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PEER PAYMENT STANDARDS FOR SHORT-TERM ENGAGEMENTS

Created in collaboration with peers and providers

BC Centre for Disease Control



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PURPOSE

People who have lived experience with drug use, either past or present (peers), are consulted as experts and use their lived experience to inform their professional work. Representative peer engagement is necessary for the design of effective health service delivery and programming to reduce health inequities and achieve social justice.¹

Payment standards are required to inform and enable equitable payment amounts for peer engagement. BC Centre for Disease Control (BCCDC) Peer Payment Standards have been created as a supplement to [BCCDC Peer Engagement Principles and Best Practices](#) and [BCCDC Paying Peer Research Assistants Guide](#).^{2,3} BCCDC Peer Payment Standards for Short-term Engagements inform payment amounts and methods to use when engaging peers in work across British Columbia (BC). The monetary amounts in this document are outlined to ensure consistent and thoughtful payment when engaging peers.

The focus of these standards is short-term peer engagements, such as attending meetings as an expert or advising on

policy documents, that are not classified as employment relationships. **BCCDC recommends employing peers full-time or for longer-term contract engagements when possible and appropriate.**

These standards are intended for BCCDC and can be considered for use by health authorities and other organizations who engage peers in BC. However, it is recognized that peer-run and/or community-based organizations may be unable to meet these standards due to funding constraints and/or the task-based nature of peer work at these organizations.

All findings and recommendations are based on engagements with key stakeholders (peers, health authorities, community-based and peer-run organizations) across all five regional health authorities in BC.

BACKGROUND

This document builds on existing peer engagement and payment work. Table 1 outlines some of this work and highlights the importance of payment for engagement.

Note on terminology: the term ‘peer’ is widely used to describe someone with lived experience. Although this document uses the term peer, it is not always preferred. Terminology is constantly evolving. Always check-in with people to find out what works best for them.

Table 1: Supporting Guidelines

DOCUMENT	PAYMENT PRINCIPLES
<p>Peer Engagement Principles and Best Practices²</p> <p>BC CENTRE FOR DISEASE CONTROL</p>	<p>“It is essential that providers understand the complete financial departmental process and nuances of compensating peers, and set up expectations about pay with them – amount, frequency, and method – early on” [2, p32]</p> <p>“It is unreasonable to expect peers to pay for their own expenses and be reimbursed afterwards” [2, p42]</p> <p>“Misunderstandings and lack of expectations for payment of travel can be stigmatizing and develop unbalanced power relationships between peers and providers” [2, p42]</p>
<p>A Guide for Paying Peer Research Assistants³</p> <p>BC CENTRE FOR DISEASE CONTROL</p>	<p>“Best practice in community-based participatory research is compensating peer research assistants for the work that they do rather than expecting them to volunteer their time” [3, p3]</p>
<p>Peerology – guide by and for people who use drugs on how to get involved¹</p> <p>CAPUD, FACILITATED BY CANADIAN AIDS SOCIETY</p>	<p>“10th Recommendation: Compensate us for our time..This implies: offering us money...” [1, p6]</p>
<p>Nothing About Us Without Us⁴</p> <p>CANADIAN HIV/AIDS LEGAL NETWORK</p>	<p>“Do provide an honorarium – contrary to most people who attend your meetings, we are not paid to attend by our jobs, but still need to look after our needs” [4, p15]</p> <p>“Don’t assume that we don’t need an honorarium or would just spend it on drugs (or that it wouldn’t be justified even if we did)” [4, p15]</p> <p>“Do give us money in cash” [4, p15]</p> <p>“Don’t write us a cheque or give us a coupon” [4, p15]</p>

FINDINGS/ RECOMMENDATIONS

The findings from the engagement process are outlined below:

1. Be upfront about payment. Discuss the following with peers upfront:

- payment amounts for short-term peer engagements
- Other expenses that are covered
- Best time to pay
- Implications of payments (see recommendation 5)

See [Appendix C: Peer Engagement Checklist for Providing Short-Term Payment](#) for a sample checklist to follow during initial conversations

2. Provide options. Peers highlighted the importance of being asked when and how they prefer to receive their honorarium. Peers may choose to receive their honorarium in different ways. For example:

- After the work is complete
- Half before, half after the work is complete (or another combination)
- Mixed payment methods (cash and cheque), to assist with money management

3. Pay cash (see [Table 2: Payment Amounts](#)). Unless specifically requested, cash is always preferred for paying peers. Paying with gift cards may be seen as patronizing because it assumes that the payer is delegating where a peer should spend their money.

