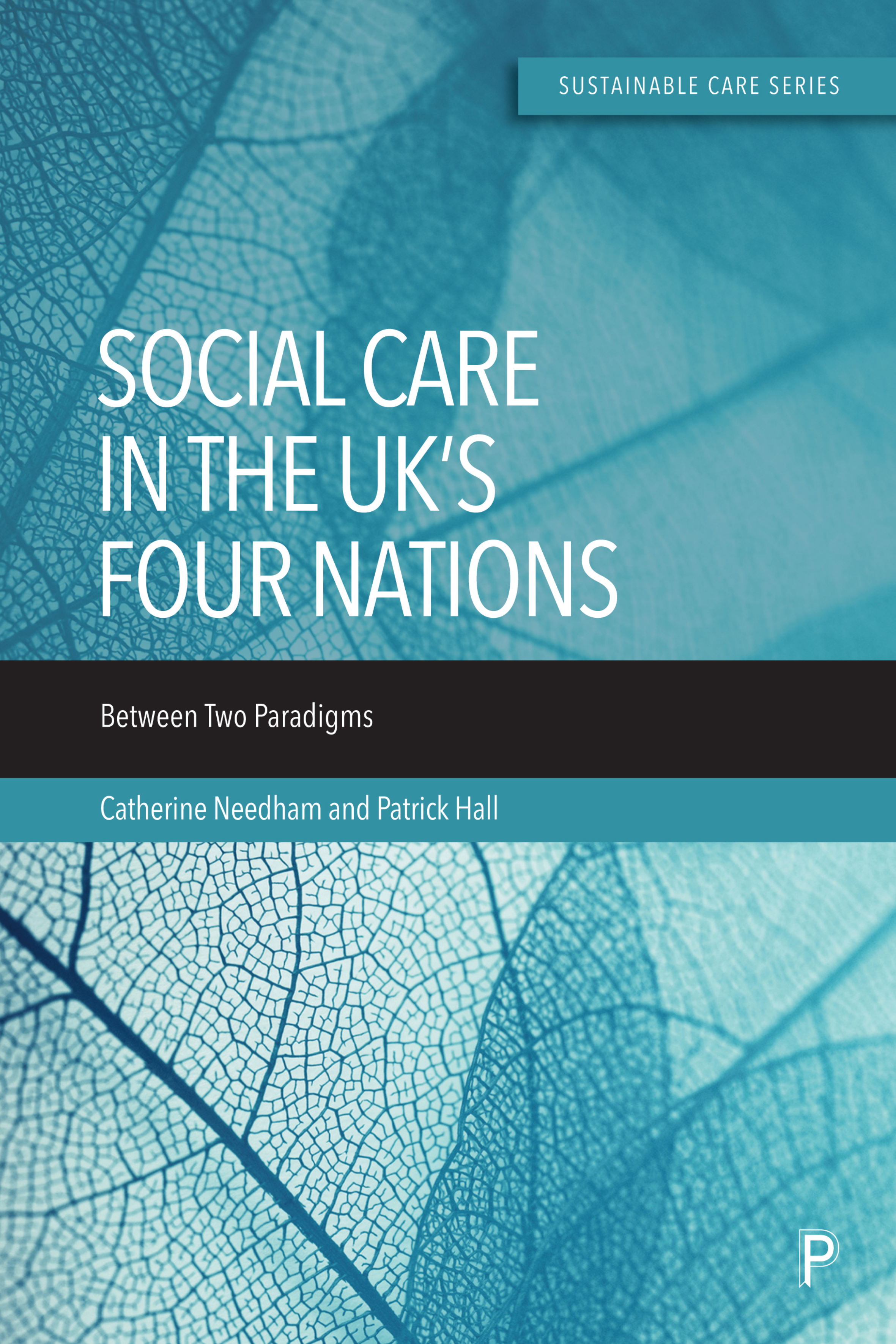

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SOCIAL CARE IN THE UK'S FOUR NATIONS

Between Two Paradigms

Catherine Needham and Patrick Hall

SOCIAL CARE IN THE UK'S FOUR NATIONS

Sustainable Care

Series Editors: **Sue Yeandle**, University of Sheffield, **Jon Glasby**, University of Birmingham, **Jill Manthorpe**, King's College London and **Kate Hamblin**, University of Sheffield

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Contents

Series editors' preface

Sue Yeandle (University of Sheffield)
Jon Glasby (University of Birmingham)
Jill Manthorpe (King's College London)
Kate Hamblin (University of Sheffield)

This book series arises from the *Sustainable Care: connecting people and systems* research programme delivered by a multidisciplinary partnership of 35 scholars in eight universities, funded by a UK Economic and Social Research Council Large Grant. It offers novel, internationally-informed interdisciplinary contributions based on work by linked research teams studying care systems, care work and care relationships.

The focus of the book series is timely and important. We hope it will inform and inspire scholars, policymakers, employers, practitioners and citizens interested in care. Books in the series offer new empirical, conceptual and methodological writing, in scholarly but accessible form, and aim to make an innovative and distinctive contribution to understandings of care challenges and how these can be addressed.

The books bring together data, practices, systems, structures, narratives and actions relevant to social care. Some relate specifically to the UK's unique policy, demographic, cultural and socio-economic circumstances, but all have clear global relevance. Similar concerns are salient around the world, especially in other advanced welfare states, where population ageing is profoundly changing age structures; developments in technology and healthcare mean more people who are ill or have long-term conditions need support at home; and 'traditional' gendered sources of daily caring labour are dwindling, as levels of female labour force participation rise, and family networks become more dispersed. The Covid-19 pandemic has amplified all these challenges.

Subject areas, disciplines and themes

The series critically engages with crucial contemporary debates about care infrastructure; divisions of caring labour and the political economy of care; care ethics, rights, recognition and values; care technologies and human-technological interactions; and care relations in intergenerational, emotional, community and familial context. Within its overarching concept, sustainable care, its subject areas span social and welfare policy and systems; family and social gerontology; ageing and disability studies; employment and workforce organisation; diversity (including gender and ethnicity); social work and human resources; migration and mobility; and technology studies.

The new multi-disciplinary work on care we offer embraces progress in global scholarship on diversity, culture and the uses of technology, and engages with issues of inequality, political economy and the division of labour. These distinctive features of the Sustainable Care programme are highlighted and developed in the book series. We are grateful to all who contributed as researchers, programme administrators and research participants, to our funders, our advisory group, and to members of the public who have engaged with our studies so far. Our work continues in new developments, including the ESRC Centre for Care and IMPACT, the UK's new adult social care evidence implementation centre. We hope books in this new series reflect the quality of our colleagues' contributions, and thank each book's editors, authors and Policy Press for their commitment to sharing new ideas, knowledge and experiences about care.

List of figures, tables and boxes

Figures

Tables

Boxes

About the authors

Catherine Needham is Professor of Public Policy and Public Management at the Health Services Management Centre, University of Birmingham. Her research focuses on social care, including personalisation, co-production, personal budgets and care markets. She has published a wide range of articles, chapters and books for academic and practitioner audiences. Catherine led the Care in the Four Nations work package within the ESRC (Economic and Social Research Council) Sustainable Care team. She is now leading research on care systems as part of the ESRC Centre for Care and is also a member of IMPACT, the UK centre for evidence implementation in adult social care. She tweets as @DrCNeedham.

Patrick Hall is a social care policy researcher, currently undertaking an ESRC-funded PhD at the University of Birmingham on care commissioning. He was the main researcher on the Care in the Four Nations work package within the ESRC Sustainable Care team. Prior to that he contributed to the European Commission's 2018 peer review of Germany's latest long-term care reforms. Patrick is a former Fellow of the King's Fund, where he co-authored two key publications on social care for older people. Before the King's Fund, he worked with the Department of Health and Social Care, local authorities and NHS organisations on the implementation of the Care Act 2014.

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We are really grateful to the people we interviewed who gave up their time, despite the many pressures of their work. The COVID-19 pandemic began part-way through the research and writing of this book, with its devastating consequences for many people linked to social care. It stopped all of us in our tracks, and reminded us why better social care is so vital.

Sustaining the momentum to write a book is a collaborative effort at home as well as at work. Catherine would like to thank Blake, Ray and Jean for the cups of tea and pep talks. Patrick would like to thank Radha for her support and Roshan and Arun for arriving during this project!

7

The limits of social care reform

The previous chapter on scale, style and scope highlighted the extent to which the institutional context of the four nations shapes their approach to policy and their relationship with other institutions such as local government. This relates to structure but also to discursive patterns in framing and identity. Scotland and Wales have had a less complex, more consensual and inclusive policy-making style compared to England and Northern Ireland. This has included a focus on trust and co-production over competition and adversarialism, which is relevant to the process of policy-making but also to the types of policies that have been favoured. In this chapter we look at the challenges of social care reform, and why the four nations have not been able to achieve more change over the period despite the clear commitment across a series of policy documents to do so. We consider the patterns of divergence and convergence in relation to social care policy. We compare an incremental versus transformative approach to care reform, and highlight how both of these approaches must still resolve the challenges of implementation. We also explore the 'policy mix', highlighting tensions between different policies that make it hard to achieve all of them at once, even if implementation challenges could be avoided. We set out two paradigms of care policy – the standardised, centralised and formal versus the differentiated, local and informal – and suggest that policy makers must engage with the tensions between these rather than offering 'the best of both worlds'.

Divergence and convergence

Earlier chapters of this book highlighted the high degree of convergence between the four nations in relation to discursive framings of care (the key values underpinning it: wellbeing, fairness, rights, quality and sustainability) and aspirations about the decisions and practices that were required to reform it (redistribute costs of care; personalise support; support unpaid carers; invest in prevention; integrate with health; and professionalise the workforce). In achieving these policy reforms, the scale, style and scope of policy in Scotland has facilitated greater legislative activity than elsewhere. In Wales, devolution has been a more gradual process than in Scotland, and much time and policy capacity has been spent on institution building. Since 1998, the Welsh Government has been reviewing and renewing its constitutional settlement almost constantly, bringing it closer to the Scottish model over time. Primary legislative and tax-raising powers remain relatively new. The link to England and keeping in sync with its care reforms has been felt more strongly in Wales than in Scotland (Boyce, 2017). In Northern Ireland, the periodic and lengthy suspensions of the Executive have been a serious barrier to reform, although the integration with health has facilitated ongoing increases in care spending. In England, the prevalence of veto players, the partisan polarisation on reform proposals, a decade of austerity and the distractions of Brexit since 2016 have meant that care funding proposals have repeatedly been abandoned or delayed (Needham and Hall, 2022).

Despite this varying degree of activity on care policy reform, there is more convergence on results and outcomes across the four nations than might be expected. While formal outcomes measures do not exist across the four nations, we can see that none of them has fully reformed its care system, and (as Chapter 5 sets out) progress on outcomes is fairly similar. We have characterised Scotland as the most 'active' of the four nations, but, as Pearson et al (2018) observe, this may have contributed to policy overload that has hampered implementation. Uncertain outcomes and complexity remain key elements of care policy in all four nations. Scotland's free personal care has concentrated resources on a narrow and functional set of tasks. Improved rights for carers in Scotland, Wales and England have been symbolically important but have been inadequately implemented. Personalisation and self-directed support have lost momentum. Integration continues to have a disappointing record in relation to improving the experiences of people using services. Registration of the workforce in Scotland, Wales and Northern Ireland (along with improved pay in Scotland) has been broadly welcomed. However, workforce shortages remain severe in all four nations, intensified by COVID-19, and we remain some way off social care being a profession on a par with nursing. Prevention has been an important rhetorical commitment in all four nations, but evidence of investment in prevention and discernible benefits for people or communities remains scant.

In explaining why the aspirations of policy makers have yet to be translated into effective system change, we suggest that there is a need to be alert to the dynamics of change in the four nations. In the next section we look at the distinction between more radical and more incremental versions of change, and how these interact with implementation challenges. We then go on to focus on the interrelationships between the reforms (the policy mix), looking at the ways in which they draw on contending care paradigms, which makes reform inherently unstable.

Incremental versus transformative change

All six of the mechanisms set out in earlier chapters for reforming care (redistribute costs of care; personalise support; support unpaid carers; invest in prevention; integrate with health; and professionalise the workforce) are ambitious, wide-ranging and interrelated. Calls for a reformed care system are often framed as a 'new Beveridge', evoking the spirit of William Beveridge whose report was the foundation for welfare reform after the Second World War (see, for example, Demos, 2009; Glasby et al, 2011). New Labour's 2010 *Building the National Care Service* White Paper set out its agenda in terms that explicitly evoked the spirit of 1948:

> Our answer is bold, ambitious reform to create a system rooted firmly in the proudest traditions of our National Health Service. Its creation in 1948 wasn't just one of Britain's proudest moments; it was also a profound statement of what can be achieved through collective will in the face of adversity. (HM Government, 2010: 2)

The language of a National Care Service is an explicit attempt to mirror the language of the NHS. It suggests correcting the error of 1948 in which support for those who were 'dependent' was fragmented and means tested under the National Assistance Act, rather than universal and free at the point of use as in the NHS. The concept of a National Care Service was used by the New Labour government in 2010 (and has been revived by Labour in subsequent UK elections) and is also deployed in Scotland's current reforms (Feeley, 2021; Scottish Government, 2021). Plans are being developed for a National Care Service in Wales too, as part of the *Co-operation agreement* between Welsh Labour and Plaid Cymru (Welsh Government, 2021a).

Attempts to create a system-wide change analogous to the creation of the NHS take a transformative rather than incremental approach to social care reform. This is in line with the critique of 'piecemeal reform' offered by the Law Commission in its review of social care legislation in 2011:

> It is now well over 60 years since the passing of the National Assistance Act 1948 which remains to this day the bedrock of adult social care. Since then, adult social care law has been the subject of countless piecemeal reforms including new Acts of Parliament and a constant stream of regulations, circulars, directions, approvals and guidance. … Adult social care law, including how it relates to other legislation, has been described at various times by judges as 'piecemeal … numerous', 'exceptionally tortuous', [and] 'labyrinthine'. (The Law Commission, 2011: 1)

The Law Commission proposed instead 'a clear, modern and effective legal framework for the provision of adult social care' (2011: 2), which was the basis for the Care Act (2014) in England and the Social Services and Well-being (Wales) Act 2014.

Reforming social care through a 'big bang' – as the English and Welsh legislation attempted to do – offers a way to avoid the incoherence of a piecemeal and incoherent approach. It may also make it easier to build public and political support around a unified commitment to social care, evoking the post-war Beveridge spirit (Glasby et al, 2011). Reform of long-term care in non-UK systems has often been through a new 'national debate' about changing levels of need and entitlement. In Japan, for example, Peng (2016: 281) writes about how, to build public support for reform of older people's care, 'the government framed the country's demographic shifts as a national crisis, and communicated social care as a solution to the crisis.' In Australia, the National Disability Insurance Scheme (NDIS) for working-age disabled people followed on from a broad-based campaign – Every Australian Counts – that harnessed public and political support for reform (Needham and Dickinson, 2018).

