Research Policy 54 (2025) 105152

Contents lists available at ScienceDirect

Research Policy

journal homepage: www.elsevier.com/locate/respol

Understanding the role of internal governance units in the process of social innovation: The case of Shared Lives Plus in England

Carl Purcell [a,*], Jill Manthorpe [a], Juliette Malley [b]

[a] King's College London, United Kingdom of Great Britain and Northern Ireland
[b] London School of Economics and Political Science, United Kingdom of Great Britain and Northern Ireland

ARTICLE INFO

Keywords:
Social innovation
Shared Lives
Internal governance unit
Innovation infrastructure
Social care
Innovation ecosystem

ABSTRACT

Amid increasing demand for public services and stretched resources policymakers often promote 'social innovation' to address these tensions. However, critics argue that social innovation may just be a 'fashionable concept' or 'buzzword' in public policy discourse and that more empirical research is needed to help improve our understanding of the actors and mechanisms that drive effective social innovations. In response this article draws upon a case study of the development of Shared Lives as an alternative national model of adult social care in England over the past 40 years. Drawing on interviews with 50 individuals carried-out between late-2021 and early-2023, including those involved in four different local schemes, we highlight the positive role played by the organisation Shared Lives Plus, which we conceptualise as an 'internal governance unit' (IGU), in terms of establishing and maintaining a 'community innovation infrastructure'. However, the example of Shared Lives also illustrates the difficult challenges IGUs can face in trying to move social innovations beyond an institutional 'niche'.

1. Introduction

The idea of social innovation has become increasingly attractive to policymakers and researchers over recent decades as novel solutions are sought to address social needs not met by market mechanisms or state-directed welfare systems (Ayob et al., 2016; Borzaga and Bodini, 2014; Jessop et al., 2013). However, critics argue that social innovation may just be a "fashionable concept" (Gurrutxaga and Galarraga, 2022) or "buzzword" (Pol and Ville, 2009; Baptista et al., 2019) and that public policy discourse invariably fails to adequately define social innovations or demonstrate any understanding of the discrete "actors and mechanisms" (Borzaga and Bodini, 2014) that make social, as opposed to commercial, innovations happen. This may itself reflect a lack of conceptual clarity across multiple disconnected studies of social innovations in what remains an emerging area within the broader field of innovation research (van der Have and Rubalcaba, 2016).

This article builds on recent efforts to outline the conceptual and methodological parameters of social innovation research (Tracey and Stott, 2017; Pel et al., 2020; van der Have and Rubalcaba, 2016) by responding to calls for further refinement through empirical investigation (Gurrutxaga and Galarraga, 2022). Our focus on Shared Lives (SL) also responds to calls for critical research that scrutinises public policy interventions (Baptista et al., 2019) and the bold claims often made regarding the transformative potential of social innovations in policy discourse (Ayob et al., 2016; Gurrutxaga and Galarraga, 2022; Pel et al., 2020). SL has been consistently promoted as an innovative approach to adult social care (ASC) by central government in England over the past decade (Department of Health and Social Care, 2021; 2023; HM Government, 2012). However, whilst this model has successfully spread across most local authority (LA) areas in England it remains very small despite the ambitions of its advocates. This prompted us to investigate the spread and scaling-up of SL.

In this article, we pay particular attention to the role played by Shared Lives Plus (SLP) a third sector organisation established in 1992 that has played a pivotal role in promoting SL as an alternative model of ASC. In focusing on the role of SLP, our aim is to deepen understanding of the development of social innovation 'ecosystems'. Drawing on Fligstein and McAdam's (2011) theory of strategic action fields we use the idea of internal governance units (IGUs) to locate the position of SLP within the ecosystem of SL. We also utilise Van de Ven et al.'s (2008) social system framework to identify the key contributions that SLP has made in terms of helping to establish, develop and maintain a

* Corresponding author at: NIHR Health and Social Care Workforce Research Unit, The Policy Institute, Virginia Woolf Building, 22 Kingsway, London WC2B 6NR, United Kingdom of Great Britain and Northern Ireland.
E-mail address: carl.purcell@kcl.ack.uk (C. Purcell).

https://doi.org/10.1016/j.respol.2024.105152
Received 31 December 2023; Received in revised form 23 October 2024; Accepted 4 November 2024
Available online 10 November 2024
0048-7333/© 2024 The Authors. Published by Elsevier B.V. This is an open access article under the CC BY license (http://creativecommons.org/licenses/by/4.0/).

