REQUEST FOR PROPOSALS:

Randomized Controlled Trials to Test Interventions for Frequent Utilizers of Multiple Health, Criminal Justice, and Social Service Systems

August 2017
Overview

Of the 11 million people who cycle through local jails every year—the majority of whom are charged with low-level, nonviolent offenses—68 percent have a substance use disorder, 64 percent have a mental illness, and 44 percent suffer from chronic health problems.

Despite this large population, jails and prisons are often under-resourced and ill-prepared to respond to behavioral health and substance use needs. As a result, some individuals, known as frequent utilizers, end up cycling through multiple systems, such as local jails, hospitals, and housing assistance services, without ever receiving the treatment they require. In fact, these individuals’ repeated stints in jail often worsen their health and life outcomes. And the time spent in jail comes at a steep cost to taxpayers: Every year, taxpayers spend $22 billion on local jails alone, not to mention the additional money spent to support public health programs and community services.

Although communities across the country have come to recognize both the financial and societal costs associated with this problem, many have struggled to find ways to improve their criminal justice and health care systems. This is largely because law enforcement, health care professionals, and service providers have no systematic way of identifying frequent utilizers. Jails and hospitals keep separate records, making it difficult for them to work together to address problems as they arise. In addition, local jurisdictions have struggled to identify and implement evidence-based interventions.

The Laura and John Arnold Foundation (LJAF) is committed to addressing these problems. LJAF’s Data-Driven Justice (DDJ) project helps city, county, and state governments use data to identify frequent utilizers, with the goal of connecting them to appropriate evidence-based interventions. In order to better understand which frequent utilizers would benefit from interventions, communities are working to link privacy-protected criminal justice, health care, and social services datasets. DDJ works with these communities to determine best practices around the safe and responsible use of data and to pinpoint promising interventions.

However, there is a noticeable lack of rigorously evaluated, evidence-based interventions to effectively stabilize the frequent-utilizer population and improve long-term outcomes. In an effort to build the evidence base, DDJ is releasing a request for proposals to fund rigorous randomized controlled trials (RCTs) to test frequent-utilizer interventions.
Objectives

This Request for Proposals (RFP) aims to fulfill three primary objectives:

1. Rigorously evaluate through RCTs the impact of established, manualized frequent-utilizer interventions\(^1\) that have been implemented in real-world settings with fidelity to documented models;

2. Provide an evaluation mechanism for communities that are rapidly expanding their efforts to divert frequent utilizers; and

3. Build the evidence base, support rigorous research in this growing field, and better inform the work of jurisdictions committed to data-driven government by widely disseminating lessons and final results from this project.

We are particularly interested in proposals to test commonly deployed frequent-utilizer interventions, including crisis intervention teams, therapeutic communities, forensic assertive community treatment (or other adapted versions of assertive community treatment), critical time intervention, cognitive-behavioral therapy, short-term mental health crisis stabilization programs, law enforcement and general health or behavioral health co-responder programs, or programs incorporating a Housing First approach.\(^2\) Proposals should target interventions that address some or all of the following outcomes of interest: reduction in arrest and recidivism rates; reduction in the use of medical services such as emergency room visits and hospitalizations; improved health outcomes; housing stability; and economic well-being.

We also strongly encourage proposals to evaluate other promising frequent-utilizer interventions that have been implemented in real-world settings with fidelity. We seek a balanced set of research projects that build on the evidence base and generate results applicable to jurisdictions that range in size and capacity.

Process

This RFP will proceed in two stages: Letters of Interest (LOI) will be accepted on a rolling basis through Oct. 1, 2017. If the LOI meets specified criteria, the applicant will be invited to submit a full proposal that will be evaluated by a peer review board. LOI and full proposals should adhere to the format specifications and fully address the requirements and selection criteria outlined in Appendix A.

\(^1\) Ideally, the intervention has undergone a rigorous evaluation and demonstrates measurable effects that are sizable, but not yet conclusive.

\(^2\) We recognize that these interventions or strategies may have other commonly used names, depending on the program coordinator and jurisdiction (e.g., co-responder models may be referred to as crisis intervention teams). Applicants may propose to evaluate any programs analogous to the models and strategies listed. Please reach out to the RFP coordinators if you have questions or need clarification.
Overview:

A. **Letters of Interest (LOI)** will be accepted on a rolling basis through Oct. 1, 2017. If the review team determines that your LOI meets the criteria outlined below, we will invite you to submit a full proposal.