There has been no equivalent 'national debate' in the UK on social care, and in the absence of that, we could argue that the 'big bang' approach is a poor tactic – maximising the target for veto players and leading to fatalism and 'review fatigue' (Bengoa, 2016) when implementation doesn't follow. Insistence on a 'once and for all' solution to care funding, as promised by Boris Johnson when he took office (Campbell, 2019), for example, may have contributed to the failure to make progress on care reform to date. In the old joke about how to eat an elephant, the answer ('one bite at a time') has resonance in social care. In a letter to *The Guardian*, critics noted: 'The search for the holy grail should be called off in favour of pragmatic reforms that would be feasible and fundable quickly, and would use the initiative of dedicated staff' (Bosanquet and Haldenby, 2020).

One of the interviewees, a civil servant from England, made a similar point about the effectiveness of incrementalism as a tactic, in relation to how the Treasury plans spending through annual Spending Reviews:

> 'We need to take the first steps; the thing to do is to embark on this journey. ... To try and say that … the whole of reform, achieving the whole vision needs to be done in one SR [Spending Review] type period, is just asking for nothing to ever happen. I think to stretch it out across two or three SRs, and start on the journey is really good, for just beginning.'

New Labour suggested a staged approach in its 2010 proposals for reforming care funding. Its White Paper noted: 'To manage the impact on the public finances, and to ensure that it is affordable and sustainable, we need to build the National Care Service in stages' (DH, 2010: 8). The first phase was to be free personal care at home, followed by free care for anyone receiving more than two years of residential care. The Barker Report (2014) also suggested a staged approach, starting with free provision of support to people with critical care needs. While such changes lack the symbolic 'big bang' of a new Beveridge, they may be more tactically astute in spreading out the challenges and costs of implementation.

There is an extensive institutionalist literature on policy reform and the inertia that makes policy change difficult (for an overview, see Béland and Powell, 2016). Hacker (2004) points out that we need to recognise intermediate points in between no change and full reform. When change occurs it is often through incremental 'layering' or 'conversion' rather than full-scale reform. If the policy is mutable, then (drawing on the work of Thelen, 2003), Hacker (2004) suggests that we see *conversion* (in which policies are adapted over time rather than replaced or eliminated). If the institutional context allows new policies to emerge (but there are institutional barriers to changing older ones) we see *layering* (building on Schickler, 2001). If the policy doesn't change, despite declining effectiveness in achieving its goals, we can see a case of *drift* (Hacker, 2004; Béland et al, 2016; Needham and Hall, 2022).

We can see these elements of gradual change in the social care reforms of the four nations. Scotland has taken a *layering* approach, adding new social care legislation over time while continuing to work within the financial settlement determined by the UK government. In Northern Ireland we can see evidence of *conversion* – integration with health has given an 'automaticity' (Hacker, 2004) to care funding uplifts, which is not the case in the other nations, although formal legislative change has proved impossible. In Wales and England, their respective Acts in 2014 proposed full *reform*: 'the removal of existing rules and the introduction of new ones' (Mahoney and Thelen, 2010: 15). However, the ambition of the legislation has been not been achieved in either nation, with austerity and broader implementation challenges scaling back the planned reforms (Burn and Needham, 2021; Cheshire-Allen and Calder, 2022). In England in particular, the explicit abandonment of the funding cap element of the Care Act has led to *drift* as the means test has become more punitive over time (Watt and Varrow, 2018; Needham and Hall, 2022). In Wales, we can see *layering*: there has been some change – for example, in the residential means test threshold and weekly charge for home care. However, implementation of the elements of the Social Services and Well-being (Wales) Act relating to carers has been limited (Cooke et al, 2019; Cheshire-Allen and Calder, 2022).

Implementation problems are well known in public policy, as legislative aspirations interact with the complexity of organisational settings (Pressman and Wildavsky, 1973; Lipsky, 1980; Hupe and Hill, 2016). However, Béland et al (2016) argue that implementation has not been sufficiently explored in the policy change literature. They note how the passage of the Affordable Care Act in 2010 in the USA (following years of drift) was not in itself the marker of policy reform, as it has continued to be subject to amendment and reversal during its implementation in the states. In line with this, Carey et al (2019) argue that we need to pay more attention to the 'sticky layers' that inhibit implementation of policy reforms. The introduction of Australia's NDIS – the focus of Carey's study – offered a 'big bang' type of reform, with ambitious plans for the scale and timing of implementation. However, Carey et al (2019) found that even transformative changes have to deal with institutional stickiness as new initiatives are layered on top of existing systems and markets. In relation to social care, we have to be aware of the extent to which both gradual and more transformative reforms have had to address factors such as limited public funding, existing labour markets, the mixed economy of provision, and variable willingness and capacity in local government to introduce reform.

Policy makers themselves are aware of the challenges of implementation. The Care Act 2014 was accompanied by a designated Implementation Support Programme and a new regional infrastructure to support local transition (Hudson et al, 2019). Nonetheless, the implementation of the legislation has been disappointing, with ambiguity in the legislation itself intersecting with financial pressures on local authorities to inhibit change (Burn and Needham, 2021). These challenges of policy reform are part of the explanation of why, despite 25 years of reform, social care in England, Scotland, Wales and Northern Ireland remains unfinished business.

The policy mix

The implementation barriers facing large-scale system changes are an important part of understanding why care reform has been delayed or reversed in the four UK nations. There is a related element that needs to be considered in order to understand the challenges facing care reformers. This concerns the internal tensions between the reforms, and the failure of policy makers to articulate and resolve these tensions. Carey et al (2019: 494) draw attention to the 'policy mix' and the importance of ensuring that goals are coherent in the sense that they are 'related to the same overall policy aims and objectives and may be achieved simultaneously without requiring trade-offs, temporal sequencing, or value balancing'. They go on: 'This makes the composition of policy change important: these relations between different parts of policy over time are not simple additive ones; rather they are dynamic and complex, and typically have emergent, self-organizing properties' (Carey et al, 2019: 494).

The importance of understanding the relationships between parts of the 'policy mix' has been the focus of a number of studies (see, for example, Howlett and Rayner, 2007; Flanagan et al, 2011; Béland et al, 2020; Sewerin, 2020). Howlett and Rayner (2007) note that a policy mix often evolves over time: policies may be incoherent or counter-productive, leading to suboptimal outcomes. In considering the policy mix in social care reforms, we can explore how the six mechanisms (redistribute costs of care; personalise support; support unpaid carers; invest in prevention; integrate with health; and professionalise the workforce) come together as a policy mix. In particular, we draw attention to the rival paradigms at work here. Some of these reforms (particularly integration with health and professionalising the workforce) seek to promote more standardisation, centralisation and formality within the care system whereas others (particularly personalising provision and investing in prevention) encourage more differentiation, localism and informality.

Standardised versus differentiated approaches to social care

In 2021, Professor Nick Watson from the University of Glasgow gave evidence to the Scottish Parliament about the Feeley proposals for a National Care Service, saying:

> [O]ne problem that I see from reading the report … is that it seems to present two different futures for social care. On the one hand, it suggests that good social care is the product of people power, the co-production of services and a diversity of approaches that are adapted to meet the needs of the locality and the needs of each service user. On the other hand, it calls for centralisation and standardisation, and institutional power, through a national care service. Those two approaches seem to be in tension with each other and, as I read through the report, I really struggled to see how they could be reconciled. (Scottish Parliament Health, Social Care and Sport Committee, 2021)

Watson's articulation of these two approaches – implicit and in tension – coheres with our analysis of two strands underpinning reform in the four nations since devolution. Across the policy documents all four indicate a clear commitment to self-direction and personalisation and to prevention, co-production and asset-based approaches to individuals and communities. Yet, there is also a centralising and standardising dynamic in all four nations, evident in the approach to regulation and registration and to structural integration with health.

One of the interviewees, reflecting on how the Social Services and Well-being (Wales) Act 2014 is working in practice, pointed to the tension between loosening and maintaining control:

> 'We're almost in a bit of a dichotomy aren't we? The Social Services and Well-being Act is all about power to the individual person. So, have

> a direct payment, commission your own, employ your own, do what you want with that money. We've assessed your need, within limits, obviously, but you go ahead and you look after yourself. The counter argument is, regulation, regulation, we've got to keep everybody safe.' (Wales, social worker)

We see these as two paradigms that underpin reform initiatives in all of the four nations, but with insufficient attention to the tensions between them. They can be set out as ideal types in order to highlight the differences between them, and the problems that follow when reformers leave the tensions unacknowledged.

Paradigm 1: standardised care

This first paradigm is associated with strong state control of care, and with the provision of nationally standardised and regulated systems. Of our six mechanisms of care reform, this paradigm gives most attention to macro-level funding reform, integration and worker registration. It is least likely to prioritise self-directed support and prevention. A key characteristic of this paradigm is its emphasis on a professionalised and regulated workforce. This derives in part from concerns about safety. As this interviewee put it, raising concerns about unregistered care workers: "You wouldn't expect an electrician to come and do your house who wasn't qualified, yet we're saying it's okay for somebody to go in who is not qualified to do the most intimate things with individuals who are very vulnerable, not supervised, on their own" (Wales, regulatory/oversight body).

The rationale for the registration of care workers comes in part from a sense that policy has lagged behind the changes in care work, which now make it closer to nursing than to a 'home help', as discussed in Chapter 3. Given the focus on formalisation, this paradigm is also allied to the integration agenda, with the creation of the NHS seen as the model social care should move towards, as exemplified here by an Assembly Member from Wales:

> 'We have a mish-mash of public provision. Well-meaning charitable provision. Private provision. Somebody needs to have the courage to bring it all together into a standalone coherent service. Like Aneurin Bevan did for health. Somebody needs to do it for social care. And that's the challenge at the moment, because people say, "It's too difficult, it's going to be horrendously expensive". But that was all the arguments hurled at Aneurin Bevan, back in the day, which is why I am quite a fan, really.'

One rationale for staff registration is to make it easier for staff to move between social care and the NHS:

> 'Well, I'm a supporter of registration, but only if it's a properly backed system. ... The aim of registration should be about a proper skills and competency framework. It would be aligned to the NHS one, because we want staff who can move seamlessly between systems, just as citizens do.' (England, provider representative)

Personal assistants (PAs), who are not required to be registered in any part of the UK, can be seen as anomalous and problematic in this paradigm: "You think about personal assistants, are they not regulated because they're not dangerous? Because there's no risk there? I don't think that's the case. It's the 'too hard' pile, isn't it?" (England, regulatory/oversight body).

Some also see non-registered providers, such as PAs and micro-providers, as creating unfairness in the system, because they can work unregistered, while other providers must register their staff:

> 'From our point of view, if we, as a group of contracted, commissioned, service providers are legally obliged to register people, to have them qualified – for all the reasons that have been given – then what on earth is the justification for having a whole bunch of people who call themselves micro-providers, to exist entirely outside the regulatory framework? Who don't have to be scrutinised in any way at all. Who don't have to comply with any of these things, and furthermore who are outside the living wage policy of the Scottish Government.' (Scotland, third sector)

In Scotland, the proposed National Care Service, as set out in the Scottish Government's consultation document in 2021, is most closely aligned to the paradigm of standardised care. The problems of the care system are set out as being insufficient consistency and standardisation (Scottish Government, 2021). The language of personalisation and co-production is there, but the mechanisms of change – particularly a new national approach to commissioning – are standardising reforms. The Coalition of Care Providers Scotland (CCPS), representing 80 not-for-profit providers, expressed dismay that the consultation focused on structural change, not culture: 'As they are currently articulated, the changes proposed by the Scottish Government appear to rely on two key drivers – more control from the centre and greater enforcement of standards. However, the emphasis on structures and practices is not matched by an equally explicit focus on culture, relationships, and behaviours' (CCPS, 2021: 3).

Long-stay care institutions are part of this standardisation paradigm. This includes the ‘Assessment and Treatment Centres’ for people with learning disabilities, which have proved very difficult to close, despite media and political pressures to do so. Research on ‘carceration’ (Series, 2022) and ‘new asylums’ (Fox, 2018) finds that institutional models have been recreated or preserved, despite the elimination of long-stay hospitals. The COVID-19 pandemic highlighted that institutional settings can be high-risk environments (Knapp et al, 2021), and many relatives were distressed at the extent to which residential care settings remained closed institutions, even as broader COVID-19 restrictions eased (Tapper, 2021). Writing about ‘the invisible asylum’, Fox argues that even outside of formal institutions, norms of control can be present within social care in which notions of home, family and love have no currency: ‘Most of the most obviously institutional buildings have gone, but the ideas behind that divide between those inside and those outside the community remain invisibly woven into our public services which provide long-term support’ (Fox, 2018: 14).

The efficiency arguments around building large care institutions mean that they continue to be a part of care provision, despite quality concerns expressed by the English regulator (CQC, 2017). This efficiency logic is evident in claims from this interviewee that meeting future care needs is likely to require institutional solutions unless other ideas are forthcoming:

> ‘You’re not going to get good care and good carers to meet the ageing population across the UK, and particularly across parts of Northern Ireland. We’re going to require them all to move to where we build big massive care homes. Or what arrangements are we going to put in place? And there is part of me that doesn’t understand why that’s too hard to plan for.’ (Northern Ireland, regulatory/oversight body)

One interviewee, a social worker in Northern Ireland, felt that COVID-19 may have increased the tendency to favour large institutions:

> ‘What we might do is actually take our large, big group care institutions and say, “Well, we have really high demographics, and actually these facilities are really good at discharging people from hospital quickly”. And if we shore them up with better clinical care, they can feel a bit more like hospitals. We’ll reduce the risks to people living in them, in terms of infection, and we’ll reduce our risks as people running the system. We’ll feel a bit happier that they feel a bit more like what we do in hospitals.’

There is a sense from these two interviewees that the crisis of demand and the pandemic experience may have strengthened the appetite for institutional care at scale.

Of the four types of supply discussed in Chapter 3 (state, market, family and community), the standardised paradigm is most closely connected to the legitimacy of the state. Restoring the state's role in designing, funding, commissioning, regulating, registering and potentially delivering care is a key priority. There may be roles for other points of the care diamond – the market, family and community – but in this paradigm each of these is considered too partial and unreliable to be trusted to provide consistent, high-quality care.

Paradigm 2: differentiated care

This paradigm starts with the person receiving support and what enhances their wellbeing. This might be a regulated care service, a non-regulated PA, or a range of family and community supports. Rather than keeping people safe through national standards there is more emphasis on local variance, co-design and co-delivery and involving people in informal networks. Safety is traded off with other goals through the lens of positive risk-taking rather than risk aversion (SCIE, 2010).

