

### **Publication of position statements and guidelines**

Working groups continue to develop important guidelines on:

- Restless legs treatment
- Use of CPAP
- Diagnosis and management of disorders of hypersomnolence
- Insomnia

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 2024:** *Teana Roebuck (Chair), Camilla Hoyos (Deputy Chair), Janet Cheung, Tom Churchward, Scott Coussens, Angela D’Rozario, Nicole Grivell, Jenny Haycock, Kristina Kairaitis, Nicholas Phillips, Charli Sargent, Tim Smithies, Moya Vandeleur, Alexander Wolkow, Christopher Worsnop*

**S**leep DownUnder 2024 on the Gold Coast showcased over 200 abstracts presented in oral, poster discussion or poster viewing format. The New Investigator Award plenary session was a highlight as usual, showcasing the outstanding work of six early career researchers. Congratulations to all the finalists and the winner for 2024, Isobel Lavender.

The international invited speakers Professors Maria Bonsignore and Evelyn Constantin provided valuable insights in their plenary session presentations and across other conference sessions. There was a large variety of topics covered throughout the conference including clinical, sleep science neuroscience, paediatrics plus many more.

Short courses preceding the meeting provided insight into specific areas including neurology, new sleep technologies and paediatrics as well the ever-popular NEST council session for our emerging leaders.

It was a successful meeting with 654 delegates and 764 total attendees including sponsors and speakers. Thank you to the 25 sponsors and exhibitors to whom we are grateful as their contributions help us create a successful conference including their input into delegate learning at the stands which is an integral component of Sleep DownUnder.

I wish to thank the volunteers on the committee for their hard work in planning and programming of the conference. A huge thank you to Teana Roebuck who was the Committee Chair for Sleep DownUnder 2024.

Immediately following the conference, planning for Sleep DownUnder 2025 in Adelaide began. The committee has created an exciting program for this year’s meeting, and I look forward to seeing everyone in October.

**Dr Camilla Hoyos**  
Conference Chair



# Annual Report Education Chair

**Education Committee:** *Hannah Scott (Chair), Andrew Dawson (Deputy Chair), Jasneek Chawla, Elizabeth Chronowski, Andrew Gikas, Christopher Gordon, Camilla Hoyos, Neela Nath, Shyamala Pradeepan, Stacey Putland, Bandana Saini, Alexander Sweetman, Stephanie Yiallourou, Alan Young, Christiaan Yu.*  
*The Committee is supported by wonderful ASA staff members Marcia Balzer, Cassie Real, and Asha Mohabir.*

## Committee membership

The Education Committee has had a productive year, continuing to lead and support educational initiatives for our members. I would like to extend a sincere thank you to our former Education Chair, Associate Professor Jasneek Chawla, whose leadership made a significant impact during her time in the role. Jas has remained an active contributor to the Committee as she transitioned into her new position as President Elect.

We are also pleased to welcome three new members to the Committee. Andrew Dawson has taken on the role of Deputy Chair, while Neela Nath and Elizabeth Chronowski have joined us as representatives of the Dental Sleep Medicine Council. Each new member has brought valuable expertise and fresh perspectives to our work.

The success of the Education portfolio is made possible by the dedication of a wide network of contributors. There are currently eight sub-committees and working groups that report to the Education Committee, each supported by its own members and external collaborators. While it is impossible to thank everyone

individually, I would like to express my sincere appreciation to the outstanding members of our sub-committees and working groups. Your time, expertise, and commitment are deeply valued.

## Sub-committees

Our sub-committees have been actively driving a wide range of educational initiatives throughout the year.

The Behavioural Management of Sleep Disorders sub-committee (chair: Alexander Sweetman) has focused on expanding knowledge on insomnia management, delivering three webinars for the South Eastern Sydney Local Health District (with nearly 400 attendees) and two for the Australian Psychological Society, alongside a CBT-I education course that attracted approximately 425 registrations.

The First Nations Working Party (chair: Stephanie Yiallourou) has partnered with the Sleep Health Foundation to form a joint working group, strengthening collaboration and support across both organisations.

The Nurse Education sub-committee (chair: Christopher Gordon) has been growing steadily and is currently planning future educational activities, including a joint symposium with the Pharmacist Education sub-committee (chair: Bandana Saini) at SleepDown Under 2025 that showcases transdisciplinary approaches for managing OSA. Looking ahead, the Pharmacy sub-committee will also contribute to grant-related work focused on improving CPAP adherence in pharmacy settings.

Meanwhile, the Dental Sleep Medicine Council (chair: Adam Teo, represented by Neela Nath and Elizabeth Chronowski) has developed another high-quality, jam-packed short course for this year's conference, along with a symposium on oral appliance therapy for OSA.

