DALHOUSIE UNIVERSITY
FACULTY OF MEDICINE

Guidelines for Community Compensation, Support and Recognition with Dalhousie Medicine

Faculty of Medicine, Dalhousie University
November 4, 2025

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1. SCOPE

These guidelines apply specifically to community members with lived experience who are asked to "volunteer" their time, insights, and perspectives with Dalhousie Medicine.

These guidelines **do not apply to faculty, students, or staff** who volunteer their time to contribute to the Faculty of Medicine based on their lived experience.

2. BACKGROUND

Dalhousie Medicine is deeply committed to fostering social accountability in all aspects of its educational, research, and service initiatives. Rooted in principles of anti-oppression, community engagement, and equity, our Social Accountability Framework recognizes the diverse and intersecting identities of the communities we serve, both locally and globally. We believe that social accountability is fundamental to addressing the challenges facing healthcare systems and to promoting sustainability and resilience in health and education.

In alignment with this commitment, Dalhousie Medicine prioritizes a community-centered approach, ensuring that all initiatives reflect the needs and aspirations of the people we serve. We are dedicated to engaging meaningfully with the people and populations of the Maritimes, acknowledging the unique social, cultural, and economic backgrounds that shape their experiences. By implementing a distributed medical education model, we provide diverse and varied clinical experiences across the Maritimes, offering students and professionals the opportunity to engage with communities that reflect a wide range of health needs and realities.

In this context, valuing community is not just an abstract principle—it is the cornerstone of how we engage with and support the people we serve. The principles of social accountability directly shape our commitment to ensuring that community members and partners are integral to the design, delivery, and evaluation of all our initiatives. We do not view the community as passive recipients of healthcare services; rather, we actively work to recognize their strengths, listen to their voices, and co-create solutions that are sustainable and responsive to their evolving needs.

3. COMMUNITY ENGAGEMENT

Community members are not part of Dalhousie Medicine as faculty, staff, residents or students. Community members with lived experience are often asked to "volunteer" their time, insights, and perspectives. While their contributions can be seen as civic engagement, their expertise is frequently undervalued compared to that of academic or professional experts. It's essential to recognize that all forms of effort, knowledge, and information deserve fair compensation. Participation by community members requires their time and the willingness to share deeply personal and sometimes traumatic experiences with our faculty, staff and students. As the Faculty of Medicine seeks to deepen our engagement with communities, we want to implement reasonable compensation and support strategies that value their contributions.

These guidelines draw upon the International Association for Public Participation (IAP2) Spectrum, which outlines five levels of community engagement, each representing a different degree of involvement and influence in decision-making.

- Inform: Providing clear, accessible information to keep the community aware of decisions or initiatives.
- Consult: Seeking feedback to help inform decisions, typically through surveys or public meetings.
- Involve: Actively engaging the community in discussions and decision-making to ensure their perspectives are considered.
- Collaborate: Partnering with the community to develop solutions and share decision-making.
- Empower: Giving the community full control over decision-making and actions.

Understanding the difference between these approaches is crucial for ensuring transparency, fostering trust, and achieving meaningful outcomes. By adopting appropriate strategies for engagement and information-sharing, the community compensation process can be more inclusive, equitable, and responsive to the needs and concerns of all stakeholders.

4. COMMUNITY ROLES

In the Faculty of Medicine, there are several types of community roles that engage with students, faculty, and the broader educational environment. These roles offer opportunities for community members to contribute to medical education and can be vital for enhancing the curriculum and fostering connections between medical students and the community they will serve. Here are some roles where community members engage with Dalhousie Medicine:

- **Volunteer Patient Program:** First-year medical students will practise taking medical history and perform a non-invasive medical exam with a volunteer patient under the direction of their tutor (a fully licensed physician).
- **Community Engaged Service Learning**: In the first year, the program integrates community engagement concepts into classroom-based learning through Professional Competencies 1. In the second year, students have the option to participate in a community-engaged experience and contribute to a small project with a community organization.
- **Curriculum Engagement:** Community members, including patients, family members, and advocacy groups, may serve as panelists in the early years of medical education (Years 1 and 2). They share personal experiences, insights, and expertise on various medical and healthcare topics, providing a community perspective on the medical curriculum.
- **Conference Participants:** Community members may be involved in medical conferences, symposia, or workshops, which are often funded externally (e.g., through grants, sponsorships, or partnerships with industry). They may contribute as speakers, panelists, or participants in discussions, offering diverse perspectives on health, medicine, and societal challenges.
- **Advisory Committees**: Community members may serve on advisory committees that help shape the direction of the medical school's curriculum, policies, or outreach programs. Community members do participate in admissions committees.
- **Working with Indigenous Elders**: Dalhousie University has a set of guidelines to assist engaging with Indigenous Elders for a project or event. Additional information can be found at the Dalhousie site. This work is under review and will be updated in 2025
- **Research Collaborators**: Community members, including patients, may participate in research studies or contribute to community-based participatory research. They help inform and shape research questions, methods, and findings to ensure they are relevant and beneficial to the community.
    - The Maritime SPOR(Strategy for Patient Oriented Research) Support Unit (MSSU) has a Patient Partner Compensation and Reimbursement Policy which focuses on patient partners involved in MSSU activities and how to reimburse eligible expenses

These roles enable a richer, more diverse learning environment by integrating community experiences and perspectives into the education of future healthcare professionals. Additionally, they foster a deeper understanding of patient-centered care, cultural competence, and the importance of collaboration between healthcare providers and the communities they serve.

5. GUIDING PRINCIPLES OF EQUITABLE ENGAGEMENT WITH COMMUNITY

Building trustful, collaborative relationships with community experts is essential to developing strong roots in a community. The starting point for honoring the relationship with community is to adopt core principles for developing compensation plans and support strategies for community collaboration.

Principles to guide the work necessary for engaging with community members:

1. **Do Your Research and Avoid Assumptions:**
    - Take the time to thoroughly understand the community and its existing relationships with Dalhousie. Work within those established connections and seek guidance from current community partners on the best approach to expand engagement. Be open to their input on how, when, and if further involvement is appropriate. Recognize that your project may not be a current priority for the community and respect their needs and timing.
    - For guidance and support, contact the Office of Community Engagement at **gho@dal.ca**

2. **Be Transparent and Honest:**
    - Transparency is crucial when planning compensation and support strategies with community members. Clearly communicate the goals, objectives, budget, and the compensation timeline and process. This openness fosters trust and mutual accountability with partners.

3. **Respect Community Self-Determination and Seek Collaboration:**
    - Prioritize the perspectives and needs of the community. Actively listening to community feedback from the start is essential in participatory methods. Regularly solicit input on compensation arrangements to ensure they align with community expectations.

4. **Reflect Respect in Compensation:**
    - Compensation should reflect your respect for Community members' expertise. While rates may vary depending on the context and project, they should appropriately recognize the significance of community contributions.

5. **Equity and Inclusion:**
    - Ensure that payment structures promote diversity and are accessible to all community members, particularly underrepresented groups.

6. **Embrace Flexibility:**
    - Be prepared to adjust compensation in response to unforeseen challenges. Community engagement often comes with unexpected developments. Allocating budget flexibility for these situations allows for prompt and thoughtful responses to community needs.

6. SUPPORTIVE STRATEGIES WHEN ENGAGING WITH COMMUNITY

To effectively navigate the complexities of community collaboration with the Faculty of Medicine it is essential to understand both the background of these partnerships and the factors that can influence their success.

While the Faculty can provide valuable resources and expertise, the effectiveness of these collaborations often hinges on recognizing the supportive elements that foster collaboration for building a meaningful and sustainable relationship.

a) **Sustained Involvement, Commitment, and Communication**:
    - Establish open and transparent communication channels to maintain engagement throughout the collaboration. Schedule regular, uninterrupted time for Faculty members and community representatives to build, maintain, and strengthen their relationships.

b) **Collaborative Decision-Making**:
- Encourage shared decision-making by involving community members in key discussions, planning, and implementation of activities while recognizing their expertise and unique perspectives.

c) **Appropriate Budgeting and Resource Allocation**:
- Allocate adequate financial resources to support the collaboration, including costs for materials, activities, and community member participation. Ensure budgeting reflects the community's needs, considering transportation, childcare, honoraria, and any other logistical expenses.

d) **Mutual Respect and Recognition of Diverse Skills, Experiences, and Knowledge**:
- Acknowledge and celebrate the unique contributions of community members, respecting their lived experiences, cultural knowledge, and expertise.

e) **Equity and Fairness in Representing Interests**:
- Actively address power imbalances and ensure that the interests of all parties are given equal weight. Provide training or resources to ensure that Faculty members are culturally competent and sensitive to the diverse needs of the community.

f) **Evaluation and Feedback Mechanisms**:
- Establish clear and ongoing feedback mechanisms to assess the success of the collaboration and identify areas for improvement. Use feedback from community members and Faculty to refine future initiatives and ensure continuous improvement.