Develop a process with the finance department to ensure that cash payments are possible. Provincial Health Services Authority (PHSA) has a process for paying cash (outlined in Appendix A). An honorarium form will need to be signed for cash payments to demonstrate proof of payment to finance. [Appendix C: Honorarium Form Template](#) offers two BCCDC templates that can be modified for use by other organizations.

- Do not give cash in bills over \$20 (e.g. \$100 bills). Some businesses do not accept bills over \$20.
- Payment should be made directly to peers whenever possible. Some exceptions may be considered with assurance that the peer will receive the full amount.
- E-transfer may be reasonable when paying a peer that lives in another location. Work with peers to determine how best to get the cash to them in these circumstances.
- Not all peers will want to be paid in cash. Payments by cheque should be used if a peer requests it. Be honest about how long it will take to process cheque payments. Incorporate user fees (e.g. Money Mart) into payments for peers who cash cheques without bank accounts. Most banks and money lenders charge a 3% fee to cash the cheque, this should be added to the value of the cheque.
- Try to pay in a discreet or private location. It may be uncomfortable for peers if they are the only people in a room receiving an honorarium.
- For long-term engagements, cash may not be appropriate. Consider an employment or contract relationship and discuss payroll options with peers upfront.

4. Cover other costs. Organizations should pay for other costs directly and in advance (such as airfare or hotel) whenever possible, instead of expecting peers to pay upfront and reimbursing them later. Any other costs should be discussed upfront, as stated in recommendation #1.

These other costs do not affect maximum earning exemptions for people on disability or income assistance because they are not considered income.

Other costs related to **out-of-town** meetings that should be covered by the organization include:

- Transportation round trip (gas/mileage, parking, public transit, airfare)
- Accommodationⁱ
- Meal per diems
- Travel time
- Childcare

The definition of out-of-town travel distance should be evaluated independent of current internal employee policy. Out-of-town travel distance should be assessed on a case by case basis. Consider the meeting length, barriers to transportation and other impacts for the peer who is travelling.

Other costs that should be covered for **in-town** peers include:

- Transportation round trip (gas/mileage, parking, public transit)
- Childcare

ⁱSome peers may not have a credit card and/or identification. Work with the hotel to ensure that they don't ask peers for this at check-in.

5. Discuss Income and/or Disability Assistance. Income may have implications for people enrolled in government assistance programs, such as Income and/or disability assistance. Have a discussion about these implications before the engagement.

Do not assume that all peers are on a form of assistance or that they do not have the information. Having a discussion about income and/or disability assistance with all peers ensures that they have the information to make the best choice about their earnings. Have receipts available if peers want them for their records.

Since information on government assistance programs is constantly changing, remain up to date on earning exemptions outlined by the Ministry of Social Development and Poverty Reduction.

Earning exemption as of October 1, 2017 for people on income assistance:

- For a single person receiving **income assistance**: \$400.00 a month
- For families with children: \$600.00 a month
- For families with a child with a disability: \$700.00 a month
- For a person in the Persons with **Persistent Multiple Barriers** category: \$700.00 a month

Earning exemption as of October 1, 2017 for people on disability assistance:

- \$12,000 for a single person with the **Persons with Disabilities** designation
- \$14,400 for a family with two adults where only one person has the Persons with Disabilities designation
- \$24,000 for a family where both adults have the Persons with Disabilities designation

Peer honorariums may qualify for exemptions if they are coded by the payer as expenses and/or gifts through finance. Refer to the **Ministry of Social Development and Poverty Reduction website** for further information on this exemption.