'community infrastructure for innovation' and identify the constraints it has faced in terms of efforts to promote the wider use of SL. We conclude by arguing for studies of social innovation ecosystems to pay greater attention to IGUs in facilitating the spread and scale-up of social innovations.

1.1. Social innovation and the role of Internal Governance Units (IGUs)

Innovation studies have traditionally been interested in understanding the development and impact of novel technologies and products (Pel et al., 2020). Whilst social relations may be important in this process, they are not the primary object of study. In contrast, in the emerging field of social innovation research the development of social relations, systems, or structures to address a social need are considered as the innovation (Ayob et al., 2016; van der Have and Rubalcaba, 2016; Pel et al., 2020). These can be entirely new but may also involve the importation of established ways of organising into an alternative space or to address a different social need (Ayob et al., 2016). Pel et al. (2020) propose that for social innovation initiatives to be considered 'transformative' they must successfully challenge, alter or replace dominant institutions. Offering a more nuanced view, and one that we find helpful in our analysis of SLs, Pel and Bauler (2017) also highlight the possibility that social innovations may exist as 'weak transformative forces' established within institutionalised 'niches' that interact with dominant institutions holding the possibility of transformative change in the future. We also acknowledge the need to guard against 'normative idealism' and 'pro-innovation bias' (Pel et al., 2020) when considering social innovations. It is important to recognise that social innovation initiatives can have unintended consequences and both positive and negative impacts for different groups (Lindhult, 2008; Pel et al., 2020; Tracey and Stott, 2017).

This interest in how social systems can be reshaped is reflected in the extended scope of organisational research, the traditional home of innovation studies, and the development of new theoretical frameworks informed by sociological theory (Fligstein and McAdam, 2011; Jessop et al., 2013; Mair and Seelos, 2021). These perspectives emphasise the importance of context and the interactive dynamics of social networks connecting a diverse range of individuals and organisations spread across the public, private and third sectors (Ayob et al., 2016; Baptista et al., 2019; Cajaiba-Santana, 2014; Pel et al., 2019, 2020; van der Have and Rubalcaba, 2016). The idea of social innovation 'ecosystems' offers a promising frame of reference to help understand the dynamics of these networks (Jütting, 2020) but more research is needed to elaborate on what remains "a rather broad metaphorical concept" (Pel et al., 2019: 3). Social innovation studies have often focused on the roles played by individuals and organisations within local communities working at a practical level to generate support for initiatives and attend to 'day-to-day activities' (Jessop et al., 2013; Pel et al., 2020). For example, Noack and Federwisch (2019) identified the central role played by individual network actors occupying positions of 'in-betweenness' in the spreading of social innovation ideas across urban and rural regions in Germany. Wegner et al. (2023) describe the role played by network 'orchestrators' in fostering collaboration to support the progression of two small local social innovations initiatives in Germany. Drawing on examples of 20 initiatives, Pel et al. (2019) also highlight the importance of the "local roots" and community-level resources within social innovation ecosystems.

Our research responds to Pel et al.'s (2020) call to 'zoom-out' from these local studies and apply a longitudinal perspective. There is a need to look beyond the micro-level to recognise the political dimensions of the social innovation process and develop an understanding of how these innovations relate to established institutions and wider society (Ayob et al., 2016; Hutter et al., 2015; Jessop et al., 2013; Pel et al., 2020). Jessop et al. (2013) challenge the privileging of firms in innovation research and draw on research on social movements to consider the roles played by civil society organisations working within and across local communities whilst also being active in political and public policy-making arenas. Similarly, Pel et al. (2020) suggest that to achieve their transformative ambitions social innovation initiatives need an institutional home to access resources and challenge the logics of dominant institutions. This invites us to consider examples of organisations that appear to fulfil these different roles, examine how they perform them, and consider the extent to which they have been able to achieve their transformative aims.