A commitment to this differentiated paradigm runs through many of the policy documents we analysed. It can be seen across the four nations – in *Putting people first* (HM Government), in England's Care Act 2014 and in the Social Services and Well-being (Wales) Act 2014, in Scotland's Feeley Report (2021) and in Northern Ireland's *Power to people* (Kelly and Kennedy, 2017). Support for this kind of approach comes in part from an awareness of the limits of what has been achieved through the standardised approaches of the first paradigm. This interviewee, for example, expressed reservations about relying on regulation to keep people safe:

> 'Like the rest of the UK, we've faced some fairly catastrophic failings in quality of provision. We've got some major adult safeguarding investigations going on, relating to managed care environments where the quality of the care certainly was neglectful and is sometimes abusive. I really don't think that we've cracked that, I also don't think inspection will crack it. ... I think there has to be something about how we commission that care that makes it inherently safer, rather than relying on inspection and regulators to catch it being unsafe. … If you look at the failures of quality in provision, it's fairly classic, the two things that they require. If it's abuse, it is basically an unequal power relationship and if it's abuse and/or neglect, it's secretive and covered up. Now, the two tenets of co-produced services are that you share power, and that

> they're totally transparent. I just think that people haven't connected co-production with avoiding those kinds of quality failures yet. But that's where you'll get to. I think that care that is co-produced, and care that has resulted from diffuse power and is transparent in its nature, it's just inherently safer.' (Northern Ireland, civil servant)

In the Feeley Report, the limits of inspection and regulation in assuring quality are acknowledged:

> [W]holesale reliance on inspection is seldom appropriate, and is costly in both time and money. And most important, inspection cannot always catch problems that are inherent in the system itself. And yet, that is pretty much all we have in social care support a total reliance on external verification as a vehicle for improvement. It won't work. It distorts our sense of who is the 'customer' away from the person in need of care and support towards the inspector and it inhibits the sharing of learning and innovation. (Feeley, 2021: 58)

A local Welsh interviewee, a care commissioner, felt recent legislation had emphasised personalisation and flexibility, but that this was being lost in implementation:

> 'I think the Regulation and Inspection Act, 2016 has kind of missed the point with a couple of aspects. ... They start off really well, and in the main it's in line with the spirit of helping people live their lives like they want to live them, have good outcomes. But sometimes there's still that kind of aspect of ... micro-managing the providers creeping back in. And it's the same with the Social Services and Well-being Act. The values, the principles, are fantastic – but then once you delve into some aspects of the guidance, and some of the sections around the Act, you see, hmm, there's a little bit of tension here, between what you're saying as an overall vision you want to achieve, and what we have to do.'

An interviewee in Scotland, a civil servant, set out the limitations of the current model:

> 'We've trained [care workers] to be person-centred, and generally people going into those professions are genuinely wanting to do a good job. But actually ... we're training them to fill in the contractual obligations. So, you go in, and actually your top marks are to fill in that book to say "Joe's mood is low and we've given him his medication". Then, you've got five minutes to nuke the meal, but you've got another

> five minutes to write up what the meal was, and whether Joe ate it. But you're not sure if he ate it, because you've got to go next to Jessie. ... That's not good support. That's not good for the worker, for the person who's receiving it.'

The second paradigm – of differentiated support – aims to move care beyond a set of work tasks (Rummery and Fine, 2012). In relation to the care 'supply' crisis discussed in Chapter 3, this paradigm evokes family and community as having the most to offer. The state and the market are distrusted as too instrumental – treating care as a set of functional tasks. Families and communities, while they can be under immense strain, are seen as the most likely to offer love and reciprocity (Fox, 2018), as well as kindness (Unwin, 2018). This is evident in Northern Ireland's *Power to people* report, which states that 'Care and support involves supporting a human environment and culture that encourages relationships and kindness' (Kelly and Kennedy, 2017: 64).

Comparing the two paradigms

Having a preference for a standardised versus a differentiated paradigm has implications for the perspective taken on the social care values set out in Chapter 2. The first paradigm is suggestive of a care system that is highly formalised, standardised and regulated, with registration for care workers and a clear demarcation between what it means to be 'in' or 'out' of social care. It gives pre-eminence to making social care work for other systems connected to it – particularly the NHS. Attention is given to how to make the work of care more effective and efficient, foregrounding the perspectives of paid care workers. Policies include reasonable rates of pay and training for care workers, with good terms and conditions, and legislating for unpaid carers to have rights to support, including respite. Safeguarding is also important, as is regulating care systems so that care meets a quality standard and keeps people safe. The main problem that this paradigm seeks to tackle is a lack of consistency and inadequate protection for those who provide and receive care.

The second paradigm sets out a vision of care and support that is differentiated and less formal, with lower levels of regulation and greater variation between localities and between people. Social care here is not something you go 'into', in the way you might go into hospital; it is something that gives you support so that you can do the things that enhance your wellbeing (#socialcarefuture, 2019). Care here is approached through the perspective of the person who requires support and the focus is on what will give them choice and control so that they can flourish. Their preferences will be paramount, and formal systems will exist to facilitate these, while allowing maximum flexibility. So, for example, people may be able to choose a care worker from a regulated agency or use a non-registered PA. People can spend a direct payment on buying a traditional 'care package' or on a range of things that they feel will support their wellbeing.

We present our typology of the two paradigms in Table 7.1. Within the standardised paradigm, we can see the core values as being safety and consistency. A care system is effective if it is able to secure consistent care for all (as part of fairness) and ensure people are kept safe. The key reform mechanisms relate to integration with health (to improve service outcomes) and professionalisation of the workforce as the basis for safe and consistent care as well as making care work more consistent with other caring professions. Free personal care is an exemplar policy, in which everyone with an assessed need can have support in achieving an agreed list of Activities of Daily Living. In the differentiated paradigm, the focus is on prioritising choice and control for the individual,

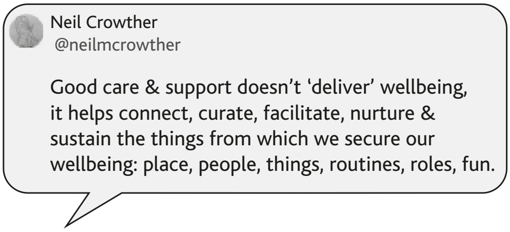
Table 7.1: Two paradigms of social care

Features	Paradigm 1: standardised care	Paradigm 2: differentiated care
Core values	• Consistency • Safety	• Choice and control • Strength-/asset-based approaches
Exemplar funding reform	• Free personal care	• Direct payments
Exemplar mechanisms	• Integrate with health • Professionalise the workforce	• Personalise provision • Invest in prevention
Perception of wellbeing	• Wellbeing is a service outcome from efficient delivery of quality services to people with support needs	• Wellbeing emerges from a good life; social care facilitates people's pursuit of what matters to them
Rights	• Service users and service providers require clearly defined and enforceable rights and duties, to ensure safety and consistency	• Individual rights should be matched with recognition that people and communities have assets, and care is a mutual relationship
Quality	• Clear, enforceable quality standards • Powerful regulatory and inspection system	• Is negotiated between stakeholders • Emerges from good relationships • Requires positive risk-taking
System sustainability	• Achieved via a well-funded state that distributes services equitably to achieve well-defined outcomes	• Achieved by embedding people within caring communities supported by the state and the market
Key concerns	• Unsafe care • Inconsistent care across localities • Poor terms and conditions for staff	• Institutionalisation • Lack of personalisation and co-production • Lack of innovation • Stigmatisation

using direct payments as much as possible to enable people to purchase the services that they feel help support their preferred outcomes. Prevention is a key mechanism here, alongside personalisation and self-directed support, and recognition that people have strengths and assets rather than only 'needs'.

In relation to wellbeing, we can differentiate between wellbeing as something that the care system provides (in the standardised paradigm) and wellbeing as a broader life perspective (in the differentiated paradigm). Crowther captures that broader sense of wellbeing:

Figure 7.1: Neil Crowther tweet on wellbeing



Neil Crowther
@neilmcrowther

Good care & support doesn't 'deliver' wellbeing, it helps connect, curate, facilitate, nurture & sustain the things from which we secure our wellbeing: place, people, things, routines, roles, fun.

Source: Neil Crowther, Twitter, 28 October 2021

In the standardised paradigm, rights are a key focus for reformers, ensuring that people have protected rights to services and funding. In the differentiated paradigm, recognition of the difficulty of enforcing rights and duties means more attention is given to relationship building, trust and attributes such as kindness (Unwin, 2018). Quality in the standardised paradigm is about the match between the commissioned service and the service delivered, whereas in the differentiated paradigm, quality is defined by the people using the service. Two quotes from the interviews indicate this contrast. The first problematises the perspective of the person receiving care in not recognising the limits of what is being provided:

> 'I think it's very difficult, because what you hear at a personal level, and the personal experience, there's such a tension in that. There's nothing good about the care you're getting. "I know you think Edna's lovely, but there's nothing good about the care she's actually being paid to deliver".' (Northern Ireland, third sector)

In the second, the interviewee highlights the importance of what family carers value, which may not be covered by a service specification:

> 'My dad did agree to have the hairdresser come around to do mum's hair. Actually, she wasn't very good at hairdressing, but what he did,

> he paid her for an extra hour to do a bit of cleaning. She was a rubbish cleaner as well, not brilliant at hair or cleaning, but what she did was sat and talked to mum, so dad could go out into the garden and potter.' (England, third sector)

In the standardised paradigm in which services meet a specification, there is a clear failing here. In the differentiated paradigm, there is recognition that quality is developed in the relationships and can be defined by the people receiving support. This is not always straightforward, of course, and perhaps in this example, a good cleaner and a good hairdresser would have been more helpful. The point at issue is: who decides?

Key concerns for the two paradigms highlight the values and mechanisms that each prefer. The standardised paradigm gives priority to preventing exploitation of staff, unsafe care and inconsistency of provision. The differentiated paradigm has a different set of worries: deficit models that lead to institutionalisation of one kind or another, and to stigmatisation, service standards that are focused on functional tasks without scope for personalisation or innovation around what makes a good life. All of these are legitimate concerns: however, the two paradigms differ in what gets foregrounded in policy-making and implementation.

Universalism versus particularism

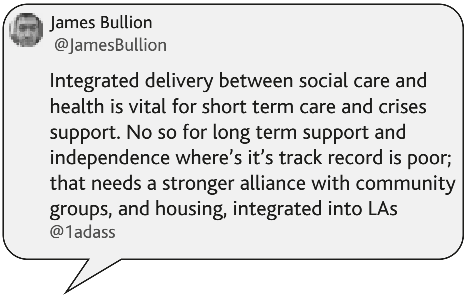
We present the two paradigms as ideal types rather than system descriptors. Nonetheless we argue that they do inform the 'policy cores' (Sabatier and Weible, 2019) or 'philosophies' (Schmidt, 2008) that sit behind specific policies and programmes. These paradigms align to a degree with the broader accounts of universalism versus particularism that underpin any welfare state (Taylor-Gooby, 1994; Thompson and Hoggett, 1996; Hoggett, 2006). In a care context they have been played out in the historical development of state care services that drew legitimacy from a narrative of universalism (or what we have called standardisation) in contrast to the particularism of market, family and community (Ouchi, 1980; Bartels, 2013). As the critique of institutionalisation gathered pace in the 1980s, the state was recognised to be just as particularistic in its treatment of people and its insensitivity to social diversity (Williams, 1989). Rather than a dysfunction to be designed out, some versions of particularism offered a way to move beyond the Fabian welfare model and provide more tailored forms for support (Thompson and Hoggett, 1996). Relational models of support came to be seen as essential to effective models of service delivery rather than a threat to bureaucratic impartiality (Bartels and Turnbull, 2020). People were understood to be co-producers and co-commissioners of their care (Needham and Carr, 2009), and communities to be a source of assets and wellbeing (#socialcarefuture, 2019).

In relation to social care, our two paradigms offer specific manifestations of these broader tensions within the welfare state. We distinguish between paradigms that seek to assure access to a standardised and regulated set of services versus those that seek to facilitate person-centred, relational forms of support, which may involve formal services but may also improve access to a range of informal activities. Hoggett argues that the tensions between universalism and particularism cannot be resolved, but they do generate 'value contradictions' for public officials (2006: 178). We suggest that it is these value contradictions that help to explain the lack of progress on many care issues that are being pursued simultaneously, particularly integration (universalism) and self-directed support (particularism), or free personal care (universalism) and prevention (particularism). Integration has often focused on how social care can help the NHS (for example, quicker hospital discharge packages) rather than on how people can have more choice and control. Free personal care has focused resources on a relatively narrow set of functional supports in the home, drawing attention and resources away from investing in the local assets and networks that keep people out of the formal care system.

By making explicit the two paradigms that run through care reform it is clear that care can contribute to narrow or broad understandings of wellbeing. In the differentiated paradigm, there is recognition that wellbeing cannot be *delivered* by services. Separating out these two paradigms has the advantage of helping to explain why systems that emphasise the importance of (say) integration with health appear to lose focus on personalisation or self-directed support (Pearson et al, 2018). It highlights the limits of claims that sustainability in social care is only about putting in more money, such as through capping care costs (DHSC, 2021d).

We can argue that the differentiated paradigm is the most appealing – with its emphasis on person-centredness and subjective wellbeing. However, it is important to also recognise its limits. This account has little to offer care staff in terms of routes into training, better pay or career progression commensurate with the kinds of work they do. Research on PAs highlights advantages of working in this way, but that there are disadvantages too (see, for example, Shakespeare et al, 2018; Manthorpe et al, 2020). Carers' right to breaks may be better protected in a system that gives primacy to standardisation and formalisation. The valorisation of love and family in the differentiated paradigm resonates with what many people would want from life, but family-based care is heavily gendered and can be inadequate (Tronto, 2013). It may be that standardised approaches fit certain contexts. For example, integration with health (which we suggest is part of the standardised paradigm) may be an effective way to offer short-term support, but be less suitable for longer term provision. As a former chair of England's Association of Directors of Adult Social Services, James Bullion, observed:

Figure 7.2: James Bullion tweet on integration



James Bullion
@JamesBullion

Integrated delivery between social care and health is vital for short term care and crises support. No so for long term support and independence where's it's track record is poor; that needs a stronger alliance with community groups, and housing, integrated into LAs @1adass

Source: James Bullion, Twitter, 8 September 2021

Reconciling the two paradigms, and identifying how best to combine elements of them, requires being much more explicit about them. Responding to Watson's evidence to the Scottish Parliament, Derek Feeley acknowledged:

> [Nick Watson] is probably right that there is a tension between standardisation and personalisation. However, we need both of those: we need to enhance both standardisation and personalisation if we are to have the kind of social care support system that we want in Scotland. We are going to have to manage that tension in the best way we can. (Scottish Parliament Health, Social Care and Sport Committee, 2021)

While Feeley may be right that elements of both approaches are needed, many debates about social care feature a tendency either to ignore the tensions or to discredit the alternative. In the final chapter we set out ways to more explicitly debate the value tensions within social care.

