



ONTARIO INSTITUTE  
BRAIN ONTARIEN  
INSTITUTE DU CERVEAU

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# OBI Patient Partner Payment Policy

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03 July 2025

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Ontario 

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## Purpose

This document clarifies the Ontario Brain Institute's (OBI) policies and procedures for providing honoraria payments to patient, family, and community partners ('patient partners') in collaborative activities. These partnerships can cover diverse OBI activities including document review, knowledge sharing, and data consultation. This policy builds on OBI's previous 'Workshop Honorarium Policy' (March 2023) and emphasizes the importance of recognizing and appreciating patient partners' contributions. It also aims to acknowledge the value of their time, expertise, and lived experience.

## Scope and guidance

This document will be used to guide OBI in engaging with patient partners on opportunities for involvement, consultations, and partnership. Patient partners will also receive a copy of this document to ensure they are well informed about OBI's processes.

It is important that OBI provide patient partners with the best estimate of time and planned activities. This will help clarify expectations about time, contributions, and financial considerations while ensuring patient partners can make an informed decision.

This is living document that will continue to be updated to reflect evolving practices and knowledge.

### Does this policy apply to me?

This policy applies if you are a patient partner collaborating with OBI and you are not being compensated for this time/work by another partner. That is, your participation is not paid work or compensated by other parties.

### What is the difference between patient partner payments and covering/reimbursing direct expenses?

Patient partner payments, or honoraria payments are dedicated to patients and community members collaborating with OBI as part of unpaid work (and often using personal time). It refers to **paying an individual for their time, skills, and expertise in support of OBI's work**. This policy document covers these 'patient partner payments'.

Covering expenses, or reimbursing, means paying for expenses that **a partner incurs to enable collaborating with OBI**. They include transport costs for in-person meetings, a hotel

room, or child-care or other caregiving. Our [Travel, Meals, and Business Related Functions Expense Policy](#) covers these expenses (Also see '[Expense Reimbursement](#)' section below).

**For example:** OBI invited Adam to join a committee for reviewing funding applications. Adam took a taxi to OBI offices and attended a two-hour meeting.



OBI will cover the taxi fare to downtown Toronto. This falls under 'expense reimbursement' to ensure that Adam is not using personal funds to partner with OBI.



Adam will receive an honorarium for two hours of work during the meeting. This is the 'patient partner payment' for Adam's time and expertise.

## Terms and definitions<sup>1,2,3</sup>

<b>Patient</b>	A broad term that covers persons with past or ongoing experience of a brain health condition. It includes family, friends, and others involved in 'informal caregiving' not part of paid work.
<b>Patient participant</b>	Patients who are involved in a research study by providing data or responses to study questions (e.g. interventions, surveys). Their data is an important part of answering research questions. Working with them requires research ethics board (ERB) approval and <u>this policy does not cover this type of activity</u> .
<b>Patient partner</b>	Refers to patients who are playing a role in shaping OBI activities such as consultations on OBI priorities, reviewing funding applications, participation in working groups, and more. They include patients, caregivers and representatives of community organizations working in patient advocacy. This is distinct from 'patient participant' and doesn't require ethics board (REB) approval.
<b>Patient Partner Payment</b>	Sometimes referred to as 'honorarium payment' or compensation. Refers to awarding patient partners for the time, skills, lived

<sup>1</sup> <https://cihr-irsc.gc.ca/e/51466.html>

<sup>2</sup> [https://sporevidencealliance.ca/wp-content/uploads/2022/01/SPOREA\\_Patient-and-Public-Appreciation-Policy\\_2021.01.14-1.pdf](https://sporevidencealliance.ca/wp-content/uploads/2022/01/SPOREA_Patient-and-Public-Appreciation-Policy_2021.01.14-1.pdf)

<sup>3</sup> [https://absporu.ca/wp-content/uploads/2023/02/AbSPORU-PE\\_Patient-Partner-Compensation-Guidelines\\_February-2023.pdf](https://absporu.ca/wp-content/uploads/2023/02/AbSPORU-PE_Patient-Partner-Compensation-Guidelines_February-2023.pdf)

	experience and expertise they bring to collaboration activities. They are offered as a recognition and value of patient partner contributions to OBI's work.
<b>Expenses</b>	Refers to the direct costs and expenses that arise out of collaborating with OBI. They include travel, parking, meals, and care giving. OBI has a separate <a href="#">Travel, Meals, and Business Related Functions Expense Policy</a> that covers these details. It is separate from this 'Patient Partner Payment Policy'.

## Considerations for Patient Partners

- **There is no obligation for a patient partner to accept payment** from OBI. Patient partners can refuse payment without it affecting their ability to participate.
- **Patient Partners are encouraged to make an informed choice about accepting compensation (or not).** They will be responsible for their own finances and should ensure they are fully aware of the impact of receiving payments on their tax return or disability-related pay. Examples of what to keep in mind:
  - Total payments that exceed \$500 in one year (Jan-Dec) will be considered taxable income by The Canada Revenue Agency (CRA). OBI will then request the Patient Partner's social insurance number and issue a T4A.
  - Patient partner payments may affect the benefits amount and/or status for individuals on disability, pension, or other forms of income such as Canada Pension Disability (CPD) or the Ontario Disability Support Program (ODSB).

### Related resources

- Interested in how the CRA processes patient partner/honorarium payments? Review this [booklet](#) by the University of Toronto's Financial Services.
- Want to learn about T4A slips for patient partners paid over \$500 in a year? The CRA provides an explanation [here](#).
- Want more information on how ODSB handles these payments? Review "Income Exemptions" section [here](#).