The GP Education sub-committee (chair: Alan Young) is preparing a practical audit tool to assist GPs in clinical decision-making to manage OSA after CPAP therapy initiation.

Together, these efforts reflect the depth and diversity of expertise across our sub-committees and their shared commitment to advancing sleep education and care.

## Fellow of Dental Sleep Medicine

The Fellow of Dental Sleep Medicine (FDSM) certification program (chair: Andrew Gikas, supported

by Dinukshi Daniels and team) continues to be a success. We have had significant interest from dentists internationally and are in talks to further promote and expand the International Fellow of Dental Sleep Medicine certification program in Southeast Asia in particular. The second cohort of FDSM graduates was announced at Sleep DownUnder 2024, with enrolments for this year's program already exceeding last year's enrolments.

## Learning Centre

The ASA's Learning Centre is a valuable resource and key benefit for members, with usage increasing by 58% this financial year. Accessible through the ASA website, this online hub offers complimentary access to all webinar recordings since 2020. A wide selection of previous Masterclasses, Sleep Down Under sessions, and Sleep in Aotearoa sessions are also available either free of charge or at a reduced cost for members.

Looking ahead, the Education Committee is committed to enhancing the Learning Centre's visibility and ensuring members make the most of its offerings by introducing fresh and engaging content. To support this goal, we have established a Learning Centre Working Group, bringing together members from diverse specialties and career stages. This group will focus on creating new educational content and refining the platform's design and user experience, further enriching the ASA's educational support for all members.

## Webinar series

Our webinar series remains a standout offering, continuing to attract strong attendance and engagement. This year's highlights included a collaborative session with the American Academy of Sleep Medicine (AASM) on melatonin use in children and adolescents, as well as webinars covering Medicare compliance essentials and the clinical application of oral appliances and sleep apnoea endo-typing. We are also excited to launch a new keynote-style event. This annual webinar will spotlight the research journeys and contributions of leading sleep researchers from Australia and New Zealand.

## Member survey

Our most recent membership education survey, conducted in October 2024, received responses from 130 respondents across a wide spectrum of expertise, career stages, and areas of interest. I would like to

thank everyone who took the time to participate. The insights gathered were instrumental in shaping our educational priorities for this year and beyond. Key findings and actions taken to address them included:

- Strong interest in innovations in sleep medicine, measurement and diagnostic tools, and "year in review" sessions covering emerging topics. These interests have shaped the educational offerings at our annual conference and webinars throughout the year.
- Respondents also expressed enthusiasm for advanced clinical practice and masterclass programs tailored to experienced clinicians. This finding is reflected in our short course offerings and FDSM program, and will be a priority for next year's Learning Centre initiatives.
- In terms of delivery, in-person education and interactive on-demand modules were the most preferred formats. We will continue to provide high quality content at our annual conference and state meetings, as well as adapt our Learning Centre content to suit emerging needs.

## Looking ahead

As the ASA's grant programs approach their conclusion in the coming financial year, our commitment to advancing sleep health education remains strong. We are actively exploring ways to sustain and build upon the achievements of the grant initiatives, ensuring their long-term impact. At the same time, we are focused on expanding access to high-quality educational content that members can rely on, particularly as the broader landscape evolves with emerging technologies like artificial intelligence. Key priorities include enhancing the Learning Centre's on-demand offerings, gathering member feedback on our educational content, and aligning our efforts to support accessible, relevant, and future-ready learning experiences.

## Hannah Scott

Education Chair



## Annual Report Finance Chair

**Finance Committee:** *Melinda Jackson (chair), Garun Hamilton, Jasneek Chawla, Marcia Balzer, Robert Estcourt, Kath Maddison, Christopher Worsnop, Julia Chapman, Karyn O’Keeffe, Kirk Kee*

**T**he Association has remained in a sound financial position during this last financial year, allowing the organisation to continue to develop and undertake new initiatives to benefit our members.

The financial performance for 2024-2025 has seen us post a surplus of \$132,287, which includes an adjustment for fair value remeasurement of our investment portfolio this year of \$29,736.

Our investment portfolio had a market value of \$1,177,814 as of 30 June 2025, and income yield of \$55,695, well ahead of our target of \$40,000 for the full financial year.

Overall, there was a 10.62% return for the financial year with this being well ahead of inflation over the past 12 months. Thanks to Robert Estcourt, Mark Leslie and the team at JB Were for their expert and sound advice regarding our investment portfolio.

The Association has provided a number of educational programs to its members over the past year, including

the webinar series, workshops and State Meetings. It has also graduated another cohort of Fellows of Dental Sleep Medicine, awarded a number of scholarships and research grants, and published clinical guidelines.

The Commonwealth grants – the Health Peak and Advisory Bodies Program grant from the Department of Health and the Quality Use of Medicines for Insomnia and Sleep Health program – have continued to contribute to organisational growth and increased our visibility and profile with government.