Conclusion

This chapter has explored the patterns of convergence and divergence found in the book. It considered the distinction between transformational and incremental reforms, noting the tactical advantages of more incremental change as pursued in Scotland. Scotland's approach of 'layering' has avoided the risks of loading too much into a single transformational piece of legislation – as attempted in England and Wales – which may overwhelm implementing bodies. However, the implementation challenges of change have been a barrier in all four polities, and the dysfunctions of the care system remain such that all four nations are promising further large-scale reform in the future.

In understanding the barriers to policy change we also have to consider the 'policy mix'—in other words, how the proposed mechanisms of change fit together. In setting out two paradigms of care here, we have highlighted tensions in what care reformers are seeking to achieve. Approaches that seek to make care standardised and consistent, with a more professionalised workforce and a closer integration with health, offer one kind of care future. In contrast, approaches that seek to make care more local, more differentiated, more co-produced and more strengths-based are invoking a very different understanding of what constitutes good care and a good life. Failure to acknowledge these rival paradigms is part of the reason why care reforms have, to date, faltered, and will continue to be an issue as new sets of care reforms are tabled for the future. In developing care policy, the tensions between these two are either ignored altogether or are over-stated, to the extent that no accommodation is possible. In the next chapter we suggest ways in which it might be possible to develop more multi-vocal debates about care.

References

Age UK (2019) *Estimating need in older people: Findings for England*, London, www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/active-communities/id204303-estimating-needs-report.pdf [Accessed 24 March 2022].

Abrams, F. (1978) *Neighbourhood care and social policy: A research perspective*, Berkhamstead: The Volunteer Centre.

Alarilla, A., Grimm, F. and Stafford, M. (2021) 'What happened to unpaid caring during the COVID-19 pandemic?', UK Data Service, Data Impact blog, 8 June, https://blog.ukdataservice.ac.uk/unpaid-caring-during-covid19 [Accessed 9 February 2022].

Alberti, A., Forde, C., Graham, G., Bessa, I., Cutter, J., Ciupijus, Z. et al (2022) *From a health crisis to a labour crisis: Omicron, Brexit and labour shortages*, Centre for Employment Relations, Innovation and Change blog, 13 January, https://cericleeds.wordpress.com/2022/01/13/from-a-health-crisis-to-a-labour-crisis-omicron-brexit-and-labour-shortages [Accessed 19 January 2022].

Allan, G., Hawker, S. and Crow, G. (2001) 'Family diversity and change in Britain and Western Europe', *Journal of Family Issues*, 22(7): 819–37.

Allen, K. and Glasby, J. (2013) ' "The billion dollar question": Embedding prevention in older people's services – Ten 'high-impact' changes', *British Journal of Social Work*, 43(5): 904–24.

Allen, K., Burn, E., Hall, K., Mangan, C. and Needham, C. (2023) '"They made an excellent start … but after a while, it started to die out": Tensions in combining personalisation and integration in English adult social care', *Social Policy and Society*, 22(1): 172–86.

APPG (All Party Parliamentary Group) on Adult Social Care (2019) *Elevation, registration and standardisation: The professionalisation of social care workers*, London: APPG on Adult Social Care, www.gmb.org.uk/sites/default/files/APPG_SOCIALCARE_REPORT.pdf [Accessed 27 October 2021].

Alliance Scotland (2018) *Adult social care reform in Scotland: A discussion paper*, https://www.alliance-scotland.org.uk/wp-content/uploads/2018/10/ALLIANCE-response-Discussion-paper-on-Adult-social-care-reform-for-Scotland.pdf [Accessed 18 February 2022].

Andrews, L. (2021) 'The forward march of devolution halted – and the limits of progressive unionism', *The Political Quarterly*, 92(3): 512–21.

Andrews, L. (2022) 'Performing Welsh Government 1999–2016: How insider narratives illuminate the hidden wiring and emergent cultural practices', *Contemporary British History*, 36(1): 124–56.

Ansell, C. and Torfing, J. (2015) 'How does collaborative governance scale?', *Policy & Politics*, 43(3): 315–29.

Archer, M.S. (2012) *The reflexive imperative in late modernity*, Cambridge: Cambridge University Press.

Arnott, M. (2019) 'The Scottish Government', in G. Hassan (ed) *The story of the Scottish Parliament: The first two decades explained*, Edinburgh: Edinburgh University Press, pp 52–63.

Asthana, A. (2017) 'Take care of your elderly mothers and fathers says Tory minister', *The Guardian*, 3 January, www.theguardian.com/society/2017/jan/31/take-care-of-your-elderly-mothers-and-fathers-says-tory-minister [Accessed 26 November 2020].

Atkins, G., Dalton, G., Phillips, A. and Stojanovic, A. (2021) *Devolved public services: The NHS, schools and social care in the four nations*, London: Institute for Government, www.instituteforgovernment.org.uk/sites/default/files/publications/devolved-public-services.pdf [Accessed 14 November 2021].

Audit Scotland (2018) *Health and social care integration: Update on progress*, Health and social care series, Edinburgh, www.audit-scotland.gov.uk/uploads/docs/report/2018/nr_181115_health_socialcare_update.pdf [Accessed 12 July 2020].

Audit Wales (2020) *So, what's different? Findings from the Auditor General's sustainable development principle examinations*, Cardiff, www.wao.gov.uk/sites/default/files/Well-being-of-Future-Generations-report-eng_11.pdf [Accessed 2 March 2022].

Austin, A. (2020) *A universal declaration of human well-being*, London: Springer International Publishing.

Bache, I. and Reardon, L. (2013) 'An Idea whose time has come? Explaining the rise of well-being in British politics', *Political Studies*, 61(4), https://doi.org/10.1111/1467-9248.12001.

Ballard, C., Orrell, M., Moniz-Cook, E., Woods, R., Whitaker, R., Corbett, A. et al (2020) *Improving mental health and reducing antipsychotic use in people with dementia in care homes: The WHELD research programme including two RCTs*, Programme Grants Application, Res 2020, 8(6), https://evidence.nihr.ac.uk/alert/wheld-dementia-care-homes-person-centred-care [Accessed 21 February 2021].

Barclay, P. (1982) *Social workers: Their role and tasks* (Barclay Report), London: Bedford Square Press.

Barker, K. (2014) *A new settlement for health and social care* (Barker Report), London: The King's Fund.

Bartels, K.P. (2013) 'Public encounters: The history and future of face-to-face contact between public professionals and citizens', *Public Administration*, 91(2): 469–83.

Bartels, K. and Turnbull, N. (2020) 'Relational public administration: A synthesis and heuristic classification of relational approaches', *Public Management Review*, 22(9): 1324–46.

BBC News (2017) 'General Election: Theresa May denies social care U-turn', 22 May, www.bbc.co.uk/news/election-2017-40001221 [Accessed 30 October 2020].

Beecham, J. (2006) *Beyond boundaries: Citizen centred local services for Wales* (Beecham Review), Cardiff: Welsh Assembly Government.

Béland, D. and Powell, M. (2016) 'Continuity and change in social policy', *Social Policy & Administration*, 50(2): 129–47.

Béland, D., Rocco, P. and Waddan, A. (2016) 'Reassessing policy drift: Social policy change in the United States', *Social Policy & Administration*, 50(2): 201–18.

Béland, D., Howlett, M., Rocco, P. and Waddan, A. (2020) 'Designing policy resilience: Lessons from the Affordable Care Act', *Policy Sciences*, 53(2): 269–89.

Bell, D. (1973) *The coming of post-industrial society*, New York: Basic Books.

Bell, D. (2018) *Free personal care: What the Scottish approach to social care would cost in England*, London: The Health Foundation, www.health.org.uk/newsletter-feature/free-personal-care-what-the-scottish-approach-to-social-care-would-cost-in [Accessed 26 November 2020].

Bell, D. and Rutherford, A. (2013) 'Individual and geographic factors in the formation of care networks in the UK', *Population, Place and Space*, 19(6): 727–37.

Bengoa, R. (2016) *Systems not structures: Changing health and social care* (Bengoa Report), Belfast: Expert Advisory Panel.

Bengtson, V.L. and Martin, P. (2001) 'Families and intergenerational relationships in aging societies: Comparing the United States with German-speaking countries', *Zeitschrift für Gerontologie und Geriatrie*, 34(3): 207–17.

Benz, A. (2012) 'Yardstick competition and policy learning in multi-level systems', *Regional and Federal Studies*, 22(3): 251–67.

Benz, A. and Fürst, D. (2002) 'Policy learning in regional networks', *European Urban and Regional Studies*, 9(1): 21–35.

Beresford, B.A., Mann, R.C., Parker, G.M., Kanaan, M., Faria, R., Rabiee, P. et al (2019) 'Reablement services for people at risk of needing social care: The MoRe mixed-methods evaluation', *Health Services and Delivery Research*, 1–254, doi:10.3310/hsdr07160.

Bergene, A. (2007) 'Towards a critical realist comparative methodology: Context-sensitive theoretical comparison', *Journal of Critical Realism*, 6(1): 5–27.

Berrington, A. (2017) 'Childlessness in the UK', in M. Kreyenfeld and D. Konietzka (eds) *Childlessness in Europe: Contexts, causes, and consequences*, Cham: Springer International Publishing, pp 57–76.

Bertin, G. and Carradore, M. (2016) 'Differentiation of welfare regimes: The case of Italy', *International Journal of Social Welfare*, 25(2): 149–60.

Bevan, A. (1952) *In place of fear*, London: Quartet.

Bigby, C. (2020) 'Dedifferentiation and people with intellectual disabilities in the Australian National Disability Insurance Scheme: Bringing research, politics and policy together', *Journal of Intellectual and Development Disability*, 45(4): 309–19.

Birrell, D. and Gray, A.M. (2018) 'Outcomes-based approaches and the devolved administrations', *Social Policy Review* 30, Bristol: Policy Press, pp 67–86.

Bolton, J. (2015) *Emerging practice in outcome-based commissioning for social care*, Discussion Paper, April, Oxford: Institute for Public Care, https://ipc.brookes.ac.uk/files/publications/John_Bolton_Outcome_Based_Commissioning_Paper_April_2015.pdf [Accessed 12 May 2020].

Bosanquet, N. and Haldenby, A. (2020) 'There is no magic fix for our social care crisis', *The Guardian*, 30 July, www.theguardian.com/society/2020/jul/30/there-is-no-magic-fix-for-our-social-care-crisis [Accessed 31 July 2021].

Bottery, S. (2020) 'Twelve social care personas: Which one(s) are you?', The King's Fund blog, 23 November, www.kingsfund.org.uk/blog/2020/11/twelve-social-care-personas [Accessed 26 March 2022].

Bovaird, T. (2014) 'Attributing outcomes to social policy interventions – "gold standard" or "fool's gold" in public policy and management?', *Social Policy & Administration*, 48(1): 1–23.

Boyce, S. (2017) *Paying for social care*, Cardiff: National Assembly for Wales.

Bradbury, J. and Andrews, R. (2010) 'State devolution and national identity: Continuity and change in the politics of Welshness and Britishness in Wales', *Parliamentary Affairs*, 63(2): 229–49.

Brindle, D. (2009) 'Taking the long view: Social care reform', *The Guardian*, 25 February, www.theguardian.com/society/2009/feb/25/interview-stewart-sutherland [Accessed 20 March 2022].

Brooks, L. (2021) 'Sturgeon says second independence vote "a matter of when, not if"', *The Guardian*, 9 May, www.theguardian.com/politics/2021/may/09/scottish-indyref2-battle-distraction-covid-michael-gove [Accessed 18 September 2021].

Brown, T. (2021) *Social care provision in the UK and the role of carers*, London: House of Lords Library.

Bulmer, M. (1987) *The social basis of community care*, London: Routledge.

Burke, S. (2021) 'Post-pandemic challenges for all ages in an ageing society', *Quality Ageing for Adults*, 22(3/4): 172–7.

Burn, E. and Needham, C. (2014) Implementing the Care Act, 2014 – a synthesis of project reports on the Care Act commissioned by the National Institute for Health Research, Birmingham: University of Birmingham, https://www.birmingham.ac.uk/documents/college-social-sciences/social-policy/publications/implementing-the-care-act-2014.pdf [Accessed 13 March 2022].

Burns, D., Rees Jones, I., Earle, J., Froud, J., Williams, K., Cowie, L. et al (2016) *Where does the money go? Financialised chains and the crisis in residential care*, CRESC Public Interest Report, Manchester: Centre for Research on Socio-Cultural Change (CRESC), University of Manchester.

Caiels, J., Forder, J., Malley, J., Netten, A. and Windle, K. (2010) *Measuring the outcomes of low-level services*, Discussion Paper 2699, Canterbury: University of Kent.

Caiels, J., Milne, A. and Beadle-Brown, J. (2021) 'Strengths-based approaches in social work and social care: Reviewing the evidence', *Journal of Long-Term Care*, 401–22, https://journal.ilpnetwork.org/articles/10.31389/jltc.102 [Accessed 1 March 2023].

Cairney, P., Russell, S. and St Denny, E. (2016) 'The "Scottish approach" to policy and policymaking: What issues are territorial and what are universal?', *Policy & Politics*, 44(3): 333–50.

Cambridge, P. and Carnaby, S. (2005) *Person centred planning and care management with people with learning disabilities*, London: Jessica Kingsley Publishers.

Campbell, D. (2019) 'Pledges to fix social care could cost Boris Johnson dearly', *The Guardian*, 1 August, www.theguardian.com/uk-news/2019/aug/01/promising-to-fix-social-care-could-cost-boris-johnson-dearly [Accessed 16 September 2020].

Carers UK (2020) *Caring behind closed doors: Six months on*, London, www.carersuk.org/images/News_and_campaigns/Behind_Closed_Doors_2020/Caring_behind_closed_doors_Oct20.pdf [Accessed 2 February 2021].

Carey, G., Kay, A. and Nevile, A. (2019) 'Institutional legacies and "sticky layers": What happens in cases of transformative policy change?', *Administration & Society*, 51(3): 491–509.

Carey, G., Dickinson, H., Malbon, E. and Reeders, D. (2018) 'The vexed question of market stewardship in the public sector: Examining equity and the social contract through the Australian National Disability Insurance Scheme', *Social Policy & Administration*, 52(1): 387–407.

Cascio, M.A., Lee, E., Vaudrin, N. and Freedman, D. (2019) 'A team-based approach to open coding: Considerations for creating intercoder consensus', *Field Methods*, 31(2): 116–30.

CCN (County Councils Network) (2022) 'New analysis warns government has "seriously underestimated" the costs of adult social care charging reforms', CNN News, 18 March, www.countycouncilsnetwork.org.uk/new-analysis-warns-government-has-seriously-underestimated-the-costs-of-adult-social-care-charging-reforms [Accessed 12 July 2022].