We propose that Fligstein and McAdam's (2011) theory of strategic action fields and their concept of IGUs offer a promising way to think about how these questions might be addressed. Although this theory has been utilised in recent studies of social innovation (Anheier et al., 2019), the concept of IGUs has not. Drawing on social movement and organisational scholarship, Fligstein and McAdam (2011: 3) explain that: "A strategic action field is a meso-level social order where actors (who can be individual or collective) interact with knowledge of one another under a set of common understandings about the purposes of the field, the relationships in the field (including who has power and why), and the field's rules". Fields can include all kinds of constructed orders such as markets, networks, social movements, and so forth. They incorporate organisations or individual actors that are competing with one another, some as incumbents and others as challengers. A key insight of their work is that strategic action fields have IGUs such as trade associations, technical committees or campaign groups. IGUs liaise with actors both internal and external to the field and are "charged with overseeing compliance with field rules and, in general, facilitating the overall smooth functioning of the system" (Fligstein and McAdam, 2011: 6). This conservative view of IGUs' role is questioned by Muzio et al. (2016). They observe that over several decades the two leading UK professional associations for management consultants shifted away from serving the narrow interests of their founding members in engineering-based firms to open-up the field to accounting and audit firms. Following this, we ask 'can IGUs can play a more dynamic role by reshaping social relations and expanded the boundaries of a field?'

To develop this line of inquiry further and connect it to our interest in the development of social innovation ecosystems we draw upon the pioneering work of Andrew Van de Ven (Zahra, 2016). In our view his research on the 'innovation journey' offers a holistic multi-level view that is more relevant to our inquiry into the role of IGUs than existing social innovation research that is more focused on the micro-level dynamics of collaborative networks. Although Van de Ven's research has focused primarily on commercial innovations, it is empirically grounded and follows the 'process perspective' called for by some contemporary researchers of social innovations (Baptista et al., 2019; Cajaiba-Santana, 2014; Pel et al., 2020; van der Have and Rubalcaba, 2016). The innovation journey metaphor conceptualises a complex and contingent process involving a long sequence of events and activities that can support, or constrain, the successful implementation of a commercial innovation, challenging theories that emphasise technical inventions and the development of new products so overlooking or oversimplifying other aspects of the innovation process. An emphasis on the context of the innovation process leads Van de Ven et al. (2008) to develop the concept of a 'community infrastructure for innovation' that is a precursor to the modern concept of innovation ecosystems. The relevance of Van de Ven's journey perspective to social innovation is demonstrated empirically through its application to an analysis of 82 cases, which concluded: "The creation or presence of an infrastructure is often a condition for the adoption of social innovation" (Oeij et al., 2019: 253).

Alongside industry actors' activities (conceptualised as local SL schemes' 'proprietary functions' in the social system framework), Van de Ven et al. (2008) propose three components of a community infrastructure that are relevant to our inquiry. Firstly, *resource endowments* include the knowledge, human and financial resources necessary to support the early innovation process and the subsequent establishment of other infrastructure components. The second component, *institutional arrangements,* relates to the governance of an industry and the

development of shared technical standards necessary to establish political and public confidence. Thirdly, *market functions* relate to the process of commercialising new products through shaping markets to inform and educate consumers and create demand. These infrastructure components are shared and can be developed by actors external to the industry, such as regulators or universities, or through industry actors working together or with external actors. Van de Ven et al. (2008) describe how, as the number of organisations, actors and events increases, this network of co-operative and competitive relationships forms a loosely coupled system. Table 1 below summarises these ideas and relates them to the potential role played by IGUs in the development of a community infrastructure for social innovation.

Drawing on these ideas to hone our earlier questions relating to the spread and scale-up of social innovations our research pursued the following two questions: *What role can IGUs play in the development of a community infrastructure to support the social innovation process? What are the constraints faced by IGUs that limit their ability to meet the transformative aims of social innovation initiatives?*

1.2. Shared Lives (SL) and Shared Lives Plus (SLP)

SL schemes in England seek to replicate 'ordinary family life' by matching adults with care needs (as presently defined under England's *Care Act* 2014) with people willing to open-up their homes and family life to a stranger. SL funding comes from LA expenditure (a mix of local and central taxation and services) and individuals' welfare benefits (social security) entitlements to disability and housing-related payments. Carers who are self-employed and not a familial relation receive a fee relating to the needs of the person they support. In addition, staff are employed to manage the SL 'scheme' which can be based within a LA, or a LA-commissioned voluntary sector organisation. Schemes ensure that carers receive training and support, and 'match' carers and people needing support and receive periodic inspections of the quality and safety of care from the national health and care regulator, the Care Quality Commission (CQC).