The Finance Committee has closely monitored these grant budgets, the management of cash flow and impact on operational funds as these programs near the end of the grant period. We are looking at ways to diversify funding streams in the future to counteract any repercussions of these programs ceasing after the next financial year.

The Sleep Research Future Fund (SRFF), a capital investment fund which commenced in October 2023, has been steadily growing with member donations this year. The goal of the SRFF is to provide long-term support for our Early Career Researchers through larger research initiatives, Fellowships and PhD stipends, in addition to the current annual grants. Thank you to those who have contributed to the SRFF for their support this past year.

We plan to seek philanthropic and industry donations in the next financial year. I encourage ASA members to consider making a tax-deductible donation towards the SRFF, or other named grant programs, to support the next generation of sleep researchers.

I also want to take an opportunity to thank our bookkeeper, Phillipa Ward, for her support and always providing the committee with such clear reports and helpful guidance. I greatly appreciate the support of the Finance Committee members for their time commitment and effort over the past year.

**A/Prof Melinda Jackson**  
Finance Chair



## Annual Report Membership Chair

**Membership Committee 2024-2025:** *Camilla Hoyos (Chair), Kathleen Maddison, Philip Terrill, Nicole Lovato, Tina Ledger, Jenny Liu, Charlotte Gupta, Jennifer Walsh, Aiden Cushnahan*

The ASA had 1017 members at 30 June 2025, which is a very slight decrease from 2024 when we finished the financial year with 1027 members.

The Chair and committee provided input into a new five-year Membership Strategy which provides a structure to maintain members and to grow the membership. This Strategy was finalised and approved by the Board, and is now in the early stages of implementation.

In response to the strategy, the committee is undertaking the design of a membership survey to seek members input into what they want the ASA to provide and how they wish to be represented professionally.

The committee also oversees the mentorship program, which provided mentoring opportunities for a number of early career members during the year. I want to offer our special thanks to Kath Maddison for her work running the program this year.

I thank the committee for their dedication and thoughtful input. I particularly wish to thank Camilla Hoyos, previous Chair, for her enthusiasm and drive.

**Teanau Roebuck**  
Membership Chair



## Annual Report Research Chair

**Research Committee:** *Andrew Vakulin (Chair), Scott Coussens, Angela D'Rozario, Danny Eckert, Brad Edwards, Amy Jordan, Denise O'Driscoll, Fergal O'Donoghue, Ben Tong, Grace Vincent, Jennifer Walsh, David Wang*

It has been another busy year for the Research Committee who continue to dedicate their time and expertise leading initiatives to achieve our collective mission of conducting highest quality research and support researchers of all career stages and pathways across Australia and New Zealand.

First of all, I would like to take this opportunity to acknowledge members who have stepped down from the Research Committee, Dr Lauriane Jugé and Dr Laurie McLay, and thank them for all their contribution to the committee.

There have been a number of updates and great research achievements including awards and research funding which should be highlighted and celebrated!

### Awards

The Research Committee continues to receive many excellent applications for our annual awards including the Helen Bearpark Memorial Scholarship, Nick Antic Career Development Award and the Rob Pierce Grant-in-Aid. The standard and quality of these applications continues to challenge the Research Committee as we review, score and rank so many high-quality applications which are often incredibly close. I am very grateful to all the Research Committee members for

their dedication and commitment in taking on this challenge. I would like to acknowledge and congratulate all the awardees who were announced at Sleep DownUnder at the Gold Coast in 2024!

**Helen Bearpark Memorial Scholarship:**

Dr Hannah Scott

**Nick Antic Career Development Award:**

Dr Rosie Gibson

**Rob Pierce Grant-in-Aid:**

Dr Andrew Collaro

The New Investigator presentations at the 2024 Sleep DownUnder were a highlight of the conference, showcasing the latest in research excellence from our early career investigators. The top 6 New Investigator presenters were all outstanding and the score incredibly close, but the top prize went to Dr Isobel Lavender.

Given the importance of these awards to highlight and acknowledge the amazing research by our early career members, continued long-term funding of these awards is essential. The Rob Pierce Grant-in-Aid in particular provides an important spring board to early career researchers providing vital seed funding in the early stages of their career. However, the funding to support this award was running low and so the Research Committee has worked together with the ASA staff team to secure more funding for this award. I am very pleased that the Institute of Breathing and Sleep have funded the shortfall for this important award in 2025 and that Eli Lilly have committed to a 5-year non-exclusive sponsorship of the Rob Pierce Grant-in-Aid from 2026. Thank you to the Research Committee and special thank you to Professor Danny Eckert, Marcia Balzer, Professor Mark Howard and Melinda Jackson for all their help with these partnerships.