CCPS (Coalition of Care and Support Providers Scotland) (2021) 'A National Care Service for Scotland, CCPS Consultation Response', Edinburgh, www.cosgrovecare.org.uk/wp-content/uploads/2022/01/anationalcareserviceforscotland-ccpsconsultationresponse.pdf [Accessed 12 December 2021].

Chapman, A. (2018) ‘Playing catch-up? Adult social care in Northern Ireland’, *Journal of the Institute of Public Administration of Ireland*, 66(3): 99–115.

Chaney, P.J. (2022) ‘Exploring the politicisation and territorialisation of adult social care in the United Kingdom: Electoral discourse analysis of state-wide and meso elections 1998–2019’, *Global Social Policy*, 22(1): 141–71.

Chang, M.-F. (2022) ‘Challenges and chances for local health and social care integration: Lessons from Greater Manchester, England’, *Journal of Integrated Care*, 30(2): 146–59.

Cheshire-Allen, M. and Calder, G. (2022) ‘“No one was clapping for us”: Care, social justice and family carer wellbeing during the COVID-19 pandemic in Wales’, *International Journal of Care and Caring*, 6(1–2): 49–66.

Cheung, A. (2020) *The Barnett formula*, London: Institute for Government, www.instituteforgovernment.org.uk/explainers/barnett-formula [Accessed 4 November 2022].

Christie, M. (2011) *Christie Commission on the future delivery of public services*, Edinburgh: Scottish Government, www.gov.scot/publications/commission-future-delivery-public-services/documents [Accessed 26 November 2020].

Clarke, J., Newman, J., Smith, N., Vidler, E. and Westmarland, L. (2007) *Creating citizen-consumers: Changing publics and changing public services*, London: SAGE.

CMA (Competition and Markets Authority) (2017) *Care homes market study: Final report*, London, https://assets.publishing.service.gov.uk/media/5a1fdf30e5274a750b82533a/care-homes-market-study-final-report.pdf [Accessed 7 November 2022].

Cochrane, F. (2020) *Breaking peace: Brexit and Northern Ireland*, Manchester: Manchester University Press.

Cole, A. and Stafford, I. (2015) *Devolution and governance: Wales between capacity and constraint*, Basingstoke: Palgrave Pivot.

Cole, A., Harguindéguy, J.-B., Stafford, I., Pasquier, R. and de Visscher, C. (2015) ‘States of convergence in territorial governance’, *Publius: The Journal of Federalism*, 45(2): 297–321.

Collie, F. (2019) *State of caring in Scotland 2019*, Edinburgh: Carers Scotland, www.carersuk.org/scotland/policy/policy-library/state-of-caring-in-scotland-2019 [Accessed 16 January 2021].

Cominetti, N., Gardiner, L. and Kelly, G. (2020) *What happens after the clapping finishes? The pay, terms and conditions we choose for our care workers*, London: Resolution Foundation.

Common Weal Care Reform Group and Smith, M. (2021) *Common Weal’s manifesto for a social care service*, Common Weal, https://discovery.dundee.ac.uk/ws/portalfiles/portal/56146500/Manifesto_for_a_National_Care_Service.pdf [Accessed 7 November 2022].

The Conservative and Unionist Party (2019) *Forward, together: Our plan for a stronger Britain and a prosperous future*, Manifesto, London, https://ucrel.lancs.ac.uk/wmatrix/ukmanifestos2017/localpdf/Conservatives.pdf [Accessed 25 November 2020].

Cooke, K., Iredale, R., Williams, R. and Wooding, N. (2019) *Measuring the mountain: What really matters in social care to individuals in Wales*, Pontypridd: University of South Wales.

COPNI (Commissioner for Older People for Northern Ireland) (2015) *Prepared to care: Modernising adult social care in Northern Ireland*, Belfast.

COSLA (Convention of Scottish Local Authorities) (2021) 'COSLA response to consultation on national care service', News, www.cosla.gov.uk/news/2021/cosla-response-to-consultation-on-national-care-service [Accessed 3 September 2022].

Courtin, E. and Knapp, M. (2017) 'Social isolation, loneliness and health in old age: A scoping review', *Health and Social Care in the Community*, 25(3): 799–812.

CQC (Care Quality Commission) (2017) *The state of health care and adult social care in England*, London: CQC, https://www.cqc.org.uk/sites/default/files/20171123_stateofcare1617_report.pdf [Accessed 16 February 2019].

Crowther, N. (2018) 'Don't panic! Why the social care crisis will not be solved by making a crisis out of social care', #socialcarefuture Blog, 14 March, https://socialcarefuture.blog/2018/03/14/dont-panic-why-the-social-care-crisis-will-not-be-solved-by-making-a-crisis-out-of-social-care [Accessed 9 August 2020].

Curry, N. and Oung, C. (2021) *Fractured and forgotten? The social care provider market in England*, London: Nuffield Trust, www.nuffieldtrust.org.uk/research/fractured-and-forgotten-the-social-care-provider-market-in-england [Accessed 6 December 2021].

Curtice, J. Scholes, A., Ratti, V., Cant, J., Bennett, M., Hinchcliffe, S. et al (2022) *British Social Attitudes Survey 39*, London: NatCen, https://natcen.ac.uk/our-research/research/british-social-attitudes/ [Accessed 2 December 2022].

Dahl, H.M. (2021) 'The "care crisis": Its scientific framing and silences', in L.L. Hansen and H.M. Dahl (eds) *A care crisis in the Nordic welfare states? Care work, gender equality and welfare state sustainability*, Bristol: Policy Press, pp 20–38.

Daly, M. (2020) 'COVID-19 and care homes in England: What happened and why?', *Social Policy & Administration*, 54(7): 985–98.

Daly, M. and Lewis, J. (2000) 'The concept of social care and the analysis of contemporary welfare states', *The British Journal of Sociology*, 51(2): 281–98.

Danermark, B., Ekström, M. and Karlsson, J.C. (2019) *Explaining society: Critical realism in the social sciences*, London: Routledge.

Dayan, M. and Heenan, D. (2019) *Change or collapse: Lessons from the drive to reform health and social care in Northern Ireland*, London: Nuffield Trust, www.nuffieldtrust.org.uk/research/change-or-collapse-lessons-from-the-drive-to-reform-health-and-social-care-in-northern-ireland [Accessed 18 June 2020].

Dayrell, C., Semino, E., Kinloch, K. and Baker, P. (2020) *Social care in UK public discourse*, Lancaster: University of Lancaster.

Demos (2009) *A constitution for social care*, London.

DH (Department of Health) (2009) *Shaping the future of care together*, London.

DH (2010) *A vision for adult social care: Capable communities and active citizens*, London.

DH (2012) *Transforming care: A national response to Winterbourne View Hospital*, London, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/213215/final-report.pdf [Accessed 22 July 2021].

DH (2018) *Domiciliary care workforce review: Northern Ireland 2016–2021*, Belfast, www.health-ni.gov.uk/sites/default/files/publications/health/Workforce%20Plan%20Domiciliary%20Care%202016%20-%202021.pdf [Accessed 2 June 2021].

DH (2022a) *Consultation on Power to people*, Belfast, www.health-ni.gov.uk/articles/power-people [Accessed 7 November 2022].

DH (2022b) *Quarterly direct payment statistics, December 2021*, Belfast, www.health-ni.gov.uk/publications/quarterly-direct-payments-statistics-december-2021 [Accessed 2 June 2021].

Department of Health and Social Services (1990) *People first: Community care in Northern Ireland in the 1990s*, Belfast: HMSO.

DHSC (Department of Health and Social Care) (2018) *Carers action plan: 2018–2020*, London, www.gov.uk/government/publications/carers-action-plan-2018-to-2020 [Accessed 7 November 2022].

DHSC (2021a) *Integration and innovation: Working together to improve health and social care for all*, London: The Stationery Office, www.gov.uk/government/publications/working-together-to-improve-health-and-social-care-for-all/integration-and-innovation-working-together-to-improve-health-and-social-care-for-all-html-version [Accessed 3 March 2022].

DHSC (2021b) *People at the heart of care: Adult social care reform*, White Paper, London: The Stationery Office, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1061870/people-at-the-heart-of-care-asc-reform-accessible-with-correction-slip.pdf [Accessed 3 March 2022].

DHSC (2021c) *Market sustainability and fair cost of care fund: Purpose and conditions 2022 to 2023*, London, www.gov.uk/government/publications/market-sustainability-and-fair-cost-of-care-fund-2022-to-2023/market-sustainability-and-fair-cost-of-care-fund-purpose-and-conditions-2022-to-2023 [Accessed 3 March 2022].

DHSC (2022) *Adult social care charging reform: Further details*, London, www.gov.uk/government/publications/build-back-better-our-plan-for-health-and-social-care/adult-social-care-charging-reform-further-details [Accessed 3 March 2022].

Dilnot, A. (2011) *Fairer care funding: The Report of the Commission on Funding of Care and Support* (Dilnot Report), London: The Stationery Office.

Drakeford, M. (2005) 'Wales and a third term of New Labour: Devolution and the development of difference', *Critical Social Policy*, 25(4): 497–506.

Dromey, J. and Hochlaf, D. (2018) *Fair care: A workforce strategy for social care*, Newcastle: IPPR North, www.ippr.org/research/publications/fair-care [Accessed 30 November 2020].

Elliott, I.C., Bottom, K.A., Carmichael, P., Liddle, J., Martin, S. and Pyper, R. (2022) 'The fragmentation of public administration: Differentiated and decentered governance in the (dis) United Kingdom', *Public Administration*, 100(1): 98–115.

Entwistle, T., Downe, J., Guarneros-Meza, V. and Martin, S. (2014) 'The multi-level governance of Wales: Layer cake or marble cake?', *British Journal of Politics and International Relations*, 16(2): 310–25.

Esping-Andersen, G. (1990) *The three worlds of welfare capitalism*, Cambridge: Polity Press.

Ettelt, S., Damant, J., Perkins, M., Williams, L. and Wittenberg, R. (2020) *Personalisation in care homes for older people: Final report*, London: Policy Innovation and Evaluation Research Unit, https://piru.ac.uk/assets/files/Personalisation_in_care_homes-Final-report.pdf [Accessed 22 February 2022].

Etzioni, A. (2012) 'A communitarian critique of human rights', in T. Cushman (ed) *Handbook of human rights*, London: Routledge, pp 153–8.

Fair Work Convention (2016) *Fair work framework 2016*, Edinburgh, www.fairworkconvention.scot/wp-content/uploads/2018/12/Fair-Work-Convention-Framework-PDF-Full-Version.pdf [Accessed 19 May 2022].

Feeley, D. (2021) *Independent review of adult social care in Scotland* (Feeley Report), Edinburgh: Scottish Government.

Ferguson, I. (2007) 'Increasing user choice or privatizing risk? The antinomies of personalization', *British Journal of Social* Work, 37(3): 387–403.

Ferguson, Z. (2019) 'The Scottish Civil Service', in G. Hassan (ed) *The story of the Scottish Parliament: The first two decades explained*, Edinburgh: Edinburgh University Press, pp 64–72.

Ferrant, G., Pesando, L.M. and Nowacka, K. (2014) *Unpaid care work: The missing link in the analysis of gender gaps in labour outcomes*, Boulogne-Billancourt: OECD Development Centre.

Fine, M.D. (2007) *A caring society? Care and the dilemmas of human service in the twenty-first century*, Basingstoke: Palgrave.

Flanagan, K., Uyarra, E. and Laranja, M. (2011) 'Reconceptualising the "policy mix" for innovation', *Research Policy*, 40(5): 702–13.

Flynn, S., Caton, S., Gillooly, A., Bradshaw, J., Hastings, R.P., Hatton, C. et al (2021) 'The experiences of adults with learning disabilities in the UK during the COVID-19 pandemic: Qualitative results from Wave 1 of the Coronavirus and people with learning disabilities study', *Tizard Learning Disability Review*, 26(4): 224–29.

Folbre, N. (2006) 'Measuring care: Gender, empowerment, and the care economy', *Journal of Human Development*, 7(2): 183–99.

Foster, D. (2021) *Reform of adult social care funding: Developments since July 2019 (England)*, London: House of Commons Library, https://commonslibrary.parliament.uk/research-briefings/cbp-8001 [Accessed 4 April 2022].

Foster, D. (2022) *Adult social care funding (England)*, London: House of Commons Library, https://researchbriefings.files.parliament.uk/documents/CBP-7903/CBP-7903.pdf [Accessed 3 September 2022].

Fox, A. (2018) *A new health and care system: Escaping the invisible asylum*, Bristol: Policy Press.

Fraser, G. (2019) 'Why won't Remainers talk about family', UnHerd, 22 February, https://unherd.com/2019/02/why-wont-remainers-talk-about-family [Accessed 12 May 2020].

Friedman, M. (2005) *Trying hard is not good enough: How to produce measurable improvements for customers and communities*, Victoria, BC: Trafford Publishing.

Future Care Capital (2018) *Facilitating care insight to develop caring economies*, London, https://futurecarecapital.org.uk/wp-content/uploads/2020/03/Full-Report-%E2%80%93-Facilitating-Care-Insight-to-Develop-Caring-Economies.pdf [Accessed 5 January 2022].

Gallagher, J. (2019) 'Devolution: An assessment', in G. Hassan (ed) *The story of the Scottish Parliament: The first two decades explained*, Edinburgh: Edinburgh University Press, pp 242–51.

Gerlich, K. and Farquharson, C. (2020) 'Experts debate: Registering care workers', *The Guardian*, 27 February, www.theguardian.com/society/2020/feb/27/experts-debate-registering-care-workers [Accessed 19 March 2022].

Giddens, A. (1990) *The consequences of modernity*, Chichester: John Wiley & Sons.

Giddens, A. and Pierson, C. (1998) *Conversations with Anthony Giddens: Making sense of modernity*, Stanford, CA: Stanford University Press.

Gilleard, C. and Higgs, P. (2010) 'Aging without agency: Theorizing the fourth age', *Aging and Mental Health*, 14(2): 121–8.

Gingrich, J.R. (2011) *Making markets in the welfare state: The politics of varying market reforms*, Cambridge: Cambridge University Press.

Glasby, J. (2007) *Understanding Health and Social Care*, Bristol: Policy Press.

Glasby, J. and Littlechild, R. (2016) *Direct payments and personal budgets: Putting personalisation into practice*, Bristol: Policy Press.

Glasby, J., Duffy, S. and Needham, C. (2011) 'Debate: A Beveridge report for the 21st century? The implications of self-directed support for future welfare reform', *Policy & Politics*, 39(4): 613–17.

Glasby, J., Zhang, Y.N., Bennett, M.R. and Hall, P. (2021) 'A lost decade? A renewed case for adult social care reform in England', *Journal of Social Policy*, 50(2): 406–37.