## Payment types

Payment type	Needed information	Notes
<b>Electronic Fund Transfer (EFT)</b> Patient partner would receive the payment directly into their account	<ul style="list-style-type: none"> <li>Completed <a href="#">EFT form</a>, which includes personal banking information</li> </ul>	This is usually the fastest way to receive payment
<b>Cheque</b> Patient partner will receive a cheque in the mail	<ul style="list-style-type: none"> <li>Mailing address</li> </ul>	This is the slowest option for receiving payments would require at least 4 weeks

## Payment rates

Activity	Description	Rate
<b>Consultant role</b>	Patient partner offers their opinion, advice, or feedback (e.g. meetings, material reviews, priority setting)	\$25/hr for meetings, preparation, and review time
<b>Collaborator role</b>	Patient partner participates as a member of a working group or a review process (e.g. funding application, request for data access)	\$25/hr for meetings, preparation, and review time
<b>Presentation or facilitation</b>	Patient partner presents on a panel or facilitates discussion at an OBI event	\$25/hr for meetings, preparation, and presentation time.
<b>Event or workshop attendance</b>	Attend an event on behalf of OBI or an OBI planning workshop/event (e.g. OBI P/CAC Workshop)	Half-day (Approx 4 hours): \$100 Full-day (Approx 8 hours): \$200
<b>Attending OBI educational or training events</b>	Joining webinars or training sessions intended as education opportunities for the public or patient partners (e.g. OBI Public Talks)	Not eligible for payment

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## Important: Additional instructions

- OBI team member will work with patient partner in advance to agree on minimum and maximum number of expected hours and expenses.
  - Patient partners may need more time or have additional expenses than initially planned. In that case, they are responsible for contacting OBI for pre-approval.
- If an activity requires less than 0.5 hours, it will be rounded up to 0.5 hours.
- Patient partner is responsible for tracking hours and submitting them within two weeks of completing the partnership.
- If total annual payments exceed \$500 between January and December, OBI will request the Patient Partner's social insurance number and issue a T4A.
- OBI will record all payments using an internal tracking system. It is the responsibility of patient partners to confirm their hours using the honorarium payment form (see [here](#)).
- Patient partners can decide when they would like to receive payments. For ongoing collaboration and activities, OBI can group payments (e.g., send payments twice a year).

## Expense Reimbursement

As mentioned above, OBI has an existing '[Travel, Meals, and Business Related Functions Expense Policy](#)' specifying the types of expenses we cover. It also specifies conditions for covering expenses. Below are a few highlights, but it will be the patient partner's responsibility to ensure that they have full reviewed the original policy:

- **Travel:** This includes economy class airfare, train fare, bus fare or mileage. Taxi fares are covered for reasonable distances.
- **Overnight accommodation:** If out-of-town (or over 24 km from claimant's home), OBI team will do their best to directly cover the hotel stay. Otherwise, arrangements should be a single accommodation in a standard room in a moderately priced hotel. Duration should be for length of meeting plus 1 day before or after if necessary for travel.
- **Meals:** OBI covers meals using per diem rates and don't require receipts (see policy).
- **Caregiving allowance:** Expenses due to childcare, elder care, and other dependent care are eligible for \$50 reimbursement per day. For more information and to apply for the expense claim, please complete the 'Confirmation of Caregiver Expense' form [here](#).

Follow [this link](#) to fill out an Expense Claim Form online and review additional policy details.

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## Form: Patient Partner Payment

Thank you for partnering with us and co-contributing to OBI's goal of improving the brain health and mental wellness of Ontarians. **Please submit your hours within two weeks of completing the partnership.** There are two ways to submit this information:

**Option 1:** You can fill out an online version of this form [here](#)

**Option 2:** You can complete this form in PDF and email it to [cabuayyash@braininstitute.ca](mailto:cabuayyash@braininstitute.ca)

**Please list all completed activities that apply:**

What was the activity?	Date of activity	Number of hours
Examples: <ul style="list-style-type: none"><li>• Reviewed document</li><li>• Attended meeting</li><li>• Provided consultation</li></ul>		

<b>Total hours contributed:</b>	
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### Preferred form of payment

- I wish to accept payment in the form of an Electronic Funds Transfer
- I wish to accept payment in the form of a cheque
- I will reach out to [cabuayyash@braininstitute.ca](mailto:cabuayyash@braininstitute.ca) to explore other options

### **If you selected the 'Electronic Funds Transfer':**

Do we have the information for the transfer (e.g. bank account)? If the answer is 'no' or 'unsure', please click [here](#) to complete the relevant form. You will be taken to a secure page that will ensure the safety of your financial and personal information. You can read more [here](#).

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**Preferred frequency of payment:**

- Please process my payment upon receipt of this submission
- Please log my hours and process the payment twice a year (May and November)
- I will reach out to [cabuayyash@braininstitute.ca](mailto:cabuayyash@braininstitute.ca) to explore other options

By signing below, I acknowledge that I completed the work listed above and have not been paid by another party.

**Privacy & Confidentiality**

Information provided will be strictly used for payment purposes and a copy will be stored securely in the Ontario Brain Institute's network drive.

<b>First and Last Name:</b>	
<b>Mailing Address:</b>	
<b>Phone:</b>	<b>Email:</b>
<b>SIGNATURE (e-signature is acceptable):</b>	<b>DATE:</b>

Please submit this form to [cabuayyash@braininstitute.ca](mailto:cabuayyash@braininstitute.ca)

**OFFICE USE**

<b>Amount to be paid</b>		
Date received		
Preapproval #		
Cost centre & budget line		
Memo		
Name:	Date:	Verified (signature):
Name:	Date:	Approved (signature):