In other countries similar models of care are called 'adult foster care' (Leinonen, 2021; Chammem et al., 2021) or 'adult family care' (Mollica and Ujvari, 2021; Munly et al., 2023). Their origins stretch back to the Middle Ages when families in Geel (Belgium) cared for people with mental illness (Goldstein and Godemont, 2003). The development of this model of care in England started with 'boarding-out' schemes for older people (O'Shea and Costello, 1991). However, it was the setting up of a scheme in Liverpool by Sue Newton, who worked for the long-established charity originally known as the Liverpool Personal Services Society (PSS) (PSS, 2019), that is generally regarded as the starting point of the SL 'innovation journey'. Although this scheme initially focused on older people, it quickly developed as an alternative model of care for people with learning disabilities (LD) (or intellectual impairment) following the closure process of England's long-stay hospitals. Hill et al. (1995) reported 81 UK 'adult placement' schemes in operation by 1992.

A seminal event in the history of SL was the establishment of the National Association of Adult Placement Schemes (NAAPS) in 1992. Now known as Shared Lives Plus (SLP), we regard this organisation as an example of an IGU (Fligstein and McAdam, 2011). SLP operates within and across local areas working with scheme managers, LA commissioners (where schemes are contracted-out to voluntary sector providers) and self-employed carers to help promote awareness of this alternative model of care and oversee the development and implementation of common standards, rules and procedures. Simultaneously, at national level SLP seeks to influence central government policymakers, the CQC and charitable funding bodies.

Alex Fox (SLP Chief Executive Officer (CEO), 2010–22) explained that when he started SL was seen as "a really small quirky model that was always going to struggle to scale". Since then, SLP has succeeded in attracting external investment to expand its operations including £3.3million (m) raised through two rounds of National Lottery Funding (2014–2024) and was funded as one of 12 'innovation projects' in England's £42.6m Accelerating Reform Fund initiative (Department of Health and Social Care, 2023). SLP now employs around 30 people to support 150 SL schemes across the UK (not just England) with an annual income of just under £2 m. With these resources SLP has actively promoted SL as a 'transformative' alternative to residential care suited to meeting a diverse range of adult care needs, not just those associated with LD. SL advocates highlight impressive CQC inspection judgements, cost-effectiveness compared to residential care, and the positive testimonies of individuals matched with SL carers (see Todd and Williams, 2013; PSS, 2017; Fox, 2018; King and Milnes, 2022).

By 2022–3 SL had successfully 'spread' nationally with 123 schemes in England covering almost all 153 LA areas – some voluntary sector-run schemes cover multiple LA areas (SLP, 2023). However, in our view SL is a 'niche' innovation (Pel and Bauler, 2017) because it has not become widely embedded as an alternative to more traditional models of care. During 2022–3, 8140 carers provided support to 8262 individuals in England (SLP, 2023). As such, SL remains a very small model employing, or contracting with, only 1 % of the ASC workforce (SLP, 2023). Furthermore, despite efforts to promote SL as a flexible model capable of supporting a range of care needs, most (73 %) individuals supported have LD (SLP, 2023), slightly higher than reported by Bernard (2005) nearly two decades earlier.

Table. 1
Components of a 'community infrastructure' for social innovation (adapted from Van de Ven et al., 2008).

Component	Description	Potential role of IGUs in social innovation context
Resource endowments	The knowledge, human and financial resources needed to develop, maintain and promote an innovation.	• Pooling of technical expertise • Attracting financial investment
Institutional arrangements	Governance arrangements and technical standards needed to maintain political and public confidence in an innovation.	Development and enforcement of technical standards, rules and procedures
Market functions	Processes and activities aimed at shaping the market and promoting demand.	• Raising public and political awareness of a social innovation initiative • Challenging established institutional logics and expanding field boundaries

2. Methods

This case study was part of a larger study exploring innovation processes in English ASC. A set of lead questions was developed through a scoping review (Zigante et al., 2022), stakeholder engagement and a mapping exercise (Malley et al., 2024) to identify case studies that could respond to the questions. Case studies enable us to examine social phenomena in the everyday context in which they occur (Yin, 2009) and are common in studying innovation processes (Huber and Van de Ven, 1995). Our intention is 'theory building', using the evidence to develop our understanding of the social innovation process (Eisenhardt, 1989; Eisenhardt and Graebner, 2007).

