

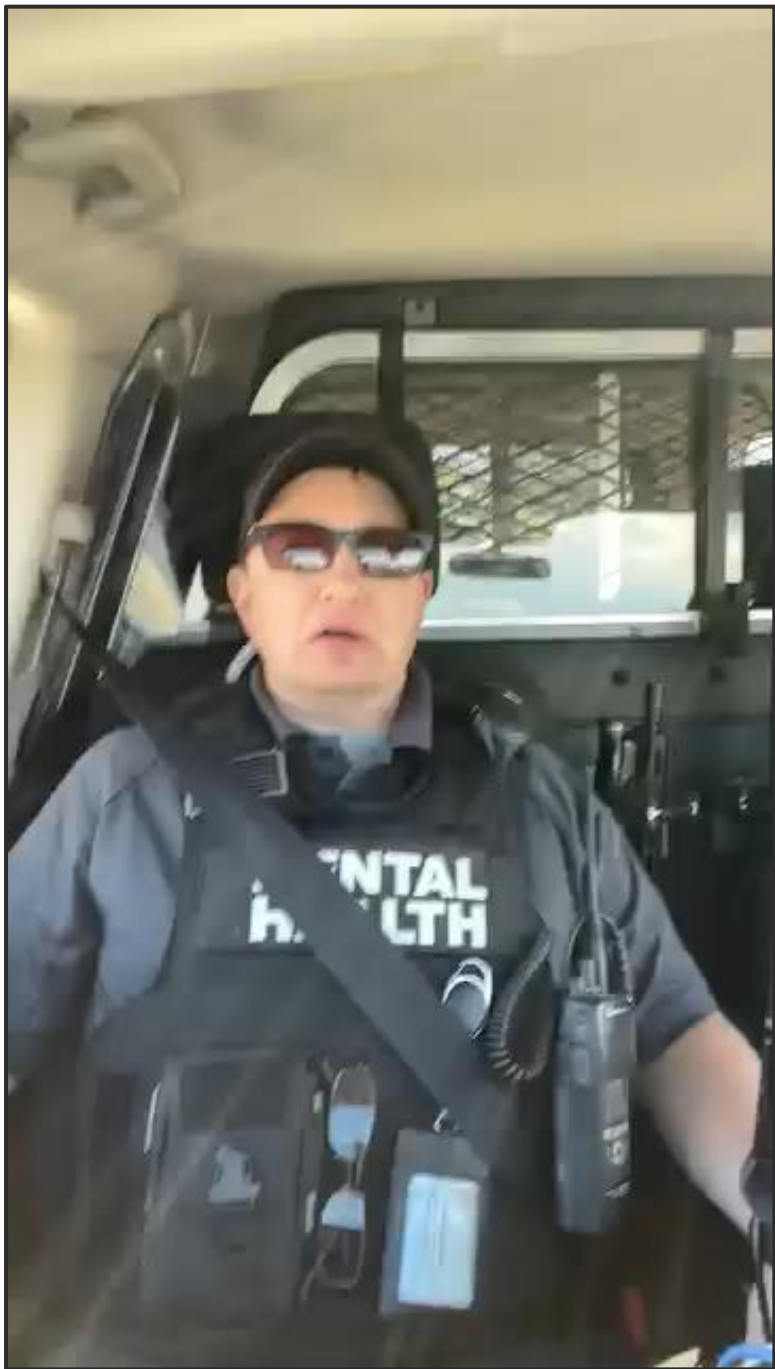


# FROM THERAPY ROOM TO FRONTLINE

Exploring Co-Response Careers

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# WHAT IS CO-RESPONSE?

# TYPES OF MENTAL HEALTH RESPONSE IN LAW ENFORCEMENT

Crisis  
Intervention  
Team/Training

Co-Response  
Model

Tri-Response  
Model

Non-Police  
Model



# OFFICER PERSPECTIVES

Clinicians are the experts – they often see things officers miss.

Rely on clinicians to assess for suicidality – relieved that they don't have to be the one to make that call.

Appreciate alternatives to arrest.

Increases the speed of call resolution – less wait time.

Officers don't have to bear the liability of 64-04s.

Some people respond better to clinicians than to officers.

# OFFICER PERSPECTIVES

Clinicians can improve public perception of officers.

Officers trust clinician training and judgment.

Increased resources for individuals in crisis.