**Funding success**

The ASA continues to get a large number of partnership requests for research grant applications as the key professional sleep association to support the dissemination, advocacy and research translation activities of the successful grants. We have further streamlined the process and guidelines the formal partnerships process and in the last 12 months have supported more than 15 grant applications for NHMRC, MRFF and other grants.

With now more than 12 successfully funded grants on which ASA is a formal partner and continuing growth in the demand, the ASA through the Research Committee has further formalised the Grant Partnership Policy and procedures, including useful letter of support templates and required documents to streamline the process and make it easier for the investigators applying for grants to partner with the ASA. All the required information for this can now be found on the ASA website.

**Future Initiatives and Activities**

The Research Committee are continuing their important work in developing strategies to grow the ASA's Sleep Research Future Fund that was established in 2023. We will be looking at philanthropic donations to grow this important source of funding to support our early career investigators. This includes securing funding for the ASA awards longer term to ensure the funding is self-sustaining.

We are also working on clearer guidelines and processes to capturing reports from award recipients to showcase how the awards support their research and career development. We are also hoping to better define the research translation activities that the ASA can offer to grant partnerships to provide clarity and define expectations to grant recipients.

Finally, I would like to thank all our members, the ASA staff and Research Committee for all your hard work in the last 12 months. It has been an absolute pleasure and a privilege to work with so many wonderful researchers and clinicians as we continue to support, encourage and advocate highest quality sleep research across Australia and New Zealand.

**A/Prof Andrew Vakulin**

Research Chair



## Annual Report New Zealand Branch

### New Zealand Branch Executive Committee:

*Karyn O'Keeffe (Chair), Angela Campbell, Barbara Galland, Bronwyn Sweeney, Dee Muller, Leigh Signal, Patryk Szulakowski, Rosie Gibson, Teurai Chikura, William Good*

The New Zealand Branch has had another successful year of activities, supporting and recognising those involved in sleep medicine and research across Aotearoa New Zealand, and organising events for both the clinical and scientific communities, as well as the general public.

As I step into the role of Branch Chair, I want to take this opportunity to thank our previous Chair, Barbara Galland, who has led the New Zealand Branch for the past three years. Barbara has tirelessly supported the Branch's activities, introduced fresh and diverse content to our annual Sleep in Aotearoa conference, and connected the Branch with new audiences.

I also wish to thank Michael Hlavac and Sonia Cherian, who stepped down from the New Zealand Branch Executive in July 2025. Both served for many years on the Executive Committee, offering support and insights, particularly regarding our activities with a clinical focus.

In their place, I am pleased to welcome three new members to the Branch Executive: Dee Muller, Teurai Chikura, and William Good. Angela Campbell has once again taken on the role of Branch Treasurer. Angela is a long-standing contributor to and member of the Branch Executive, and we are in capable hands.

### Sleep in Aotearoa 2025

Each year, we welcome members of the sleep community to attend Sleep in Aotearoa, an annual scientific meeting of the New Zealand Branches of ASA and ANZSSA. This year, we were delighted to hold the conference at the University of Waikato campus in Tauranga from 26-27 June, attracting 120 delegates and 17 industry representatives.



Professor Brendon Yee (Royal Prince Albert Hospital, Sydney) delivered an excellent keynote on the role of incretins in the treatment of OSA that was very well received. ASA CEO Marcia Balzer and ANZSSA Education Chair Roohie Kullar also travelled from Australia to attend the conference and provided updates on their organisations' activities. Thank you to the four sponsors (Apex Medical, Eisai New Zealand, Fisher & Paykel Healthcare, and ResMed) and the additional conference exhibitors (BMedical, Compumedics, and ExcellCare). Special thanks to ASA Sponsorship and Events Manager Asha Mohabir, who once again supported our activities in securing conference sponsors and exhibitors.

Alongside the keynote, the conference offered a vibrant programme featuring a New Investigator Award session; three symposia on alternatives to CPAP, behavioural treatments for insomnia, and digital screen use; three clinical spotlights covering the OSA postcode lottery in Aotearoa New Zealand, circadian challenges, and narcolepsy management; and numerous abstract sessions highlighting research from Aotearoa and Australia. Visual highlights are available on the [ASA website](https://www.sleep.org.au).<sup>4</sup>

<sup>4</sup> [www.sleep.org.au/Public/News/Articles/July/SiA.aspx](https://www.sleep.org.au/Public/News/Articles/July/SiA.aspx)

## Awards

Each year, New Zealand presents a New Investigator Award to an outstanding presenter in the conference's New Investigator session, along with two awards in recognition of the Sleep Apnoea Association of New Zealand (SAANZ): an emerging researcher award and a distinguished service award.

The Branch congratulates this year's award recipients.