Gori, C., Fernandez, J. and Wittenberg, R. (2016) 'Conclusion: Looking ahead in long-term care policies', in C. Gori, J. Fernandez and R. Wittenberg (eds) *Long-term care reforms in OECD countries*, Bristol: Policy Press, pp 293–306.

Gorski, P.S. (2013) 'What is critical realism? And why should you care?', *Contemporary Sociology*, 42(5): 658–70.

Gray, A.M. and Birrell, D. (2013) *Transforming adult social care: Contemporary policy and practice*, Bristol: Policy Press.

Greenhalgh, T. (2002) 'Understanding family values', *Young Consumers*, 4(1): 13–20.

Gregory, A. (2022) 'Number of adults with dementia to exceed 150m by 2050, study finds', *The Guardian*, 6 January, www.theguardian.com/society/2022/jan/06/number-adults-with-dementia-exceed-150-million-2050-study?utm_term=AutofeedandCMP=twt_b-gdnnewsandutm_medium=Socialandutm_source=Twitter [Accessed 7 January 2022].

Hacker, J.S. (2004) 'Privatizing risk without privatizing the welfare state: The hidden politics of social policy retrenchment in the United States', *American Political Science Review*, 98(2): 243–60.

Hamblin, K. (2019) *Adult social care and wellbeing policy in the four nations of the UK*, Sheffield: University of Sheffield, http://circle.group.shef.ac.uk/wp-content/uploads/2019/12/WPO_final-v2.pdf [Accessed 1 December 2021].

Hamblin, K. (2020) *Care system sustainability: What role for technology? An evidence review*, Sustainable Care Paper 3, Sheffield: University of Sheffield.

Hanssen, J.I., Pettersen, P.A. and Tveit Sandvin, J. (2001) 'Welfare municipalities: Economic resources or party politics? Norwegian local government social programs of the 1920s', *International Journal of Social Welfare*, 10(1): 27–44.

Harvey, M. (2020) 'Devolution', in M. Keating (ed) *The Oxford handbook of Scottish politics*, Oxford: Oxford University Press, pp 371–85.

Hassan, G. (2019) *The story of the Scottish Parliament: The first two decades explained*, Edinburgh: Edinburgh University Press.

Hassan, G. and Shaw, E. (2020) 'The Scottish Labour Party', in M. Keating (ed) *The Oxford handbook of Scottish politics*, Oxford: Oxford University Press, pp 255–77.

Hastings, A. (1997) *The construction of nationhood: Ethnicity, religion and nationalism*, Cambridge: Cambridge University Press.

Hayes, L., Johnson, E. and Tarrant, A. (2019) *Professionalisation at work in adult social care*, London: GMB, www.gmb.org.uk/sites/default/files/Professionalisation_at_Work_0309.pdf [Accessed 12 February 2022].

Heald, D. (2020) 'The politics of Scotland's public finances', in M. Keating (ed) *The Oxford handbook of Scottish politics*, Oxford: Oxford University Press, pp 512–42.

Health and Social Care and Housing, Communities and Local Government Committees (2018) *Long-term funding of adult social care*, London: The Stationery Office, https://publications.parliament.uk/pa/cm201719/cmselect/cmcomloc/768/768.pdf [Accessed 22 May 2019].

Health and Social Care Board (2015) *A managed change: An agenda for creating a sustainable basis for domiciliary care in Northern Ireland*, Belfast.

Health and Social Care Board (2016) *eHealth and care strategy for Northern Ireland*, Belfast.

Health and Social Care Northern Ireland (2011) *Transforming your care: A review of health and social care in Northern Ireland*, Belfast: Northern Ireland Executive.

Health Foundation, The (2021) *Social care funding gap*, London, www.health.org.uk/news-and-comment/charts-and-infographics/REAL-social-care-funding-gap [Accessed 8 June 2022].

Heenan, D. and Birrell, D. (2018) *The integration of health and social care in the UK*, London: Macmillan.

Heitmueller, A. (2007) 'The chicken or the egg? Endogeneity in labour market participation of informal carers in England', *Journal of Health Economics*, 26(3): 536–59.

HM Government (2007) *Putting people first: A shared vision and commitment to the transformation of adult social care*, London: The Stationery Office.

HM Government (2009) *Shaping the future of care together*, London: The Stationery Office.

HM Government (2010) *Building the National Care Service*, London: The Stationery Office.

HM Government (2012) *Caring for our future: Reforming care and support*, London: The Stationery Office.

HM Government (2019) *Review of UK government union capability* (Dunlop Review), London, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/972987/Lord_Dunlop_s_review_into_UK_Government_Union_Capability.pdf [Accessed 20 March 2022].

HM Government (2021) *Build back better: Our plan for health and social care*, London: Department of Health and Social Care.

HM Government (2022) Health and Care Act, London: The Stationery Office.

HM Treasury (2016) 'Country and regional analysis', www.gov.uk/government/collections/country-and-regional-analysis [Accessed 13 November 2021].

HM Treasury (2017) 'Public expenditure Statistical analyses 2017', London: HMSO, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/630570/60243_PESA_Accessible.pdf

HM Treasury (2022) *Autumn Statement*, London: HM Treasury, https://www.gov.uk/government/publications/autumn-statement-2022-documents/autumn-statement-2022-html#:~:text=The%20Autumn%20Statement%20sets%20out%20a%20package%20of%20targeted%20support,bill%20increases%20following%20the%20revaluation. [Accessed 24 November 2022].

Hochschild, A.R. (2015) 'Global care chains and emotional surplus value', in D. Engster and T. Metz (eds) *Justice, politics, and the family*, London: Routledge, pp 249–61.

Hoggett, P. (2006) 'Conflict, ambivalence, and the contested purpose of public organizations', *Human Relations*, 59(2): 175–94.

Holmes, J. (2021) *Brexit and the end of the transition period: what does it mean for the health and care system?* London: King's Fund, https://www.kingsfund.org.uk/publications/articles/brexit-end-of-transition-period-impact-health-care-system [Accessed 23 November 2022].

Holthman, G. (2018) *Paying for social care: An independent report commissioned by the Welsh Government*, Cardiff: Welsh Government.

Housden, P. (2014) 'This is us: A perspective on public services in Scotland', *Public Policy & Administration*, 29(1): 64–74.

Howlett, M. and Rayner, J. (2007) 'Design principles for policy mixes: Cohesion and coherence in "new governance arrangements"', *Policy and Society*, 26(4): 1–18.

Howlett, M. and Tosun, J. (eds) (2018) *Policy styles and policy-making: Exploring the linkages*, London: Routledge.

Howlett, M. and Tosun, J. (eds) (2021) *The Routledge handbook of policy styles*, London: Routledge.

Hudson, B. (2011) 'Big society: A concept in pursuit of a definition', *Journal of Integrated Care*, 19(5): 17–24.

Hudson, B. (2021) *Clients, consumers or citizens? The privatisation of adult social care in England*, Bristol: Policy Press.

Hudson, B., Hunter, D. and Peckham, S. (2019) 'Policy failure and the policy-implementation gap: Can policy support programs help?', *Policy Design and Practice*, 2(1): 1–14.

Humpherson, E. (2021) 'Glimmers of light for social care statistics', Office for Statistics Regulation, 8 July, https://osr.statisticsauthority.gov.uk/glimmers-of-light-for-adult-social-care-statistics [Accessed 4 January 2022].

Humphries, R. and Timmins, N. (2021) *Stories from social care leadership: Progress and pestilence and penury*, London: The King's Fund, www.kingsfund.org.uk/publications/social-care-leadership [Accessed 30 January 2022].

Hupe, P. and Hill, M. (2016) '"And the rest is implementation": Comparing approaches to what happens in policy processes beyond Great Expectations', *Public Policy & Administration*, 31(2): 103–21.

IFS (Institute for Fiscal Studies) (2017) *Public spending on adult social care in England*, London.

Independent Age (2015) *Moved to care: The impact of migration on the adult social care workforce*, London.

Independent Commission on Social Services in Wales (2010) *From vision to action: The report of the Independent Commission on Social Services in Wales*, Cardiff: Welsh Assembly Government.

ISER (Institute for Social and Economic Research) (2022) *Understanding society: Waves 1–11, 2009–2020 and harmonised BHPS: Waves 1–18, 1991-2009* [data collection], 16th edn, UK Data Service, University of Essex, SN: 6614, doi:10.5255/UKDA-SN-6614-17.

Jenson, J. (2015) 'Social innovation: redesigning the welfare diamond', in A. Nicholls, J. Simon and M. Gabriel (eds) *New frontiers in social innovation research*, Basingstoke: Palgrave Macmillan, pp 89–106.

Jenson, J. and Saint-Martin, D. (2003) 'New routes to social cohesion? Citizenship and the social investment state', *Canadian Journal of Sociology/ Cahiers canadiens de sociologie*, 28(1): 77–99.

Jones, R. and Lewis, H. (2019) 'Wales and the Welsh language: Setting the context', in R. Jones and H. Lewis (eds) *New geographies of language*, London: Springer, pp 95–145.

Jordan, A.G. and Richardson, J.J. (1983) 'Policy communities: The British and European policy style', *Policy Studies Journal*, 11(4): 603–15.

Joseph, J. and McGregor, J.A. (2019) *Wellbeing, resilience and sustainability: The new trinity of governance*, Cham: Springer Nature Switzerland AG.

Karlsberg Schaffer, S. (2015) 'The effect of free personal care for the elderly on informal caregiving', *Health Economics*, 24: 104–17.

Katzenstein, P.J. (2016) *Small states in world markets: Industrial policy in Europe*, New York: Cornell University Press.

Keating, M. (2015) 'The political economy of small states in Europe', in M. Keating (ed) *Small states in the modern world*, Cheltenham: Edward Elgar, pp 3–20.

Keating, M. and Wilson, A. (2014) 'Regions with regionalism? The rescaling of interest groups in six European states', *European Journal of Political Research*, 53(4): 840–57.

Keating, M., Cairney, P. and Hepburn, E. (2009) 'Territorial policy communities and devolution in the UK', *Cambridge Journal of Regions, Economy and Society*, 2(1): 51–66.

Keating, M., Cairney, P. and Hepburn, E. (2012) 'Policy convergence, transfer and learning in the UK under devolution', *Regional and Federal Studies*, 22(3): 289–307.

Keating, N., McGregor, J.A. and Yeandle, S. (2021) 'Sustainable care: Theorising the wellbeing of caregivers to older persons', *International Journal of Care and Caring*, 5(4): 611–30.

Kelly, D. and Kennedy, J. (2017) *Power to people: Proposals to reboot adult care and support in NI*, Belfast: Department of Health, www.health-ni.gov.uk/sites/default/files/publications/health/power-to-people-full-report.PDF [Accessed 4 November 2022].

King's Fund, The (2021) *Social Care 360*, London, www.kingsfund.org.uk/sites/default/files/2021-05/social-care-360-2021_0.pdf [Accessed 20 February 2022].

Kingston, A., Comas-Herrera, A. and Jagger, C. J. (2018) 'Forecasting the care needs of the older population in England over the next 20 years: Estimates from the Population Ageing and Care Simulation (PACSim) modelling study', *The Lancet Public Health*, 3(9): e447–e455.

Kirkegaard, S. and Andersen, D. (2018) 'Co-production in community mental health services: Blurred boundaries or a game of pretend?', *Sociology of Health and Illness*, 40(5): 828–42.

Kittay, E.F. (2013) *Love's labor: Essays on women, equality and dependency*, Abingdon: Routledge.

Knapp, M., Hardy, B. and Forder, J. (2001) 'Commissioning for quality: Ten years of social care markets in England', *Journal of Social Policy*, 30(2): 283–306.

Knapp, M., Cyhlarova, E., Comas-Herrera, A. and Lorenz-Dant, K. (2021) *Crystallising the case for deinstitutionalisation: COVID-19 and the experiences of persons with disabilities*, London: Care Policy and Evaluation Centre, www.lse.ac.uk/cpec/assets/documents/CPEC-Covid-Desinstitutionalisation.pdf [Accessed 18 April 2022].

Knijn, T. and Ungerson, G. (1997) 'Introduction: Care work and gender in welfare regimes', *Social Politics*, 4(3): 323–7.

Kotecha, V. (2020) 'The hidden profits behind collapsing care homes', Centre for Health and the Public Interest blog, 28 May, https://chpi.org.uk/blog/the-hidden-profits-behind-collapsing-care-homes [Accessed 2 June 2021].

Kröger, T. (2011) 'Retuning the Nordic welfare municipality: Central regulation of social care under change in Finland', *International Journal of Sociology and Social Policy*, 31(3/4): 148–59.

Laffin, M. (2004) 'Is regional centralism inevitable? The case of the Welsh Assembly', *Regional Studies*, 38(2): 213–23.

Laing Buisson (2022a) *Care homes for older people: UK market report*, London.

Laing Buisson (2022b) *Impact assessment of the implementation of Section 18(3) of the Care Act 2014 and Fair Cost of Care*, London.

Laslett, B. and Brenner, J. (1989) 'Gender and social reproduction: Historical perspectives', *Annual Review of Sociology*, 15(1): 381–404.

Law Commission, The (2011) *Adult social care*, London: The Stationery Office, https://s3-eu-west-2.amazonaws.com/lawcom-prod-storage-11jsxou24uy7q/uploads/2015/03/lc326_adult_social_care.pdf [Accessed 8 November 2021].

Lee, T. and Stoye, G. (2017) *UK health and social care spending*, London: Institute for Fiscal Studies.

Leece, J. (2010) 'Paying the piper and calling the tune: Power and the direct payment relationship', *British Journal of Social Work*, 40(1): 188–206.

Lemmon, E. (2020) 'Utilisation of personal care services in Scotland: The influence of unpaid carers', *Journal of Long-Term Care*, 54–69, doi: http://doi.org/10.31389/jltc.23.

Lemmon, E. and Bell, D. (2019) *Variations in domiciliary free personal care across Scottish local authorities*, Working Paper 91, Centre for Population Change, January, www.cpc.ac.uk/docs/2019_WP91_Variations_in_domiciliary_free_personal_care_across_Scottish_Local_Authorities_Bell.pdf [Accessed 19 September 2021].

LE Wales (2020) *Use of additional funding for social care*, Cardiff: Welsh Government, https://gov.wales/sites/default/files/publications/2021-04/use-of-additional-funding-for-social-care-final-report.pdf [Accessed 7 November 2022].

Lewis, J. (1992) 'Gender and the development of welfare regimes', *Journal of European Social Policy*, 2(3): 159–73.

Lewis, J. and Glennerster, H. (1996) *Implementing the new community care*, Buckingham: Open University Press.

Lipsky, M. (1980) *Street-level bureaucracy: Dilemmas of the individual in public services*, New York: Russell Sage Foundation.