This case study, and the wider project, followed a sociological approach (Baptista et al., 2019; Cajaiba-Santana, 2014; Pel et al., 2020; van der Have and Rubalcaba, 2016) viewing 'the journey' of innovations as a dynamic process involving interaction between multiple actors and groups over an extended timeframe (Pel et al., 2020; Van de Ven et al., 2008). We examined the development of the SL 'field' over a period of approximately 40 years. Data were collected through semi-structured interviews with 50 individuals, analysis of 110 documents, and observations of an online national conference and a regional network meeting

of SL scheme managers, both arranged by SLP. The case study design also included four embedded case studies of local SL schemes.

A study of the development of SL in England focusing on the role of SLP provides a critical test case for understanding social innovation processes. We acknowledge the potential limitations of a single-case study and the value of cross-case analysis involving multiple diverse institutional contexts (Jütting, 2020; Pel et al., 2020). However, in our view a single study of SL can provide valuable insights because of the complexity of the field and the wider context of ASC in England. SL represents a field of social innovation involving central government policymakers, regulators, charitable funding bodies, LAs (including representative bodies) and voluntary (not-for-profit/third) sector service providers. Key stakeholders also include those working for local schemes, the self-employed carers and the people they support. The four embedded case studies were selected to maximise institutional heterogeneity according to schemes' ownership, geographical location, and size. Table 2 provides details of the four anonymised schemes.

Data were collected iteratively allowing us to continuously develop our lines of inquiry and take advantage of 'snowballing' opportunities. Following a realist philosophical perspective our aim was to "explore the less obvious aspects of a system's working" through "a deep engagement with phenomena and sustained efforts to build trusted relationships with actors constitutive of phenomena" (Mair and Seelos, 2021: 7).

We began by collecting and reviewing previous research on SL and publicly available annual reports, policy papers and promotional materials. The aim was to establish a chronology of key events, identify potential interviewees who have played a part in the development of SL at the national level, and identify contrasting local case study sites.

In total we conducted 49 semi-structured interviews, most involving a single participant (5 interviews involved 2 participants, 2 interviews involved 3). Of the 50 individuals interviewed six people working in the local case study sites were interviewed twice over a period of 12 months to follow-up on discussions in the first interview relating to ongoing local scheme developments. Participants were recruited to provide a good representation of different 'levels' with the SL field. These included 'elite interviews' with all three past and present SLP CEOs and others with prominent roles spanning policy-making arenas and the development of local schemes. Participants from elsewhere in the SL field included those working with or for local schemes including self-employed carers. Table 3 summarises participants' details.

Interviews were undertaken between late 2021 and early 2023 by video call ($n = 42$), telephone (n = 4), and face-to face ($n = 3$) and were recorded and transcribed in full except when one participant declined to be recorded but detailed notes were taken. Most participants are anonymised but direct quotes are attributed to individuals who could not be easily anonymised with their agreement. Ethical permissions were provided by the London School of Economics and Political Science. Informed consent was given by all participants. Interviews were conducted by Carl Purcell, a male researcher with experience in local government services and policy research. Publicly available documents were collected in preparation for local case study interviews and additional documents including business plans, performance reports, practice guidance documents and local promotional materials were also shared with researchers by the local case study sites. The conference and regional network meetings were observed at the invitation of participants.

Interview transcripts were imported into Nvivo and first coded following a thematic approach (Braun and Clarke, 2019) guided by the overarching research questions arising from the wider research project including the mapping exercise of ASC innovations in England (Malley et al., 2024). This initial coding was carried out by Carl Purcell and subsequently presented and discussed with members of the wider research project who have experience in social care research and third sector care provision. The initial coding framework was then recalibrated to reflect the key themes that emerged in this discussion and was also guided by Van de Ven et al.'s (2008) social system framework.

In qualitative research documents need to be reviewed with a 'critical eye' recognising that they are likely to only present a partial recording of events and that researchers need to establish their meaning (Bowen, 2009). However, a major strength of case study research is the opportunity it offers to use a variety of data sources to investigate a range of historical and contemporary issues that can be used to 'triangulate' the data and strengthen findings (Yin, 2009). We used the documents we collected to validate findings from the interview analysis and as a source of 'factual' information. Documentary information was also used to challenge partial and conflicting interpretations of events – often necessary when elite interviews are used (Natow, 2019). Earlier drafts of the findings presented in this article were shared with key research participants to check for accuracy and to invite comments on the analysis.

Table. 2
Local Shared Lives (SL) schemes sample ($n = 4$).