PAYMENT AMOUNTS

Table 2: Payment Amounts

TYPE OF WORK	RECOMMENDED	OTHER COSTS TO COVER
MEETING, DOCUMENT REVIEW OR OTHER ADVISORY ROLE	<p>\$25 per hour.</p> <p><i>Pay a full hour amount for engagements of this type that are less than one hour in duration.</i></p> <p><i>Agree upon a minimum and maximum number of hours required for the engagement in advance. Pay for the minimum agreed upon hours and any time over this.</i></p>	<p>Transportation costs</p> <p>Accommodation (if out-of-town)</p> <p>Meal per diems (if out-of-town)</p> <p>Child care (case-by-case basis)</p> <p>Three hours of travel time should be covered for peers who spend the day before or after a meeting travelling</p> <p>Any other expenses incurred related to the engagement (e.g. long distance charges).</p>
PEER MEETING SUPPORT WORKER (This peer role is intended to provide other peers additional support during and outside meeting times.)	<p>\$30/hr during meeting.</p> <p>\$100/day flat rate for 24-hour on-call peer support in addition to meeting honorarium.</p> <p><i>Agree upon a minimum and maximum number of hours required for the engagement in advance. Pay for the minimum agreed upon hours and any time over this.</i></p>	<p>Same as above.</p>
PRESENTATION/ FACILITATION	<p>\$50 per hour.</p> <p><i>Pay a full hour amount for engagements of this type that are less than one hour in duration.</i></p> <p><i>Agree upon a minimum and maximum number of hours required for the engagement in advance. Pay for the minimum agreed upon hours and any time over this.</i></p>	<p>Same as above.</p>
TASK-BASED WORK	<p>At least BC Living Wage when the task exceeds one hour in length.</p> <p>Vancouver Coastal Health has developed a comprehensive framework for health-related, task-based work⁵. This may be adapted depending on context and location.</p> <p><i>Agree upon a minimum and maximum number of hours required for the engagement in advance. Pay for the minimum agreed upon hours and any time over this.</i></p>	<p>Any other expenses incurred related to the engagement (e.g. long distance charges)</p>
EMPLOYMENT OR CONTRACT	<p>As per organizational employment or contracting standards at market rate comparable to non-peer roles with applicable benefits.</p>	<p>As per organizational employment or contracting standards at market rate comparable to non-peer roles.</p>

DOCUMENT ENGAGEMENT PROCESS

All findings and recommendations are based on collaborations with key stakeholders (peers, health authority programs that include harm reduction, Ministry of Health, Ministry of Mental Health and Addictions, PHSA Human Resources and Finance, community-based harm reduction organizations and peer-run organizations) across all five regional health authorities and First Nations Health Authority in BC. Key stakeholders included people with lived experience, harm reduction

coordinators, peer coordinators, program managers, directors, nurse educators and front line staff.

The process included stakeholder engagements in two-steps:

1. Initial face-to-face engagements and surveys
2. Review of a draft document for feedback prior to publishing

Engagements aimed to collect input and feedback that are representative of varying regional contexts. Engagements numbers are outlined in Table 3.

Table 3: Number of people who collaborated on this document by group.

GROUP	NUMBER OF PEOPLE
PEER	26
COMMUNITY-BASED ORGANIZATION REPRESENTATIVE	5
HEALTH AUTHORITY REPRESENTATIVE	49
MINISTRY OF HEALTH/MINISTRY OF MENTAL HEALTH AND ADDICTIONS REPRESENTATIVE	7
PHSA HUMAN RESOURCES AND FINANCE REPRESENTATIVE	3
TOTAL	90

CONCLUSION

BCCDC Peer Payment Standards outline payment amounts and methods to use when engaging peers in work across BC. These standards can be used by health authorities, government and community-based organizations to inform equitable peer

payment. Although this document outlines payment standards for peers with lived-experience of substance use, it can be applied to other peer groups. This work is constantly evolving and will be updated annually or as required.

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APPENDIX A

PEER ENGAGEMENT CHECKLIST FOR PROVIDING SHORT-TERM PAYMENT

This checklist is an overview of payment considerations before and during peer engagement. Review page eight of [Peer Engagement Principles and Best Practice Guidelines](#) for an overall checklist for peer engagement.

BEFORE COMMITTING TO AN ENGAGEMENT

- ✓ Ensure there is leadership commitment to pay peers.
- ✓ Ensure there are financial resources available to support equitable peer payment.
- ✓ Decide on the number of peers to engage and confirm payment amounts so that budgets can be allocated appropriately.
- ✓ Ensure that there is administrative support available so peer payment processes can be coordinated.
- ✓ Ensure financial processes are in place so that peers can be paid in the way that best suits them. Cash payment must be an option. E-transfer and cheque payments should also be considered if that's what works best for the peer.