Clinicians can help de-escalate many situations: domestic violence, grief, mental health crises, etc.

Officers believe the program increases safety, reduces injuries, and leads to better outcomes.



THORNTON  
POLICE  
DEPARTMENT

# WHAT OFFICERS WANT YOU TO KNOW

“If you were to talk to clinicians about the program, what would you want them to know? What would you tell them?”

# ROLE CLARITY & SAFETY

## Understanding your function within law-enforcement response:

- Officers lead on scene safety; engage clinically only after the environment is secured.
- Avoid rushing into active situations; Your role begins once safety is established.
- Maintain clear boundaries while collaborating as part of the co-response team.
- Officers consistently place counselor safety first.

### Key Quotes

“Let officers verify everything is safe”

“We always put their safety above everybody else’s.”

# TEAMWORK & COMMUNICATION

## Building effective collaborative relationships

- Recognize that officers must make decisions guided by law and policy.
- Offer clinical insight when appropriate; your perspective adds value.
- Address any interpersonal mismatch early to support effective teamwork.
- Expect variation in officer style; you will ride with many different partners.

### Key Quotes:

“Sometimes officers will make decisions you disagree with...don't be mad at the officer.”

“It's okay to say, ‘Maybe we should try this.’”

“Some people just don't jive – speak up early.”

# EMOTIONAL PREPAREDNESS

## Managing the clinical impact of field-based crisis work

### Key Quotes:

“We go back to back to back... you see everything.”

“You have that liability – o-4 or not.”

“Sometimes you just need to get it out...and counselors help with that.”

- You will encounter a wide range of crises, often in rapid succession.
- Strong emotional boundaries and compartmentalization skills are essential.
- Some decisions carry significant responsibility (e.g., involuntary evaluation criteria).
- Officers may rely on counselors for informal support and perspective.

# NATURE OF THE WORK

## Field-based clinical engagement

- This is not office-based practice – you meet clients where they are.
- Expect unpredictable environments, from homes to encampments to roadways.
- Clients are often in acute distress and unfamiliar with mental health services.
- The work is challenging but offers immediate and meaningful intervention opportunities.

### Key Quotes:

“We go into the worst spots...some of the grossest houses you can imagine.”

“you’re meeting people where they’re at...not in an office.”

“You see immediate relief when you help someone.”

# WHY OFFICERS BELIEVE THE ROLE IS VALUABLE

## Unique clinical and professional opportunities

- Fast-paced and engaging work that breaks away from traditional clinical settings.
- Experience critical incident response with significantly reduced personal risk.
- Gain insight into LE operations: communication, procedures, community engagement.
- Rare opportunity to integrate clinical practice with real-time crisis response.

### Key Quotes:

“You get to see the best and worst of the community.”

“You get the fun of all that with a fraction of the danger.”

“Where else do you get to ride with an officer and answer calls?”

# BENEFITS FOR COUNSELORS

## Professional growth, learning, and real-world impact

- Highly diverse caseload with exceptional opportunities for skill development.
- Deep understanding of community needs beyond what office-based work provides.
- Strong interprofessional relationships with officers and other first responders.
- Immediate feedback loop – you see the impact of your intervention in real time.

### Key Quotes:

“You get to see things you don’t normally get to see.”

“You help somebody immediately...and feel the relief almost instantly.”

“You get to see a public that’s not publicized.”

# MENTAL HEALTH COOPERATIVE

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[MHC Co-Response  
Information](#)

[Co-Response REACH](#)



# Mental Health Cooperative

# TRAINING RESOURCES

## **Cordico-Lexipol**

- Emergency Responder and Public Safety Certification (ERPSCC)
- Emergency Responder and Public Safety Clinician Advanced
- [https://olt.training.cordico.com/learning-plans/lpl\\_j6575uorobpwkU2P/](https://olt.training.cordico.com/learning-plans/lpl_j6575uorobpwkU2P/)

## **Red Cross**

- Disaster relief

## **International Critical Incident Stress Foundation (ICISF)**

- Assisting individuals in crisis
- Group crisis intervention

## **National Organization for Victim Advocacy (NOVA)**

- Community crisis response team training

# REFERENCES

Miller, R. (2026). Lived experiences of law enforcement officers assigned to Co-Response teams responding to mental health crises. *ScholarWorks (Walden University)*. <https://scholarworks.waldenu.edu/dissertations/19024>