	Description
London Borough	This long-established LA-run scheme focuses on people with LD. An external review of the LA's LD services in 2017 had identified an 'overuse of residential care' and the potential benefits of expanding SL provision. Although a five-year action plan to grow the scheme was subsequently agreed, the number of long-term SL 'arrangements' stood at approximately 30 in summer 2021, lower than the 40 at the 2017 review.
Rural Counties	This scheme started in 2011 after being commissioned by two neighbouring large rural LAs. Dissatisfaction with the provider's performance led to the scheme transferring to another more established voluntary sector provider in 2017. Subsequently, the scheme grew and by mid-2021 provided approximately 130 long-term arrangements, all for people with LD. However, most of this growth was concentrated in one of the LA areas.
Metro Region	This long-established scheme, run by the same voluntary sector provider as Rural Counties, primarily covers four metropolitan LA areas, although other nearby LAs also 'spot purchase' arrangements. In summer 2021 it had approximately 90 long-term arrangements, a modest increase on previous years. Arrangement types were more diverse than the other three schemes with four-fifths for people with LD and one-fifth for people with other care needs.
Northern County	This long-established LA-run scheme is one of England's largest, providing over 200 long-term arrangements for people with LD by early 2022. It enjoyed substantial growth during the mid-2010s following LA investment of £0.5 m + in the scheme. However, at the time of this research, growth had begun to stall.

3. Findings

The findings presented below are organised under three headings adapting the Van de Ven et al.'s (2008) framework to reflect the themes that emerged from our analysis. Chart 1 provides a process map (Langley, 1999) to support our narrative showing key events and developments within the SL field and three phases we identified in the development of SL as a social innovation: (1) emergence; (2) institutionalisation; and (3) promotion.

Table. 3
Interview participants ($n = 50$).

Role	Number
SLP Chief Executive Officers	3
Other SLP staff/ trustees	7
Public policy consultants	2
Scheme managers/officers (LA and voluntary sector providers)	8
LA senior managers and commissioners	10
Voluntary sector senior managers	3
Self-employed carers	17