BEFORE ENGAGING PEERS

- ✓ Review Peer Engagement Principles and Best Practice Guidelines.
- ✓ Develop a process or solution to mitigate delays in payment.
- ✓ Ensure that there is a discreet place to pay peers.

ENGAGEMENT

- ✓ Discuss the role expectations and payment amount with the individual.
- ✓ Discuss the minimum and maximum number of hours expected for the engagement with the individual.
- ✓ Discuss with the individual how they would like to be paid and when.
- ✓ Discuss any other costs that will be covered and offer options for when and how they will be paid.
- ✓ Ask the individual if there are any barriers to participation (If barriers exist that can be reasonably minimized by the organizer, such as childcare, consider the possibility of covering these costs).
- ✓ Ask the individual about income or disability assistance, and discuss the implications of receiving honorarium. Ask if the peer requires assistance navigating this process or tracking honoraria received. Do not assume that all peers are on a form of assistance or that they do not have the information.
- ✓ Discuss tax implications and income reporting requirements for honorariums that exceed \$500 annually.

APPENDIX B

PHSA PROCESS FOR OBTAINING PEER PAYMENT CASH ADVANCE

PURPOSE: To provide guidance on obtaining and closing out a cash advance for peer payments.

1. Cash Advance

- 1.1 Peer payments are only issued to non-employees. Employees are to be paid through payroll.
- 1.2 Cash advances may be provided if required, at PHSA's discretion, to pay for valid business expenses under the Finance Policy FIN200. This includes peer payments.
- 1.3 All cash advances must be approved in advance by the department supervisor. Cheque will be issued by BCCSS Accounts Payable to the Advance Recipient (allow an estimated 5 business days).
- 1.4 Advance Recipient will require peer to sign an honorarium form for cash received. If the Advance Recipient is unable to give peer cash in-person, an e-transfer from their personal account is sent. The e-transfer receipt can be used as supporting documentation.
- 1.5 Cash advance funds must be used within three months of the cash advance date.
- 1.6 Advance Recipient will close the cash advance by reconciling the advance online and submitting hard copy of the supporting documentation attached to the claim to BCCSS Accounts Payable.
 - 1.6.1 Supporting documentation will include a reconciliation of cash used with signed honorarium forms or e-transfer receipts attached. Where cash advance exceeds actual issuance, the employee will attach a personal cheque for unused funds (cheque made out to PHSA).
- 1.7 BCCSS Accounts Payable will review submission for completeness and appropriate approval and close outstanding cash advance.
- 1.8 PHSA Finance will investigate any outstanding cash advances older than three months by contacting the Advance Recipient and their supervisor.

2. Responsibility

- 2.1 It is the responsibility of the Advance Recipient to properly close the cash advance received within three months of issuance.
- 2.2 It is the responsibility of the department supervisor who approved the cash advance to ensure that the supporting documents submitted by the Advance Recipient are reasonable, complete, and accurate.
- 2.3 It is the responsibility of the Advance Recipient and department supervisor to safeguard the cash advance.
- 2.4 The Advance Recipient and department supervisor who approved the advance are held responsible for the proper close out of the cash advance or the return of those funds.

APPENDIX C

HONORARIUM FORM TEMPLATES

Submitting for Honoraria

Work completed: _____

_____ (____ hours).

DATE: _____

PARTICIPANT:

By signing below you are acknowledging that you completed the work above and are eligible for an honorarium in the amount of \$_____. Please accept this honorarium as a small token of our appreciation for your assistance and support in the above mentioned work.

Thank you,

Witness (PHSA Staff)

Participant

I, _____ (name), acknowledge that I have received \$ _____ for participating in the _____ meeting.
Signature: _____ Date: _____

I, _____ (name), acknowledge that I have received \$ _____ for participating in the _____ meeting.
Signature: _____ Date: _____

I, _____ (name), acknowledge that I have received \$ _____ for participating in the _____ meeting.
Signature: _____ Date: _____

I, _____ (name), acknowledge that I have received \$ _____ for participating in the _____ meeting.
Signature: _____ Date: _____