B. **Submissions:** Applicants should submit LOIs and invited full proposals to **DDJRFP@arnoldfoundation.org**.

C. **Questions:** Please contact Angela LaScala-Gruenewald, Criminal Justice Manager, at **DDJ@arnoldfoundation.org** or (212) 430-3621.

Format:

A. Before submitting an LOI, applicants must complete [this online form](#). The form will generate a cover page for your application materials.

B. **LOIs and invited full proposals should address each of the requirements and selection criteria below.** Applicants may use their own format, with single or double spacing, and an 11-point font or larger for the LOIs (maximum three pages). Applicants invited to submit a full proposal (maximum six pages) will be provided with a template. The page limit for the LOIs and proposals does not include attached documents specifically requested in this RFP such as budgets, budget narratives, letters of support, or documents outlining data agreements and research credentials. Please submit these documents separately (i.e., do not submit documents in one file).

Requirements and Selection Criteria:

A. **Requirements:** Applicants must ensure the following requirements are met before submitting an LOI. Fulfillment of requirements should be demonstrated through the project narrative and supporting documents.

1. **EXISTING ACCESS TO DATA & TECHNICAL CAPACITY:** The applicant’s study team, including existing or potential partners, has ownership or access to the data sources, technology, and processes for analyzing datasets across multiple systems.
The applicant can demonstrate this requirement through records of existing data-sharing agreements with relevant data owners; letters of support from relevant agencies clearly indicating an intent to share individual-level data from a chief executive or senior official; or by providing evidence and results of successful projects, which relied on linking multiple datasets and completing research.

2. **DEFINED POPULATION:** The applicant proposes to evaluate a predetermined frequent-utilizer population. If funded, the applicant will be required to document the cross-system datasets from criminal justice, health, behavioral health, and/or social services they plan to use to describe and define the intervention population. Criminal justice datasets can include 911 calls for service, arrests, or jail bookings. Health datasets can include ambulance/EMT calls for service and transports, hospital emergency room admissions, behavioral health services, homeless services, or records of substance use. We will prioritize proposals that use multiple datasets from the relevant systems. Grantees will need to demonstrate a holistic understanding of the jurisdiction’s frequent-utilizer population and the subset affected by the intervention. Additionally, if funded, grantees will be asked to document the jurisdiction’s baseline demographic characteristics and system utilization data. This may include police encounters, arrests, and offense categories; emergency health system utilization such as ambulance dispatch and transport; emergency department admissions and diagnoses; and data on the frequency and types of other service use, such as housing or homelessness services, behavioral health services, and substance use treatment.

B. **Selection Criteria:**

For the LOI: Although we ask applicants to address the four selection criteria detailed below, we do not expect applicants to have finalized every aspect of the study. Therefore, reviewers will focus on the first two selection criteria—“Importance” and “Experienced Researcher”—in determining which applicants to invite to submit a full proposal.

For full proposals: Reviewers will consider whether the four criteria are satisfied.

1. **IMPORTANCE.** The applicant should propose to evaluate an intervention:

   a) That is backed by highly promising evidence, suggesting it could produce sizable impacts on outcomes of recognized policy
importance such as crime rates, incarceration rates, recidivism, health outcomes, social service, and/or criminal justice system costs. For example, we specifically encourage proposals seeking to replicate findings from prior rigorous evaluations that are especially promising but not yet conclusive (due to only short-term follow up, a single-site study design, and/or matched comparison groups, but not randomization). As a threshold condition for “promising” evidence, proposals should show that the intervention can be, or preferably has been, successfully delivered under real-world implementation conditions.

—or—

b) For which there are other compelling reasons to evaluate its effectiveness (e.g., it is, or soon will be, widely implemented with significant taxpayer investment, and its impact on targeted outcomes is currently unknown; or it is a promising low-cost strategy that could be readily implemented on a large scale if found effective).

Please note that to meet this criterion, it is not sufficient to establish that the study addresses an important problem; applicants must also present compelling reasons to evaluate the specific intervention.