EXAMPLES OF SUPPORT STRUCTURES

a) **Comprehensive orientation and ongoing support for community members/organizations**:
- Provide clear orientation at the beginning of the collaboration, outlining roles, expectations, and responsibilities. Offer continuous, responsive support throughout the partnership, ensuring that community members feel valued and well-equipped for their roles.

b) **Addressing Practical and Logistical Needs Early**:
- Identify and resolve logistical challenges (e.g., transportation and/or parking, childcare, honoraria) early in the planning process to prevent obstacles from arising during the collaboration. Provide financial support or reimbursements for costs incurred by community members to participate.

c) **Accessible and Timely Materials and Information Sharing**:
- Distribute updated information regularly, keeping community members well-informed throughout the process.

d) **Recognition and Acknowledgment of Contributions**:
- Publicly recognize the contributions and achievements of community members, whether through certificates, events, or formal recognition at university functions. Provide opportunities for community members to showcase their involvement and share their impact with broader university audiences.

7. COMPENSATION GUIDELINES FOR COMMUNITY PARTNERS

Compensation for community members is a fundamental part of our work. Recognizing the valuable contributions of community members is critical to fostering equitable, meaningful partnerships. These guidelines ensure that all departments, educational units (such as PGME, UGME, CPDME), research teams, financial services, and the Office of Community Engagement collaborate effectively to guarantee fair, consistent, and timely remuneration for their participation.

Consider Relevant Experience including lived experience, knowledge of the community, leadership roles, and previous collaboration on similar initiatives.

- Acknowledge and compensate for community members' lived experiences, particularly when their knowledge offers invaluable insights into healthcare disparities, patient experiences, or specific community needs.
- Compensation should reflect the depth of the individual's understanding of their community and its health challenges.
- Recognize and appropriately compensate for leadership roles or positions held within community organizations, as these often involve significant responsibility and expertise.
- Value past involvement in similar initiatives. This experience enhances the individual's ability to contribute meaningfully, and this should be reflected in their compensation.

Account for Temporary Nature of Work: For short-term projects, consider offering a premium on compensation to reflect the temporary nature of the work and the potential personal sacrifices involved (e.g., disruption of personal schedules, loss of income from other employment). Address potential barriers to participation, such as childcare costs, transportation expenses, and time lost from other paid work, by including these considerations in the compensation package.

Recognition of Value: Compensation structures should explicitly recognize the value of a community member's expertise, time, and labor. This includes both financial remuneration and other forms of recognition, such as public acknowledgment or professional development opportunities.

Non-Monetary Compensation: In some cases, non-monetary recognition such as certificates, event invitations (i.e. Dal Med Gala), access to university libraries, or opportunities to share their expertise with a broader audience should be considered as a form of recognition.

Budget for Operational Costs: When community members contribute their expertise, explore any additional operational costs (i.e. accessibility needs) for them to effectively engage with the Faculty of Medicine. This helps to ensure a fair and sustainable relationship.

EXAMPLES OF COMPENSATION STRUCTURES

While any pay-structure decision will carry specific considerations and processes, these examples may be helpful frameworks to determine how to actualize equitable compensation. Special attention should be given to tax considerations and the resources needed to access funds (e.g., a bank account). Community volunteers (non-Dalhousie) should be offered a choice of gift, honorarium, or donation to their agency or organization of choice, recognizing that honoraria are taxable and require providing a SIN

Honorarium: (information from Dalhousie's Financial Services)

- Honorarium is a nominal payment made in recognition of a contribution towards a specific activity of the University. It is not intended to pay for the service itself, but to provide a token gift to the individual. Therefore, the amount should not be representative of the fair value of the contribution made to the university, but instead only a small portion of what the service would cost.
- **Note:** Honorarium payments greater than $500 are reviewed and confirmed by Financial Services.
- Process: Complete a cheque requisition form [PDF] for non-employees include home address and SIN number; a T4A form will be issued for the honorarium.