Llewellyn, M., Verity, F. and Wallace, S. (eds) (2020) Evaluation of the Social Services and Well-being (Wales) Act 2014: Literature review, Cardiff. Welsh Government, GSR report number 60/2020, https://gov.wales/evaluation-social-services-and-well-being-wales-act-2014-literature-review [Accessed 12 February 2021].

Lowndes, V. and Lemprière, M. (2018) 'Understanding variation in processes of institutional formation', *Political Studies*, 66(1): 226–44.

Macmillan, R. and Paine, A.E. (2021) 'The third sector in a strategically selective landscape: The case of commissioning public services', *Journal of Social Policy*, 50(3): 606–26.

Mahoney, J. and Thelen, K. (2010) 'A theory of gradual institutional change: Explaining institutional change', *Ambiguity, Agency, and Power*, 1: 1–37.

Malone, S. and Hayes, M. (2017) 'Integrated care partnerships Northern Ireland - leading integration: Delivering better outcomes', *International Journal of Integrated Care*, 17(5): 1-8.

Mansell, J. and Beadle-Brown, J. (2004) 'Person centred planning or person-centred action? Policy and practice in intellectual disability services', *Journal of Applied Research in Intellectual Disabilities*, 17(1): 23–6.

Manthorpe, J., Woolham, J., Norrie, C. and Samsi, K. (2020) 'Family matters: Personal assistants' experiences of engaging and working with their employers' families', *International Journal of Care and Caring*, 4(4): 497–511.

Marczak, J., Fernandez, J.L., Manthorpe, J., Brimblecombe, N., Moriarty, J., Knapp, M. et al (2022) 'How have the Care Act 2014 ambitions to support carers translated into local practice? Findings from a process evaluation study of local stakeholders' perceptions of Care Act implementation', *Health and Social Care in the Community*, 30(5): e1711–e1720.

Marsh, D. (2008) 'Understanding British government: Analysing competing models', *The British Journal of Politics and International Relations*, 10(2): 251–68.

McConnell, A. (2010) *Understanding policy success: Rethinking public policy*, Basingstoke: Macmillan International Higher Education.

McConnell, A., Grealy, L. and Lea, T. (2020) 'Policy success for whom? A framework for analysis', *Policy Sciences*, 53(4): 589–608.

McCormick, J., McDowell, E. and Harris, A. (2009) *Policies for peace of mind? Devolution and older age in the UK*, London: Institute for Public Policy Research, www.ippr.org/publications/policies-for-peace-of-mind-devolution-and-older-age-in-the-uk [Accessed 17 June 2019].

McGarvey, N. (2019) 'British political tradition and Scottish local government', in G. Hassan (ed) *The story of the Scottish Parliament: The first two decades explained*, Edinburgh: Edinburgh University Press, pp 116–22.

McHale, J. and Noszlopy, L. (2021) *Adult social care provision under pressure: Lessons from the pandemic*, Birmingham: University of Birmingham, www.birmingham.ac.uk/documents/college-artslaw/law/research/adult-social-care-provision-under-pressure-lessons-from-the-pandemic-november-2021.pdf [Accessed 20 January 2022].

Miller, R., Brown, H. and Mangan, C. (2016) *Integrated care in action: A practical guide for health, social care and housing support*, London: Jessica Kingsley Publishers.

Miller, R., Glasby, J. and Dickinson, H. (2021) 'Integrated health and social care in England: Ten years on', *International Journal of Integrated Care*, 21(4): 6, 1–9.

Miller, R., Williams, I., Allen, K. and Glasby, J. (2013) 'Evidence, insight, or intuition? Investment decisions in the commissioning of prevention services for older people', *Journal of Care Services Management*, 7(4): 119–27.

Ministry of Housing and Local Government (1968) *Report of the Interdepartmental Committee on Local Authorities and Allied Personal Social Services* (Seebohm Report), London: The Stationery Office.

Morris, J. (1993) *Independent lives: Community care and disabled people*, Basingstoke: Macmillan.

Moon, D.S. and Evans, T. (2017) 'Welsh devolution and the problem of legislative competence', *British Politics*, 12(3): 335–60.

Morel, N. (2007) 'Providing coverage against new social risks in Bismarckian welfare states: The case of long-term care', in K. Armingeon and G. Bonoli (eds) *The politics of post-industrial welfare states*, London: Routledge, pp 245–65.

Morphet, J. (2021) *The impact of COVID-19 on devolution: Recentralising the British state beyond Brexit?*, Bristol: Policy Press.

Moussa, M.M. (2019) 'The relationship between elder care-giving and labour force participation in the context of policies addressing population ageing: A review of empirical studies published between 2006 and 2016', *Ageing & Society*, 39(6): 1281–310.

Mulhall, S. and Swift, A. (1992) Liberals and communitarians, Oxford: Blackwell Oxford.

NAO (National Audit Office) (2021) *The adult social care market in England*, London, www.nao.org.uk/report/adult-social-care-markets [Accessed 20 January 2022].

Needham, C. (2007) *The reform of public services under New Labour: Narratives of consumerism*, Basingstoke: Palgrave.

Needham, C. (2011) *Personalising public services: Understanding the personalisation narrative*, Bristol: Policy Press.

Needham, C. and Carr, S. (2009) *Co-production: An emerging evidence base for adult social care transformation*, London: Social Care Institute for Excellence.

Needham, C. and Dickinson, H. (2018) '"Any one of us could be among that number": Comparing the policy narratives for individualized disability funding in Australia and England', *Social Policy & Administration*, 52(3): 731–49.

Needham, C. and Hall, P. (2022) 'Dealing with drift: Comparing social care reform in the four nations of the UK', *Social Policy & Administration*, https://doi.org/10.1111/spol.12858.

Needham, C., Allen, K., Burn, E., Hall, K., Mangan, C., Al-Janabi, H. et al (2022) 'How do you shape a market? Explaining local state practices in adult social care', *Journal of Social Policy*, 1–21, doi:10.1017/S0047279421000805.

Nesom, S. and MacKillop, E. (2021) 'What matters in the implementation of sustainable development policies? Findings from the Well-Being of Future Generations (Wales) Act, 2015', *Journal of Environmental Policy and Planning*, 23(4): 432–45.

NIHR (National Institute of Health Research) (2021) *Improving the quality of care homes, What does the evidence tell us?*, London.

Noddings, N. (2013) *Caring: A relational approach to ethics and moral education*, Berkeley, CA: University of California Press.

Northern Ireland Executive (2020) *New decade, new approach*, Belfast: Northern Ireland Executive, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/856998/2020-01-08_a_new_decade__a_new_approach.pdf [Accessed 30 October 2021].

Nuffield Trust (2020) 'How much social care does each country fund?', Nuffield Trust, 28 March, https://www.nuffieldtrust.org.uk/news-item/how-much-social-care-does-each-country-fund

O'Dowd, A. (2016) 'NHS is pushed to the limit as adult social care system reaches "tipping point", warns regulator', *British Medical Journal*, 355: i5553.

O'Neil, M., Gerstein Pineau, M., Kendall-Taylor, J., Volmert, D. and Stevens, A. (2017) *Finding a better frame: How to create more effective messages on homelessness in the United Kingdom*, London: Crisis.

ONS (Office for National Statistics) (2015) 'Internal migration, England and Wales: Year ending June 2015', www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/migrationwithintheuk/bulletins/internalmigrationbylocalauthoritiesinenglandandwales/yearendingjune2015 [Accessed 14 May 2021].

ONS (2016) '2011 Census analysis: Internal and international migration of older residents (aged 65 and over) in England and Wales in the year prior to the 2011 Census', http://www.ons.gov.uk/ons/rel/census/2011-census-analysis/internal-and-international-migration-of-older-residents--aged-65-and-over--in-england-and-wales-in-the-year-prior-to-the-2011-census/story-on-internal-and-international-migration.html [Accessed 14 May 2021].

ONS (2020) 'Care homes and estimating the self-funding population, England: 2019 to 2020', www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/socialcare/articles/carehomesandestimatingtheselffundingpopulationengland/2019to2020 [Accessed 14 May 2021].

ONS (2021a) 'Mid-year population estimates (2020), by Welsh local authorities, English regions and UK countries, by single year of age and sex', https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/bulletins/annualmidyearpopulationestimates/mid2020 [Accessed 28 February 2022].

ONS (2021b) 'Estimates of the population for the UK, England and Wales, Scotland and Northern Ireland', www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesforukenglandandwalessco tlandandnorthernireland [Accessed 18 February 2022].

ONS (2022) 'GDP – Data tables', www.ons.gov.uk/economy/grossdomesticproductgdp/datasets/uksecondestimateofgdpdatatables [Accessed 2 December 2022].

Orloff, A.S. (1993) 'Gender and the social rights of citizenship: The comparative analysis of gender relations and welfare states', *American Sociological Review*, 58(3): 303–28.

Ouchi, W.G. (1980) 'Markets, bureaucracies and clans', *Administrative Science*, 25(1): 129–41.

Oung, C., Schlepper, L. and Curry, N. (2020) *Adult social care in the four countries of the UK*, Explainer Series, London: Nuffield Trust.

Paun, A. and Munro, J. (2015) *Governing in an ever looser union: How the four governments of the UK co-operate, negotiate and compete*, London: Institute for Government, www.instituteforgovernment.org.uk/sites/default/files/publications/Governing%20in%20an%20ever%20looser%20union%20-%20final.pdf [Accessed 18 December 2021].

Paun, A., Rutter, J. and Nicholl, A. (2016) *Devolution as a policy laboratory: Evidence sharing and learning between the UK's four governments*, London: Institute for Government, Alliance for Useful Evidence and Carnegie UK Trust, www.instituteforgovernment.org.uk/sites/default/files/publications/Alliance%20Policy%20Laboratory%20paper%20v3.pdf [Accessed 18 December 2021].

Pearson, C. (2000) 'Money talks? Competing discourses in the implementation of direct payments', *Critical Social Policy*, 20(4): 459–77.

Pearson, C. (2004) 'Keeping the cash under control: What's the problem with direct payments in Scotland?', *Disability & Society*, 19(1): 3–14.

Pearson, C. and Ridley, J. (2017) 'Is personalization the right plan at the wrong time? Re-thinking cash-for-care in an age of austerity', *Social Policy & Administration*, 51(7): 1042–59.

Pearson, C. and Watson, N. (2018) 'Implementing health and social care integration in Scotland: Renegotiating new partnerships in changing cultures of care', *Health and Social Care in the Community*, 26(3): e396–e403.

Pearson, C., Watson, N. and Manji, K. (2018) 'Changing the culture of social care in Scotland: Has a shift to personalization brought about transformative change?', *Social Policy & Administration*, 52(3): 662–76.

Pearson, C., Brunner, R., Porter, T. and Watson, N. (2020) 'Personalisation and the promise of independent living: Where now for cash, care and control for disability organisations across the UK?', *Scandinavian Journal of Disability Research*, 22(1): 285–95.

Peng, I. (2016) 'Testing the limits of welfare state changes: The slow-moving immigration policy reform in Japan', *Social Policy & Administration*, 50(2): 278–95.

Pettigrew, A., McKee, L. and Ferlie, E. (1988) 'Understanding change in the NHS', *Public Administration*, 66(3): 297–317.

Phillips, A. and Morgan, G. (2014) 'Co-production within health and social care – The implications for Wales?', *Quality in Ageing and Older Adults*, 15(1): 10–20.

Pierson, C. (2021) *The next welfare state? UK welfare after COVID-19*, Bristol: Policy Press.

Plant, R., Lesser, H. and Taylor-Gooby, P. (1980) *Political philosophy and social welfare: Essays on the normative basis of welfare provision*, London: Routledge & Keegan Paul.

Pollitt, C. (2002) 'Clarifying convergence. Striking similarities and durable differences in public management reform', *Public Management Review*, 3(4): 471–92.

Pressman, J.L. and Wildavsky, A.B. (1973) *Implementation: How great expectations in Washington are dashed in Oakland*, Berkeley, CA: University of California Press.

Prior, L. (2003) *Using documents in social research*, London: SAGE.

Public Health Scotland (2021) *Care home census for adults in Scotland*, Edinburgh, https://publichealthscotland.scot/publications/care-home-census-for-adults-in-scotland/care-home-census-for-adults-in-scotland-statistics-for-2011-to-2021-part-1 [Accessed 25 January 2022].

Razavi, S. (2007) The political and social economy of care in a development context: Conceptual issues, research questions and policy options, Geneva: UN Research Institute for Social Development.

Razavi, S. (2011) 'Rethinking care in a development context: An introduction', *Development and Change*, 42(4): 873–903.

Razavi, S. and Staab, S. (2012) *Global variations in the political and social economy of care: Worlds apart*, London: Routledge.

Reed, S., Oung, C., Davies, J., Dayan, M. and Scobie, S. (2021) *Integrating health and social care: A comparison of policy and progress across the four countries of the UK*, London: Nuffield Trust, https://www.nuffieldtrust.org.uk/files/2021-12/integrated-care-web.pdf [Accessed 28 February 2022].

Rennie, J. (2022) 'Northumbria NHS Trust to be first in England to provide home care services to community', homecare.co.uk, 13 January, www.homecare.co.uk/news/article.cfm/id/1663284/northumbria-nhs-trust-home-care [Accessed 14 January 2022].

Rhodes, R.A.W. (1996) 'The new governance: Governing without government', *Political Studies*, 44(4): 652–67.

Richardson, J. (2013) *Policy styles in Western Europe*, London: Routledge.

Richardson, J. (2018) 'The changing British policy style: From governance to government?', *British Politics*, 13(2): 215–33.

Roantree, B. and Vira, K. (2018) *The rise and rise of women's employment in the UK*, London: Institute for Fiscal Studies, https://ifs.org.uk/publications/rise-and-rise-womens-employment-uk [Accessed 19 March 2022].

Roberts, J. (2020) 'The leadership of place and people in the new English combined authorities', *Local Government Studies*, 46(6): 995–1014.

Robertson, R., Appleby, J., Evans, H. and Hemmings, N. (2019) *Public satisfaction with the NHS and social care in 2018: Results from the British Social Attitudes Survey*, London: The King's Fund and Nuffield Trust.

Robson, C.M.K. (2016) *Real world research: A resource for users of social research methods in applied settings*, Chichester: John Wiley & Sons.

Rocco, P. (2017) 'Informal caregiving and the politics of policy drift in the United States', *Journal of Aging and Social Policy*, 29(5): 413–32.

Rodríguez-Pose, A. and Gill, N. (2003) 'The global trend towards devolution and its implications', *Environment and Planning C: Government and Policy*, 21(3): 333–51.

Rose, R. (1993) *Lesson-drawing in public policy: A guide to learning across time and space*, Chatham: Chatham House Publishers.

Rummery, K. and Fine, M. (2012) 'Care: A critical review of theory, policy and practice', *Social Policy & Administration*, 46(3): 321–43.

Rummery, K. and McAngus, C. (2015) 'The future of social policy in Scotland: Will further devolved powers lead to better social policies for disabled people?', *Political Quarterly*, 86(2): 234–9.