2. EXPERIENCED RESEARCHER. The applicant’s team should include at least one researcher in a key substantive role who has previously carried out a well-conducted RCT. A well-conducted RCT is one with low sample attrition, sufficient sample size, close adherence to random assignment, and valid outcome measures and statistical analyses. To address this criterion, applicants should provide a biographical sketch (CVs are useful additions, but not required) and reports from prior RCTs that the researcher has conducted. (Please send them as email attachments; no more than two reports in all.) Reviewers will rely primarily on the biographical sketches and reports in assessing this selection criterion.

3. STUDY DESIGN. The applicant’s proposed RCT design should be well-structured and contain all necessary elements to ensure validity. In other words, it should have a sufficiently large sample size (as shown through a power analysis that accounts for potential attrition and loss to follow up) and other elements needed to generate credible evidence about the intervention’s impact on one or more targeted outcomes. We strongly encourage designs that measure such outcomes in both the short- and
long-term, as appropriate, to determine whether the effects endure long enough to constitute meaningful improvement in individual and/or community well-being.

Applicants, as part of their discussion of this criterion, should specify the study’s proposed recruitment process, randomization approach, expected sample size, primary outcome(s) of interest and associated measurement (e.g., over what length of time), and planned analyses (e.g., any subgroups to be examined or regression methods to be used).

Reviewers, in assessing an applicant’s proposed design, will use Key Items to Get Right When Conducting an RCT in Social Policy as a reference.

4. PARTNERS & DATA ACCESS. As outlined in the requirements above, the applicant will need to demonstrate access to the necessary data, technical capacity, and partnerships to execute the RCT. Examples of necessary parties include: researcher(s), an agency or community organization to deliver the intervention, and a centralized entity housing the administrative data used to measure outcomes (e.g., arrest records and emergency room visits). To verify the existence of such partnerships, reviewers will look for a description in the proposal in addition to attached letters of support showing, for example, that (i) an agency that delivers the intervention has agreed to participate in the study and has agreed to random assignment; and (ii) a data agency has agreed to provide the researcher(s) with access to the appropriate data.

C. Other items to include:

1. Applicants should specify the amount of funding requested. For the full proposal only, attach a project budget and budget narrative (a template will be provided). Applicants should specify whether there is a funding source identified to cover all, or a significant portion of the cost of the intervention that is proposed to be studied. To reduce study costs, we encourage the use of administrative data to measure study outcomes wherever feasible, in lieu of more expensive original data collection. In addition, we will consider funding implementation research to complement an RCT of a well-established model; however, we suggest streamlined approaches that do not greatly increase the overall study cost. If additional funding from other sources is needed to carry out the study, we request that the applicant’s budget show (i) the total study cost, and (ii) the portion of that cost to be covered by LJAF. Applicants should
include an attached letter or other communication showing that the additional funding will be in place prior to LJAF’s grant award.

LJAF allows for project-related overhead expenses such as salaries, benefits, equipment, supplies, and travel to be included in direct costs; however, LJAF will only provide funding for indirect costs, up to a 10% limit, if extenuating circumstances exist and have been pre-approved.

2. Applicants should specify the proposed recipient of the grant award, which must be a tax-exempt organization (e.g., a nonprofit organization, university, or governmental unit).

3. Applicants should address how their study meets recognized ethical standards for research with human subjects.

**Expectations for the Grant.** Awardees will be asked, as a condition of award, to:

A. Pre-register the study on the Open Science Framework (OSF) [website](#) and upload a copy of the research and analysis plan detailed in their proposal.

B. Provide brief phone or email updates on the study’s progress on a quarterly basis, and before any key decisions that could materially affect the study’s design or implementation.

C. Submit concise reports on the impact findings at appropriate intervals. These reports should make it easy for readers to see the main results and gauge their credibility (e.g., by showing the similarity of the treatment and control groups in pre-program characteristics, the amount of sample attrition, and the statistical significance of the impact findings).

D. Make their datasets and related materials (e.g., survey instruments and code used to clean and analyze datasets) publicly available on the OSF. Applicants will be asked to do this within one year of the last data collection, and only to the extent allowed under any confidentiality/privacy protections.³

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³ This list previews the main research-related requirements that will be included in the grant agreement; however, it is not an exhaustive list of all the conditions of the award.