- Sarahmarie Kuruko from the University of Otago in Dunedin received the New Investigator Award for her presentation titled 'Zooming in on bedtime routine activities and subsequent sleep among preschool-aged tamariki: A wearable camera study'. The award covers registration for Sleep Downunder 2025, sponsored by the New Zealand Branch, and includes \$1000 towards travel expenses, sponsored by Apex Medical.
- Dr Rosalie Jackson from the University of Otago, Dunedin, received the SAANZ Emerging Researcher Award for her outstanding promise as an emerging researcher. She is recognised for producing high-quality work, making cross-disciplinary contributions, and demonstrating a strong dedication to improving sleep health in tamariki (children).
- Dr Andrew Veale from the New Zealand Respiratory and Sleep Institute was honoured with the SAANZ Distinguished Service Award. This recognises his extensive and long-standing dedication to advancing sleep health in Aotearoa New Zealand, along with his unwavering advocacy for patients with sleep disorders.

## World Sleep Day webinar

The New Zealand Branch hosted a webinar on World Sleep Day (14 March 2025), presented by Dr Dee Muller, Senior Research Officer at the Sleep/Wake Research Centre, Massey University, Wellington.

In her presentation titled "Healthy sleep: A right or a privilege?", Dee provided an overview of current research on sleep health inequities across the life course in Aotearoa New Zealand, and discussed the implications for health and wellbeing, as well as the future actions needed. The presentation can be viewed via the **ASA Learning Centre**.<sup>5</sup> Thank you to Dee for an insightful and thought-provoking presentation on this important topic.

## Promoting sleep health in Aotearoa New Zealand

The Branch continues to grow its profile and presence both locally and internationally, and has established a social media presence on Facebook and LinkedIn with groups called Sleep in Aotearoa. The Branch welcomes group membership from all those interested in sleep health in Aotearoa. Thank you to Rosie Gibson, who ensures the success of many of the Branch's activities in this area.

## Acknowledgements

I would like to thank the Branch Executive Committee for their sustained efforts to raise awareness of sleep health and to prioritise it in Aotearoa, as well as for supporting clinical service provision.

Also, thanks to ASA President Garun Hamilton and the ASA Board Directors for their ongoing support and encouragement of New Zealand Branch initiatives.

## Dr Karyn O'Keeffe

New Zealand Branch Chair

<sup>5</sup> <https://asaprod.topclasslms.com/topclass/topclass.do?expand-OfferingDetails-Offeringid=2566907>



## Annual Report ANZSSA Representative

Over the 2024-2025 financial year, the Australia and New Zealand Sleep Science Association has continued to actively implement and update processes to enable the effective implementation of our 2024–2027 strategic plan.

We have continued to actively review our documentation, adding a dedicated section to our website to make policies readily accessible to our members. We developed a Risk Register and are working to minimise risks to our association. We have produced a skills matrix of board directors to assist with future planning. And we have implemented a succession planning model for the President role, documented in our Board charter, which we will review.

The third sitting of the ANZSSA Certificate Exam was held in March 2025 with 17 examinees. Following this exam we now have 61 Certification in Sleep Science (CSS) credential holders. Registration for the next exam scheduled for Monday 24 November 2025 is now open and will close on 27 October. Further information can be found at our dedicated **ANZSSA Certification Exam webpage**.<sup>6</sup>

ANZSSA continues to maintain a strong financial position with 427 current active members at the time of writing this report (our highest recorded level of membership).

ANZSSA has continued to provide many opportunities for connection and education for our members. Over the period of July 2024 to June 2025, we held 7 regional educational meetings and 4 journal club meetings. All were hosted online (some hybrid face-to-face and online) and recorded, with members provided access to post-event viewing of these recordings with CECs available.

We have also had 5 regional social functions for our members over this time.

I want to express my gratitude to the ANZSSA Conference Committee for arranging a record number of ANZSSA submissions for Sleep DownUnder 2024. They were involved in co-ordinating the combined short course with ASA “In the loop and out of the box: unlocking the power of sleep technologies beyond the lab”, the ANZSSA plenary “Sleepless secrets unveiled: bridging neuroscience, measurement and practice in insomnia”, two symposium sessions “Sleep science masterclass” and “Inspired Unspindling – interacting PSG mentimeter session”; and a breakfast session on “Exploring complex titrations: a practical symposium on PSG studies”.

These committee members also actively represent ANZSSA on the Sleep DownUnder Conference Committee. We sincerely thank the entire Conference Committee for their tireless efforts in what was another amazing conference with a stellar program.

ANZSSA has actively increasing funding opportunities for our members, supporting nine members to attend SDU2024; with Fisher & Paykel again generously having supported two New Zealand based members to attend.

We again funded a Board Director to attend Sleep in Aotearoa, and they provided brief update on ANZSSA activities. ANZSSA is dedicated to further increasing grant opportunities for our members as this is strongly aligned with our strategic objectives of supporting research in sleep science, developing a strong community and providing professional development opportunities for those who work in sleep science.