Donation:

- If an individual wants to donate their honorarium payment, indicate on the cheque requisition form [PDF] which charity to send it to.

Gifts:

- The faculty may provide the community member with a gift which should be symbolic and aligned with the university's values. Examples of appropriate gifts include, but are not limited to, certificates of appreciation, university-branded items (such as clothing, stationery, or mugs), and small tokens of gratitude.
- The total value of the gift provided to any individual volunteer or community member should not exceed $200 per academic year. This ensures that gifts are modest and equitable.
- A record of all gifts given, including the recipient's name, the event or activity for which the gift was provided, and the value of the gift, should be kept for accountability purposes.

Gift Cards:

- Gift cards may be offered as an alternative form of recognition, where appropriate. These may include:
    - Prepaid cards or vouchers for retail stores, online platforms, or local businesses.
    - Cards for services that support well-being, such as coffee shops, bookstores, or restaurants.
- Important Considerations for Gift Cards: Monetary Limit: The total value of any gift card provided to an individual volunteer should not exceed [$200] per academic year.
- Purpose and Selection: Gift cards should reflect the values and mission of the Faculty of Medicine. Cards from local businesses or those promoting student well-being are encouraged, but they should avoid suggesting favoritism or any form of transactional exchange.
- Non-Transferability: Gift cards should not be transferable to third parties or used as compensation. They are meant as a token of appreciation and should not be provided in lieu of paid work or as a substitute for university wages.

Indigenous Elders and Community Members

- The Indigenous Physicians Association of Canada offers helpful steps for engaging Indigenous community members and honoraria for Indigenous faculty and medical students.
- Dalhousie University guidelines for engaging with Indigenous elders and knowledge keepers is currently under review and will be updated in 2026.

8. NEXT STEPS

- The Guidelines will be reviewed annually by the Social Accountability Committee and the Associate Dean, Serving and Engaging Society.
- As part of the annual review, community partners will offer feedback on the guidelines.
- The next review will take place in October 2025.

Approved by Faculty Council: November 4, 2025

APPENDIX A: Checklist for Engaging with Community

RESOURCES

- ❑ Reviewed IAP2 Spectrum of Public Participation
- ❑ Contacted Office of Community Engagement for support (gho@dal.ca)

SUPPORT STRUCTURES

Orientation and Ongoing Support
- ❑ Offer clear onboarding about roles and responsibilities
- ❑ Provide continuous support throughout the collaboration

Addressing Logistical Needs
- ❑ Resolve barriers (e.g., parking, childcare, transportation) early
- ❑ Provide reimbursements or financial support when needed

Accessible Communication
- ❑ Share updated materials regularly and in a timely manner

Recognition and Acknowledgment
- ❑ Publicly recognize contributions (e.g., certificates, events)
- ❑ Provide platforms for community members to share their impact

COMPENSATION STRUCTURES

Honoraria
- ❑ Use for nominal recognition (not full-value payment)
- ❑ Ensure honoraria >$500 are reviewed by Financial Services
- ❑ Submit cheque requisition form with recipient's SIN and address
- ❑ Issue T4A for honorarium recipients

Donations
- ❑ Allow recipients to redirect payment to a charity
- ❑ Indicate preference on the cheque requisition form

Gifts
- ❑ Keep gifts symbolic and under $200 per academic year
- ❑ Maintain a record of all gifts and recipients

Gift Cards
- ❑ Keep value under $200 per academic year
- ❑ Choose cards that reflect university values (e.g., local, wellness-focused)
- ❑ Ensure cards are not transferable or used as substitute wages

INDIGENOUS ELDERS

- ❑ Refer to Indigenous Physicians Association of Canada standards
- ❑ Follow Dalhousie guidelines (update expected in 2026)

APPENDIX B

Guidelines for Community Compensation, Support and Recognition with Dalhousie Medicine

Faculty of Medicine, Dalhousie University

September 1, 2025

Compensation guidelines are recommendations, not mandatory policies, and are subject to change based on budget availability and operational requirements

These guidelines suggested minimum standards for compensation and support, and higher levels of recognition may be appropriate based on nature and scope of engagement.