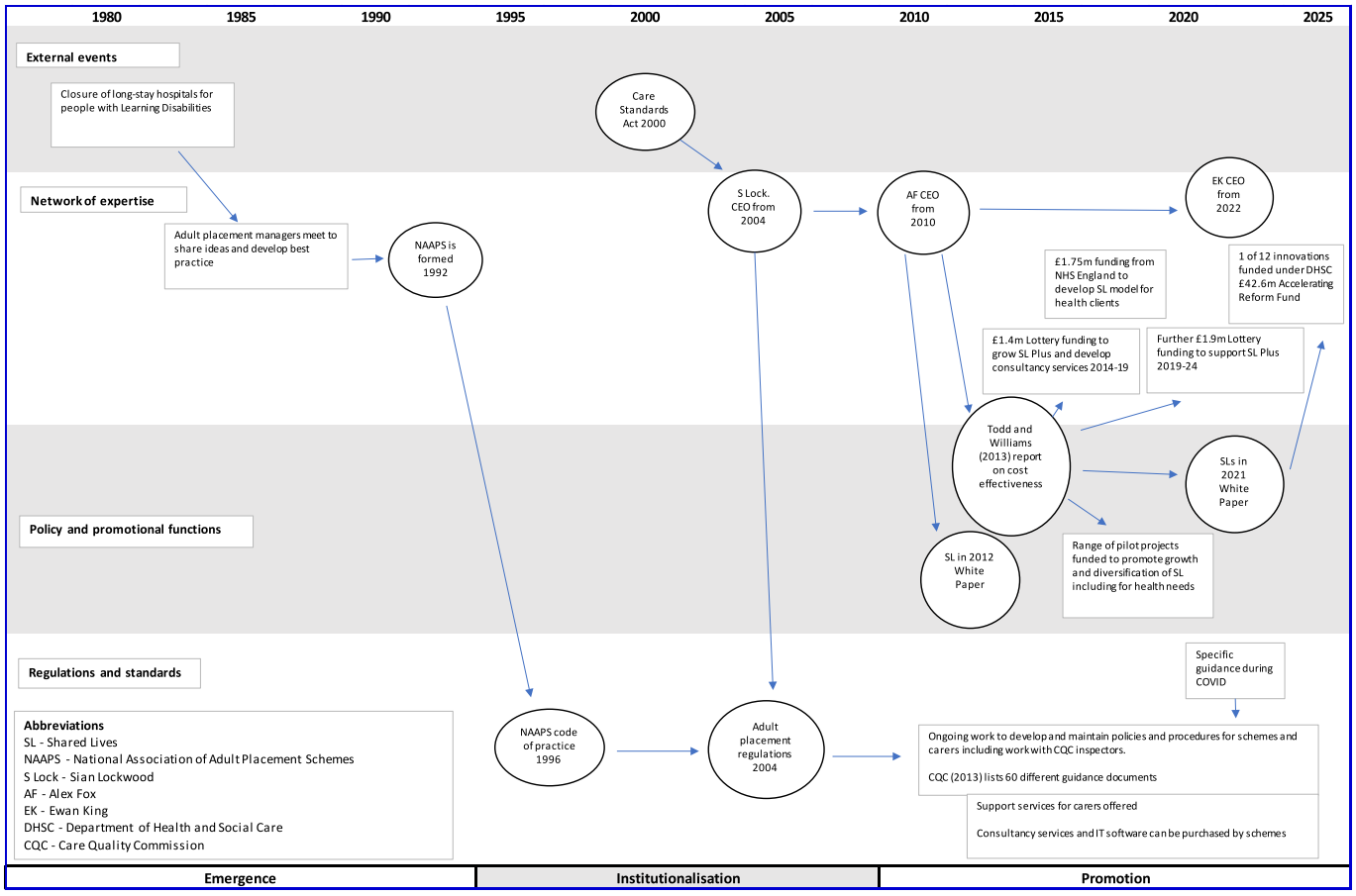

Chart. 1. Key events and activities.

3.1. *Network of expertise*

Regarding the resource endowments component of Van de Ven et al.'s (2008) community infrastructure framework, SLP has positioned itself at the centre of a network of expertise supporting and promoting the take-up of SL. Moreover, the 'emergence' of SLP as an organisation and SL as an alternative model of care started with regional meetings in the 1980s of the managers of 'adult placement' schemes that had grown following the closure of long-stay hospitals for people with LD. In this early period this model remained largely unregulated and scheme managers looked to each other for advice and guidance on scheme development, leading to the eventual formation of NAAPS in 1992. During the 1990s NAAPS remained a small organisation focused on supporting managers, its main development being the publication of a voluntary code of practice in 1996. It was only following the *Care Standards Act* 2000 that NAAPS moved to address the development of regulatory standards (discussed in the next section) and Sian Lockwood, who had been scheme manager in North Yorkshire, was appointed as the organisation's first CEO.

Under the leadership of Alex Fox who replaced Lockwood as CEO in 2010, and after NAAPS changed its name to SLP, the organisation sought to cement its role at the centre of a network of expertise. Over recent years SLP has attracted financial investment from non-commercial sources, including two waves of National Lottery funding to recruit new staff and extend the organisation's remit. This enabled support services for carers to be established and paid for the development of computer software and bespoke management consultancy, for which schemes incur charges if they opt to use them. Following the appointment of Ewan King as CEO in 2022, SLP has continued to attract external funding to support its operations such as its selection as one of 12 innovations receiving funding from the £42.6 m Accelerating Reform Fund (DHSC, 2023).

Two case study sites took advantage of SLP's expertise and networks. In the early 2010s Northern County worked closely with Lockwood, by then leading the organisation Community Catalysts with strong connections with SLP, to review its operations and build a business case for LA investment. London Borough scheme's manager also commented on the value of the current regional network that SLP facilitates. Reflecting on the importance of linking scheme managers together, a SLP officer explained:

> "They (scheme managers) go to their head of support (in a LA) on a thorny SL issue, and that head of service will advise them according to residential service or whatever their personal experience of care is and won't necessarily know the rules or best practice for SL … So, it's feeling that you're part of a community, which they do when they come and meet other SL schemes or if they contact SLP."
>
> (SLP officer)

Conversely, others in the SL field did not routinely consider SLP as the first place to go to for advice pointing towards the limitations of SLP. The managers of the Rural Counties and Metro Region schemes, both employed by the same voluntary sector organisation, said they were more likely to turn to internal colleagues for support. Moreover, they looked to their central team to facilitate joint working across the multiple schemes the organisation was responsible for and were less engaged with networks overseen by SLP. We also found that the LA commissioners (funders) generally looked to managers and commissioners in other LAs in their region for advice rather than SLP. Staff members of the Northern County scheme were regularly contacted by LA commissioners and scheme managers for advice after a successful period

of growth and the award of an 'outstanding' CQC inspection rating.