ANZSSA continue to value our strong relationship with the Australasian Sleep Association (ASA), of which

<sup>6</sup> [www.anzsleepsceience.org/anzssa-certification-exam](http://www.anzsleepsceience.org/anzssa-certification-exam)

co-hosting Sleep DownUnder each year is a prime example. Members of both associations, the field of sleep science and the wider community continue to benefit from such collaborations.

ANZSSA continues to foster collaborations with our key stakeholders the ASA, the Australian Council for Clinical Physiologists (ACCP) and the New Zealand Clinical Physiologists Registration Board (NZCPRB).

We proudly partnered with other physiologist associations - the Association of Neurophysiology Scientists of Australia (ANSA), the Australian and New Zealand Society of Respiratory Science (ANZSRS) and Professionals in Cardiac Sciences Australia (PiCSA) — to plan an excellent educational program incorporating cross discipline plenary as well as discipline specific sessions for the inaugural Australia and New Zealand Clinical Education Hub Day scheduled for August 2025, with the ACCP generously sponsoring this event.

ANZSSA has had another very successful year continuing to grow and provide members with increasing educational, networking and conference funding opportunities, while improving governance and actively pursuing new opportunities.

I want to sincerely thank the dedicated ANZSSA Board Directors and ANZSSA Committees members for all their time and effort in managing the day-to-day operations of ANZSSA as well as strategic planning and their visions for the future; and our members for their ongoing support and enthusiasm.

Thank you to the ASA and our key stakeholders for your ongoing support; we very much look forward to continued collaborations with you well into the future.

**Nicole Verginis**

ANZSSA representative

# Financial Report

FOR THE YEAR ENDED 30 JUNE 2025

Liability limited by a scheme approved under Professional Standards Legislation

## Index

Directors' report

Auditor's independence declaration

Statement of profit or loss and other comprehensive income

Statement of financial position

Statement of changes in equity

Statement of cash flows

Notes to the financial statements

Directors' declaration

Auditor's report



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[www.sleep.org.au](http://www.sleep.org.au) | ABN 51 138 032 014

# Directors' Report

The directors present their report on the Australasian Sleep Association for the financial year ended 30 June 2025.

## Information on Directors

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

David Cunnington

Jasneek Chawla

Barbara Galland

Melinda Downey

Andrew Vakulin

Teanau Roebuck

Garun Hamilton

Camilla Padula

Hannah Scott

(appointed on 17 October 2024)

Sutapa Mukherjee

(resigned on 17 October 2024)

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

## Operating Results

The profit of the company amounted to \$132,287 (2024 profit: \$73,160).

## 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:

- 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 2025 has been received and can be found on the following page.

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

Director:



Garun Hamilton

Director:



Melinda Downey

Dated this 12th day of September 2025



# Auditor's Independence Declaration

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

I hereby declare, that to the best of my knowledge and belief, during the financial year ended 30 June 2025 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 12th day of September 2025

# Statement of Profit or Loss and Other Comprehensive Income

for the Year ended 30 June 2025

	Note	2025 \$	2024 \$
<b>Income</b>			
Revenue	3	1,558,160	1,204,782
Other income	3	37,336	38,816
		1,595,496	1,243,598
<b>Expenditure</b>			
Accountancy expenses		(2,800)	(2,300)
Auditor's remuneration		(5,870)	(9,350)
Depreciation and amortisation expenses		(1,629)	(2,423)
Employee benefits expenses		(832,081)	(801,528)
Other expenses	4	(650,565)	(388,764)
		(1,492,945)	(1,204,365)
<b>Current year profit/(loss) before income tax</b>		102,551	39,233
<b>Net current year profit/(loss)</b>		102,551	39,233
<b>Other comprehensive income</b>			
Fair value remeasurement gains/(losses) on available-for-sale financial assets	3	29,736	33,927
<b>Other comprehensive income for the year</b>		29,736	33,927
<b>Total comprehensive income for the year</b>		132,287	73,160

# Statement of Financial Position

as at 30 June 2025

	Note	2025 \$	2024 \$
<b>ASSETS</b>			
<b>Current Assets</b>			
Cash and cash equivalents	5	393,326	345,683
Trade and other receivables	6	471,239	294,326
TOTAL CURRENT ASSETS		864,565	640,009
<b>Non-current assets</b>			
Other financial assets	7	1,129,487	1,051,229
Property, plant and equipment	8	3,968	5,597
TOTAL NON-CURRENT ASSETS		1,133,455	1,056,826
TOTAL ASSETS		1,998,020	1,696,835
<b>LIABILITIES</b>			
<b>Current Liabilities</b>			
Trade and other payables	9	482,973	371,399
Provisions	10	40,028	37,753
TOTAL CURRENT LIABILITIES		523,001	409,152
<b>Non-current Liabilities</b>			
Trade and other payables	9	413,064	370,356
Provisions	10	31,247	18,906
TOTAL NON-CURRENT LIABILITIES		444,311	389,262
TOTAL LIABILITIES		967,312	798,414
NET ASSETS (LIABILITIES)		1,030,708	898,421
<b>EQUITY</b>			
Retained surplus	11	1,030,708	898,421
<b>TOTAL EQUITY</b>		1,030,708	898,421

The accompanying notes form part of these financial statements.

