BRINGING ADDICTION MEDICINE TO THE COMMUNITY: A TELEHEALTH COLLABORATION BETWEEN A TERTIARY CARE HOSPITAL AND AN OUTREACH PSYCHOSOCIAL TEAM

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Background
Access to specialized addiction medicine services remains challenging for vulnerable populations facing homelessness, socioeconomic precarity, and geographic barriers. Previously, patients in Montreal's west-central sector were required to travel to Centre hospitalier de l'Université de Montréal (CHUM) for addiction medicine services, creating challenges to timely care and disrupting established therapeutic relationships within their community care settings.

Description of model of care/intervention/program
In November 2025, CHUM partnered with the Connexion outreach team of the Montreal West-Central Health and Social Services Centre to implement a telehealth-based Rapid Access Addiction Medicine (RAAM) collaboration. The Connexion team provides frontline psychosocial support and plays a central role in identifying and engaging individuals desiring treatment for substance use disorders and hepatitis C. Through this model, patients attend virtual RAAM consultations within their community care environment, supported by a trusted outreach worker while connecting in real time with an addiction physician and nurse at CHUM. This approach enables specialized addiction care to be delivered within an established therapeutic context while minimizing logistical barriers to treatment and supporting continuity of care.

Effectiveness
Across services, 989 clients were engaged (747 through outreach, 242 through RAAM). The population reflected significant structural vulnerability: 79.8% reported homelessness, 74.1% were men, and 74% were aged 30-50 years. Substance use patterns showed clinical complexity, with crack cocaine (34.4%), polysubstance use (20.0%), and opioids (15.0%) most commonly reported. Harm reduction was central to care delivery, with 54.8% of encounters involving distribution of safer consumption supplies, alongside brief interventions, detoxification services, and opioid agonist treatment initiation.

Conclusion and next steps
By connecting hospital-based addiction medicine with trusted community outreach through telehealth, this model reduces structural barriers to specialized treatment while improving engagement and continuity of care. This hospital–community partnership offers a scalable and adaptable approach for delivering specialized addiction care within community outreach settings.

Disclosure of Interest Statement
The conference collaborators recognise the considerable contribution that industry partners make to professional and research activities. We also recognise the need for transparency of disclosure of potential conflicts of interest by acknowledging these relationships in publications and presentations.