Sabatier, P.A. and Weible, C.M. (2019) 'The advocacy coalition framework: Innovations and clarifications', in Sabatier, P.A. (ed) *Theories of the policy process*, London: Routledge, pp 189–220.

Sayer, A. (1992) *Method in social science: A realist approach*, London: Psychology Press.

Sayer, A. (1999) *Realism and social science*, London: SAGE.

SCIE (Social Care Institute for Excellence) (2010) *At a Glance 31: Enabling risk, ensuring safety: Self-directed support and personal budgets*, London, www.scie.org.uk/publications/ataglance/ataglance31.asp [Accessed 20 June 2021].

Schickler, E. (2001) *Disjointed pluralism: Institutional innovation in the US Congress*, Princeton, NJ: Princeton University Press.

Schmidt, V.A. (2008) 'Discursive institutionalism: The explanatory power of ideas and discourse', *Annual Review of Political Science*, 11: 303–26.

Scottish Executive (2001) *Fair care for older people*, Edinburgh.

Scottish Executive (2006a) *Care 21: The future of unpaid care in Scotland*, Edinburgh.

Scottish Executive (2006b) *Changing lives: Report of the 21st Century Social Work Review*, Edinburgh, www.gov.scot/publications/changing-lives-report-21st-century-social-work-review [Accessed 13 February 2022].

Scottish Government (2010a) *Caring together: The carers strategy for Scotland 2010–2015*, Edinburgh.

Scottish Government (2010b) *Reshaping care for older people: A programme for change 2011–2021*, Edinburgh.

Scottish Government (2010c) *Self-directed support: A national strategy for Scotland*, Edinburgh.

Scottish Government (2012) *Integration of adult health and social care in Scotland: Consultation on proposals*, Edinburgh.

Scottish Government (2013) *Free personal and nursing care, Scotland, 2011–12*, https://www.gov.scot/publications/free-personal-nursing-care-scotland-2011-2012/pages/12/ [Accessed 28 February 2022].

Scottish Government (2016) *Health and social care delivery plan*, Edinburgh, www.gov.scot/binaries/content/documents/govscot/publications/strategy-plan/2016/12/health-social-care-delivery-plan/documents/00511950-pdf/00511950-pdf/govscot%3Adocument/00511950.pdf [Accessed 13 February 2022].

Scottish Government (2021) *A National Care Service for Scotland: Consultation*, Edinburgh.

Scottish Government (2022) *Free personal and nursing care, Scotland, 2020–21*, https://www.gov.scot/publications/free-personal-nursing-care-scotland-2020-21/documents/ [Accessed 28 February 2022].

Scottish Government (2022) 'National Care Service consultation responses published', Edinburgh, www.gov.scot/news/national-care-service-consultation-responses-published [Accessed 18 February 2022].

Scottish Government and COSLA (Convention of Scottish Local Authorities) (2021) *Enabling, connecting and empowering: Care in the digital age*, Edinburgh: Scottish Government.

Scottish Parliament Health, Social Care and Sport Committee (2021) *Official report*, 28 September, www.parliament.scot/api/sitecore/CustomMedia/OfficialReport?meetingId=13339 [Accessed 7 November 2022].

Scully, R. and Wyn Jones, R. (2015) 'The public legitimacy of the National Assembly for Wales', *Journal of Legislative Studies*, 21(4): 515–33.

Self Directed Support Scotland (2020) *My support my choice: People's experiences of self-directed support and social care in Scotland*, Edinburgh, www.sdsscotland.org.uk/wp-content/uploads/2020/10/MSMC-Scotland-Report-2020.pdf [Accessed 1 March 2022].

Series, L. (2019a) 'Disability and human rights', in N. Watson and S. Vehmas (eds) *Routledge handbook of disability studies*, London: Routledge, pp 72–88.

Series, L. (2019b) 'On detaining 300,000 people: The liberty protection safeguards', *International Journal of Mental Health and Capacity Law*, 25: 82–123.

Series, L. (2022) *Deprivation of liberty in the shadow of the institution*, Bristol: Bristol University Press.

Sewerin, S. (2020) 'Understanding complex policy mixes: Conceptual and empirical challenges', in G. Capano and M. Howlett (eds) *A modern guide to public policy*, Cheltenham: Edward Elgar, pp 191–201.

Shakespeare, T., Stöckl, A. and Porter, T. (2018) 'Metaphors to work by: The meaning of personal assistance in England', *International Journal of Care and Caring*, 2(2): 165–79.

Shutt, J. and Liddle, J. (2019) 'Are combined authorities in England strategic and fit for purpose?', *Local Economy*, 34(2): 196–207.

Simonazzi, A. (2009) 'Care regimes and national employment models', *Cambridge Journal of Economics*, 33(2): 211–32.

Simons, J.J. and Green, M.C. (2018) 'Divisive topics as social threats', *Communication Research*, 45(2): 165–87.

Skills for Care (2021) *The state of the adult social care sector and workforce in England, 2021*, London: Skills for Care, www.skillsforcare.org.uk/adult-social-care-workforce-data-old/Workforce-intelligence/documents/State-of-the-adult-social-care-sector/The-State-of-the-Adult-Social-Care-Sector-and-Workforce-2021.pdf [Accessed 9 January 2022].

Sloan, B. (2021) '"Easing" duties and making dignity difficult: COVID-19 and the Care Act 2014', *Public Law*, 1: 37–46.

Smith, M. (2021) 'What is care?', Common Weal blog, 4 November, https://commonweal.scot/what-is-care [Accessed 7 November 2022].

#socialcarefuture (2019) *Talking about a brighter social care future*, www.camphillvillagetrust.org.uk/wp-content/uploads/2019/10/iC-SCF-report-2019-d-1.pdf [Accessed 18 November 2021].

Spencer-Lane, T. (2011) 'The Law Commission's final recommendations for a new adult social care statute', *Social Care and Neurodisability*, 2(4): 226–33.

St Denny, E. (2019) 'The Scottish Parliament and "new politics" at twenty', in G. Hassan (ed) *The story of the Scottish Parliament: The first two decades explained*, Edinburgh: Edinburgh University Press, pp 73–83.

Sussex, J., Burge, P., Lu, H., Exley, J., King, S. and RAND Europe (2019) *Public acceptability of health and social care funding options: Funding options for the NHS and social care in the UK*, London: The Health Foundation, www.health.org.uk/sites/default/files/upload/publications/2019/Public%20acceptability%20of%20health%20and%20social%20care%20funding%20options_0.pdf [Accessed 4 May 2020].

Sutherland, S. (1999) *With respect to old age – Report of the Royal Commission on Long-Term Care* (Sutherland Report), London: The Stationery Office.

Sutherland, S. (2008) 'Free personal and nursing care in Scotland', *European View*, 7(2): 297–302.

Talbot, C. (2010) *Theories of performance: Organizational and service improvement in the public domain*, Oxford: Oxford University Press.

Tallack, C. and Sturrock, D. (2022) *Does the cap fit? Analysing the government's proposed amendment to the English social care charging system*, London: The Health Foundation and Insitute for Fiscal Studies, www.health.org.uk/publications/reports/does-the-cap-fit-analysing-the-proposed-amendment [Accessed 18 September 2022].

Tapper, J. (2021) '"This is an attack on human rights": UK care homes still denying family visits to residents', *The Guardian*, 20 November, www.theguardian.com/society/2021/nov/20/uk-care-homes-deny-family-visits-human-rights [Accessed 15 March 2022].

Taylor-Gooby, P. (1994) 'Postmodernism and social policy: A great leap backwards?', *Journal of Social Policy*, 23(3): 385–404.

Tew, J., Duggal, S., Carr, S., Ercolani, M., Glasby, J., Kinghorn, P. et al (2019) *Implementing the Care Act (2014): Building social resources to prevent, reduce or delay needs for care and support in adult social care in England*, Birmingham: University of Birmingham.

Thelen, K. (2003) 'How institutions evolve: Insights from comparative-historical analysis', in J. Mahoney and D. Rueschemeyer (eds) *Comparative historical analysis in the social sciences*, Cambridge: Cambridge University Press, pp 208–40.

Theobald, H. and Luppi, M. (2018) 'Elderly care in changing societies: Concurrences in divergent care regimes – a comparison of Germany, Sweden and Italy', *Current Sociology*, 66(4): 629–42.

Thompson, S. and Hoggett, P. (1996) 'Universalism, selectivism and particularism: Towards a postmodern social policy', *Critical Social Policy*, 16(46): 21–42.

Tinker, A. (2002) 'The social implications of an ageing population', *Mechanisms of Ageing and Development*, 123(7): 729–35.

TLAP (Think Local, Act Personal) (2019) 'Payment cards as a means of managing a personal budget', London, www.thinklocalactpersonal.org.uk/_assets/Resources/SDS/TLAP-PaymentCardsFinal.pdf [Accessed 17 June 2020].

Triggle, N. (2019) 'Whorlton Hall: Hospital "abused" vulnerable adults', BBC News, 22 May.

Tronto, J.C. (1993) *Moral boundaries: A political argument for an ethic of care*, London: Routledge.

Tronto, J.C. (2013) *Caring democracy: Markets, equality, and justice*, New York: New York University Press.

TUC (Trades Union Congress) (2021) *A new deal for social care: A new deal for the workforce*, London, www.tuc.org.uk/sites/default/files/2021-09/Social%20care%20report%20KB%20comments%20and%20additions.pdf [Accessed 3 March 2022].

Turbett, C. (2021) 'National care service – Opportunity or setback?', Common Weal blog, 14 October, https://commonweal.scot/national-care-service-opportunity-or-setback [Accessed 7 November 2022].

Turnpenny, A. and Hussein, S. (2022) 'Migrant home care workers in the UK: A scoping review of outcomes and sustainability and implications in the context of Brexit', *Journal of International Migration and Integration*, 23: 23–42.

Ungerson, C. and Yeandle, S. (eds) (2007) *Cash for care in developed welfare states*, Basingstoke: Palgrave.

Unwin, J. (2018) *Kindness, emotions and human relationships*, Dunfermline: Carnegie UK Trust.

Verweij, M. and Thompson, M. (eds) (2006) *Clumsy solutions for a complex world: Governance, politics and plural perceptions*, London: Springer.

Vlachantoni, A. (2019) 'Unmet need for social care among older people', *Ageing & Society*, 39(4): 657–84.

Walshe, K., Coleman, A., McDonald, R., Lorne, C. and Munford, L.J.B. (2016) 'Health and social care devolution: The Greater Manchester experiment', *British Medical Journal*, 352, i1495.

Wanless, D. (2006) *Securing good care for older people* (Wanless Report), London: The King's Fund.

Watt, T. and Varrow, M. (2018) 'The "do nothing" option: How public spending on social care in England fell by 13% in 5 years', The Health Foundation blog, 29 May, www.health.org.uk/blogs/the-%E2%80%98do-nothing%E2%80%99-option-how-public-spending-on-social-care-in-england-fell-by-13-in-five-years [Accessed 9 January 2022].

Welsh Assembly Government (2003) *The review of health and social care in Wales*, Cardiff.

Welsh Assembly Government (2011) *Sustainable social services for Wales: A framework for action*, Cardiff.

Welsh Assembly Government (2020) *Connected communities*, Cardiff.

Wales Fiscal Analysis (2020) *The cost of free personal care: Lessons from Scotland*, Cardiff, www.cardiff.ac.uk/__data/assets/pdf_file/0003/2470152/fpnc_briefing_21102020.pdf [Accessed 18 February 2022].

Welsh Government (2003) *Review of health and social care in Wales*, Cardiff.

Welsh Government (2015a) *Well-being of Future Generations (Wales) Act 2015: Guidance*, Cardiff, https://gov.wales/well-being-future-generations-wales-act-2015-guidance [Accessed 18 January 2022].

Welsh Government (2015b) *Informed health and care: A digital health and social care strategy for Wales*, Cardiff.

Welsh Government (2019) *Social services: The national outcomes framework for people who need care and support and carers who need support*, Cardiff, https://gov.wales/sites/default/files/publications/2019-05/the-national-outcomes-framework-for-people-who-need-care-and-support-and-carers-who-need-support.pdf [Accessed 7 November 2022].

Welsh Government (2021a) *The co-operation agreement: 2021*, Cardiff.

Welsh Government (2021b) *Rebalancing care and support*, White Paper, Cardiff.

West, K. (2013) 'The grip of personalization in adult social care: Between managerial domination and fantasy', *Critical Social Policy*, 33(4): 638–57.

West, K. and Needham, C. (2017) 'Making it real or sustaining a fantasy? Personal budgets for older people', *International Journal of Sociology and Social Policy*, 37(11/12): 683–95.

White, C., Wray, J. and Whitfield, C. (2020) '"A fifty mile round trip to change a lightbulb": An exploratory study of carers' experiences of providing help, care and support to families and friends from a distance', *Health and Social Care in the Community*, 28(5): 1632–42.

Williams, F. (1989) *Social policy, a critical introduction: Issues of class, race and gender*, Oxford: Blackwell.

Wittenberg, R. (2016) 'Demand for care and support for older people', in C. Gori, J. Fernandez and R. Wittenberg (eds) *Long-term care reforms in OECD countries*, Bristol: Policy Press, pp 9–24.

Wright, J. (2020) *Technology in social care: A review of the UK policy landscape*, Sheffield: University of Sheffield.

Wright, J. (2021) 'The Alexafication of adult social care: Virtual assistants and the changing role of local government in England', *International Journal of Environmental Research and Public Health*, 18(2): 812.

Yanow, D. (1996) *How does a policy mean? Interpreting policy and organizational actions*, Washington, DC: Georgetown University Press.

Yanow, D. (2007) 'Interpretation in policy analysis: On methods and practice', *Critical Policy Analysis*, 1(1): 110–22.

Yeandle, S. (2016) 'From provider to enabler of care? Reconfiguring local authority support for older people and carers in Leeds, 2008 to 2013', *Journal of Social Service Research*, 42(2): 218–32.

Yeandle, S., Kröger, T. and Cass, B. (2012) 'Voice and choice for users and carers? Developments in patterns of care for older people in Australia, England and Finland', *Journal of European Social* Policy, 22(4): 432–45.

Yeates, N.J (2009) 'Women's migration, social reproduction and care', in S. Razavi (ed) *The gendered impacts of liberalization*, London: Taylor & Francis, pp 219–43.

Zarb, G. and Nadash, P. (1994) *Cashing in on independence: Comparing the costs and benefits of cash and services*, London: British Council of Organisations of Disabled People.

Zhang, Y. and Bennett, M. (2019) 'The likelihood of being a carer in adult life', in Carers UK, *Will I care? The likelihood of being a carer in adult life*, London: Carers UK, www.carersuk.org/images/News__campaigns/CarersRightsDay_Nov19_FINAL.pdf [Accessed 7 November 2022].

Index