# Statement of Changes in Equity

for the Year ended 30 June 2025

	Note	Retained surplus \$	Total \$
<b>Balance at 1 July 2023</b>		825,261	825,261
Profit attributable to members of the entity		73,160	73,160
<b>Balance at 30 June 2024</b>		898,421	898,421
Profit attributable to members of the entity		132,287	132,287
<b>Balance at 30 June 2025</b>		1,030,708	1,030,708

# Statement of Cash Flows

for the Year ended 30 June 2025

	Note	2025 \$	2024 \$
<b>Cash Flows from Operating Activities</b>			
Membership fees received		309,150	251,316
Conference income received		206,250	139,524
Grant income		934,072	820,822
Other income received		196,255	131,572
Payments to suppliers, employees & others		(1,606,688)	(1,268,286)
Interest received		1,919	2,211
<b>Net cash provided by operating activities</b>	12	40,958	77,159
<b>Cash Flows from Investing Activities</b>			
Proceeds from sale of available-for-sale investments		270,895	258,134
Earnings received from investments		39,360	73,071
Payments for plant and equipment		–	(4,300)
Payments for available-for-sale investments		(303,570)	(291,648)
<b>Net cash provided by investing activities</b>		6,685	35,257
Net increase in cash held		47,643	112,416
Cash at beginning of financial year		345,683	233,267
Cash at end of financial year	5	393,326	345,683

The accompanying notes form part of these financial statements.

# Notes to the Financial Statements

for the Year ended 30 June 2025

The financial statements cover Australasian Sleep Association as an individual entity, incorporated and domiciled in Australia. Australasian Sleep Association is a company limited by guarantee.

The financial statements was authorised for issue on 12 September 2025 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 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.

The accompanying notes form part of these financial statements.

### **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 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.

### **Employee Benefits**

Provision is made for the company's liability for employee benefits, those 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.

### **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.

### **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.

### **Grant income**

A number of the company's programs are supported by grants received from the federal government.

If conditions are attached to a grant which must be satisfied before the company is eligible to receive the contribution, recognition of the grant as revenue is deferred until those conditions are satisfied.

Where a grant is received on the condition that specified services are delivered to the grantor, this is considered a reciprocal transaction. Revenue is recognised as services are performed and at year end a liability is recognised until the service is delivered.

Revenue from a non-reciprocal grant that is not subject to conditions is recognised when the company obtains control of the funds, economic benefits are probable, and the amount can be measured reliably. Where a grant may be required to be repaid if certain conditions are not satisfied, a liability is recognised at year end to the extent that conditions remain unsatisfied.

### **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.

Provisions are measured at the present value of management's best estimate of the outflow required to settle the obligation at the end of the reporting year. The discount rate used is a pre-tax rate that reflects current market assessments of the time value of money and the risks specific to the liability. The increase in the provision due to the unwinding of the discount is taken to finance costs in the statement of other comprehensive income.

### **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.

	2025	2024
	\$	\$
<b>3 Revenue and Other Income</b>		
<b>Income</b>		
Membership subscriptions	289,353	258,224
Conference income	215,354	137,420
Grant received	858,715	693,095
State Meetings	44,972	12,250
Fellow of Dental Sleep Medicine Program	51,715	55,200
Sundry income	96,132	46,381
Interest received	1,919	2,212
	1,558,160	1,204,782
<b>Other income</b>		
Dividend and investment earnings received	35,913	38,288
Foreign currency translation gains	1,423	528
Fair value remeasurement gains /(losses) on available-for-sale financial assets	29,736	33,927
	67,072	72,743
	1,625,232	1,277,525

#### **Investment earnings**

During the year, net realised and unrealised gains of \$96,400 was earned from available-for-sale financial assets held. This amount comprised of unrealised gains of \$43,664 and realised gains of \$52,736, including franking credits of \$10,390. 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 gains allocated to special funds for the current year totalled \$30,751, representing 31.90% of total net investment earnings.

#### **Commonwealth grants**

During the year, the company secured commonwealth funding of \$361,519 as part of the Health Peak and Advisory Bodies program and \$572,553 as part of the Quality Use of Diagnostics, Therapeutics and Pathology program. Funding received was spent in accordance with the grant agreement, with \$203,084 unspent funds held at 30 June 2025. Unspent funds will be spent in the next financial year.

