Police Co-Responder Programs: Do They Make A Difference?

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Background

- Co-Responder programs have largely been created in response to the un-equitable systemic discrimination of people of color experiencing behavioral health crises.
- The Crisis Outreach Response and Engagement Team (CORE) includes Longmont police officers, mental health professionals, and paramedics who respond to behavioral health calls for service (BH-CFS).
- 32% of Longmont’s community lives 200% below the poverty level. Social determinants of health, including access to care is one of the factors impacting socioeconomic and racial/ethnic disparities in health.

Methodology

- This is a mixed methods study. Utilizing the Practical, Robust Implementation and Sustainability Model (PRISM) (Figure 1) framework, we will ensure the program is viewed as acceptable and having clinical utility. All data will be analyzed through RedCap.

Conclusions and Implications

- This literature is highly important given that it is one of the few studies that will inform a framework by which other public safety forces can utilize to implement equitable mental health services through policy and programming in Colorado and nationwide.
- Through this study we hope to identify differences between demographics in our sample pool and the impact of this work on community connections with behavioral health and justice systems.

Limitations and Future Research

- Limitations of this study include lack of access to technology and non-randomized study participants.
- Future studies can incorporate expanded access to folks who don’t have phones. Moreover, moving forward comparison groups should be implemented using folks who received services from the Longmont Police Department in general.

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