Role	Compensation Framework	Other Considerations
Simulated Patients	Minimum rate is $20.80/hour	C3LR is the lead for this program.
Volunteer Patients	$20 honorarium	Volunteer Patient Program is the lead for implementation.
Guest Lecturers	$100–$200 honorarium Gifts up to a value of $200 per academic year Gift cards up to a value of $200 per academic year	Gifts should be symbolic and aligned with the university's values. Examples of appropriate gifts include, but are not limited to, certificates of appreciation, university-branded items (such as clothing, stationery, or mugs), and small tokens of gratitude. Gift cards should reflect the values and mission of the Faculty of Medicine. Cards from local businesses or those promoting student well-being are encouraged, but they should avoid suggesting favoritism or any form of transactional exchange.
Community Partners	$100–$200 honorarium Gifts up to a value of $200 per academic year Gift cards up to a value of $200 per academic year	Gifts should be symbolic and aligned with the university's values. Examples of appropriate gifts include, but are not limited to, certificates of appreciation, university-branded items (such as clothing, stationery, or mugs), and small tokens of gratitude. Gift cards should reflect the values and mission of the Faculty of Medicine. Cards from local businesses or those promoting student well-being are encouraged, but they should avoid suggesting favoritism or any form of transactional exchange.
Special Events		
One-time engagement (1-2 hours)	$25 Honorarium (as per MSSU guidelines)	Paid within 30 days after the engagement

One-time engagement (3-4 hours)	$75 Honorarium (as per MSSU guidelines)	Paid within 30 days after the engagement
Full engagement (approximately 8 hours)	$150 Honorarium (as per MSSU guidelines)	Paid within 30 days after the engagement
Governance Committee & Working Group		
Meets 8-12 times per year	$400 Honorariums per annum (as per MSSU guidelines)	Paid quarterly
Meets 5-7 times per year	$300 Honorariums per annum (as per MSSU guidelines)	Paid quarterly
Meets 2-4 times per year	$150 Honorariums per annum (as per MSSU guidelines)	Paid quarterly
Other compensation considerations		
Community member engagement outside the above categories	Based on discussion with the program leadership	

Appendix C:

Template Letter on Acceptance/Decline of Compensation for Community Partners

Dear [Recipient's Name],

Thank you for your valued contribution to the Faculty of Medicine community.

In recognition of your participation with the _____, we are pleased to offer you an honorarium of $XX as a token of appreciation. This honorarium will be issued on a **[insert frequency]** basis.

Please note that honorarium provided in recognition of your contribution is considered taxable income under the Income Tax Act. To process payment, we are required to collect your Social Insurance Number and issue a T4A slip, as per Canada Revenue Agency (CRA) regulations. If you have any questions regarding tax implications, we recommend consulting your financial advisor, accountant, or the CRA directly. We recognize that this administrative process may present barriers for some Community Partners, and we sincerely apologize for any inconvenience this may cause.

[Include only if applicable]
If you are seeking reimbursement for expenses, please submit a completed expense claim form (including receipts if required) within 15 days of the event to [insert contact or department]. Some travel and accommodation expenses may be arranged in advance—please consult your Faculty of Medicine contact for details.

Please indicate your acceptance or declination of this offer by signing and returning a copy of this letter.

□ **I accept** the offer of compensation
Signature: _____
Date: _____

□ **I decline** the offer of compensation
Signature: _____
Date: _____

If you have any questions or would like to discuss this further, please contact [Name] at [Phone Number] or via email at [Email Address].

Sincerely,
[Your Name]
[Your Title]

REFERENCES & RESOURCES

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- Compensation and Reimbursement of Research Participants University of Toronto Division of the Vice President, Research and Compensation
- Guidance on Compensation of Community Partners in Research at Virginia Commonwealth University Cynthia George, Valerie Holton, and Amber Haley
- John Sankofa, Hannah Daly, and Elsa Falkenburger, Community Voice and Power Sharing Guidebook, 2021, Washington, DC: Urban Institute, www.urban.org/research/publication/community-voice-and-power-sharing-guidebook
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