	<b>2025</b>	<b>2024</b>
	<b>\$</b>	<b>\$</b>
<b>4 Expenses</b>		
Advertising & promotion	67,940	21,998
Awards & grants	791	591
Bad debts	5,122	–
Bank charges	5,097	9,841
Board & other meeting expenses	10,078	12,464
Computer & IT service expenses	49,703	15,558
Conference expenditure	51,736	31,821
Consultants fees	27,113	24,000
Educational activities and expenses	252,573	80,600
Fellow of Dental Sleep Medicine Program	–	20,318
General expenses	2,833	2,205
Insurance	19,988	13,375
Market research expenses	7,700	7,700
Office expenses	–	1,652
Other education expenses	9,948	27,657
Postage	385	521
Printing & stationery	3,005	4,266
Program evaluation expenses	20,981	6,250
Rent & outgoings	5,365	5,528
Resource development	34,209	26,315
Speaker expenses	3,000	1,200
Staff & board training	340	2,497
State meetings	10,834	7,817
Stakeholder group Honoraria	6,750	8,900
Subscriptions	12,843	7,742
Staff costs	1,112	1,450
Telephone & internet	2,352	2,823
Travelling, accommodation & meals	38,767	43,675
	650,565	388,764

	2025	2024
	\$	\$
<b>5 Cash and Cash Equivalents</b>		
Cash at bank	299,552	235,175
Savings account	107	107
Petty cash	31	31
Cash at bank - NZ	25,627	67,702
Cash at bank - JBWere	34,063	27,939
Deposits at call	33,946	14,729
	393,326	345,683
<b>Reconciliation of cash</b>		
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	393,326	345,683
	393,326	345,683
<b>6 Trade and Other Receivables</b>		
Trade debtors	45,842	18,322
Other debtors	52,386	40,931
Prepayments	28,684	49,955
The Conference Company investment	344,327	185,118
	471,239	294,326
<b>7 Other Financial Assets</b>		
<b>Non-Current</b>		
Available-for-sale financial assets	1,129,487	1,051,229
<b>8 Property, Plant and Equipment</b>		
<b>Plant and Equipment:</b>		
At cost	15,872	15,872
Accumulated depreciation	(11,904)	(10,275)
<b>Total Plant and Equipment</b>	3,968	5,597

	2025	2024
	\$	\$
<b>9 Trade and Other Payables</b>		
<b>Current</b>		
Trade creditors	39,917	11,935
Credit card liabilities	8,572	7,112
GST liabilities	27,656	20,828
Superannuation payable	6,736	7,481
PAYG tax payable	12,314	14,812
Prepaid membership income	184,694	164,897
Prepaid conference income	–	9,105
Other creditors	–	7,503
Grants unspent	203,084	127,726
	482,973	371,399
<b>Non-Current</b>		
Rob Pierce Fund	21,878	14,713
Helen Bearpark Fund	305,188	287,658
Nick Antic Fund	58,051	53,324
Sleep Research Future Fund	27,947	14,661
	413,064	370,356
<b>10 Provisions</b>		
<b>Current</b>		
Provision for annual leave	40,028	37,753
<b>Non-Current</b>		
Provision for long service leave	31,247	18,906
<b>11 Retained Surplus</b>		
Retained surplus at the beginning of the financial year	898,421	825,261
Net profit attributable to members of the company	132,287	73,160
Retained surplus at the end of the financial year	1,030,708	898,421

	2025	2024
	\$	\$
<b>12 Cash Flow Information</b>		
<b>Reconciliation of net income to net cash provided by operating activities:</b>		
Profit after income tax	132,287	73,160
Cash flows excluded from profit attributable to operating activities		
<b>Non-cash flows in profit</b>		
Depreciation expense	1,629	2,423
Gains on available-for-sale investments	(54,158)	(106,713)
<b>Changes in assets and liabilities</b>		
(Increase)/Decrease in trade and other receivables	(198,184)	(113,025)
(Increase)/Decrease in prepayments	21,272	37,553
Increase/(Decrease) in payables	25,490	10,787
Increase/(Decrease) in income in advance	98,005	156,827
Increase/(Decrease) in employee provisions	14,617	16,147
	40,958	77,159

An adjustment has been made to the comparative figures for the change in income in advance to reflect earnings allocated to trust funds held. This has resulted in an increase in the net cash flows from operating activities and decrease in the net cash flows from investing activities of \$34,497.

## 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
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## 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 2025 the number of members was 1017 (2024: 1027).

# 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 2025 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 2025 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:



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Garun Hamilton

Director:



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Melinda Downey

Dated this 12th day of September 2025



# 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 2025, 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 2025, 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 2025, 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 12th day of September 2025



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