Furthermore, one former SLP officer, now working elsewhere in the care sector, considered that the collective expertise of the SLP central team was perhaps not as strong as previously:

> "I think one of the challenges and one of the criticisms from members frequently is that there are not enough people, staff at SLP, who actually have worked in SL schemes. And so, although people have an understanding, they go and spend a bit of time in schemes as part of their induction, they haven't actually run a SL scheme or worked in a SL scheme."
>
> (Former SLP officer)

Interestingly, this is a gap that the current leadership of SLP was seeking to address at the time of our interview:

> "We are changing how we work with schemes and carers to a more co-produced approach. They are the experts at delivering SL and see the barriers and opportunities every day. We need to listen and learn so we hear what works and what else we need to do to help and support schemes and LAs."
>
> (Jayne Wilson, Director of Development at SLP speaking in 2023)

3.2. Regulations and standards

SLP clearly plays a lead role in the development and maintenance of regulations and standards relating to SL, in line with the institutional arrangements component of Van de Ven et al.'s (2008) framework. We identified the publication of a code of practice by NAAPS in 1996 as the starting point of the institutionalisation phase on Chart 1. However, NAAPS' response to the introduction of new regulations under the *Care Standards Act 2000* was especially important to the consolidation of its expert role and ability to work with sector power holders. These new regulations effectively treated the domestic homes of self-employed carers in the same way as care homes – a situation that carers regarded as untenable. In 2002, 40 % of local schemes responded to a NAAPS survey showing an average loss of 26 % of carers over the two years following the new regulations (Fiedler, 2005). As NAAPS' CEO, Lockwood worked with others in the sector to highlight this problem. NAAPS compiled statistical evidence and the personal testimonies of individuals whose care had been affected by the new regulations to present to the Department of Health minister. New regulations in August 2004 reversed the position by shifting the regulatory responsibility onto adult placement schemes and away from individual carers. This permitted greater flexibility in care arrangements (Bernard, 2005) and paved the way for the growth and spread of what would come to be known as SL schemes.

As SLP added more posts and functions to its central team it developed a large suite of guidance documents addressing an array of day-to-day challenges relating to SL delivery. Moreover, SLP is now regarded as the authority on technical standards and is routinely consulted by the DHSC and CQC. For example, CQC guidance for its inspectors listed 60 separate documents published by SLP (CQC, 2013). Guidance for schemes and carers is continually reviewed and updated in response to changing government policies on social care, but also in other related areas such as welfare benefits and health and safety. SLP's response to the COVID-19 pandemic was also praised by the local scheme staff interviewed.

Furthermore, because SL remains an institutional niche (Pel and Bauler, 2017) SLP must continuously remind central and local government policymakers that they need to adapt their policies and processes to ensure they are compatible with the way the model operates. The comment below from one scheme manager (not in a case study area) reflects their appreciation of SLP work on maintaining these institutional arrangements:

> "SLP have done a brilliant job in terms of opening people's minds up to SL and making it something that people talk about… They've done really good work with CQC to make sure that when CQC are writing regulations, they absolutely think about how is this going to impact on SL, so that we don't end up having to implement loads of stuff that will just push us away from an ordinary house model."
>
> (Scheme manager)

Nevertheless, we also found evidence to demonstrate the limitations of SLP's influence in a complex institutional field where it cannot guarantee the consistent implementation of regulations and standards. Illustrating how social innovations can have unintended negative consequences for some groups (Lindhult, 2008; Pel et al., 2020; Tracey and Stott, 2017), we found growing concerns amongst carers' regarding variations in fee levels, respite provision, day services and compensation for extra work during the pandemic. As one carer commented: "The philosophies of Shared Lives are great, the guidelines they push out seem to be quite good but they [SLP] don't enforce them or are powerless to enforce them." A common criticism of SLP made by carers, and acknowledged by scheme staff, was that its dual role in representing carers and schemes compromised its ability to challenge schemes regarding the implementation of its recommended standards. Importantly, this tension was also acknowledged by the current CEO of SLP who explained:

> "We're having a bit of a debate internally about whether we should introduce a bit more of a stick to what we do …You don't have to do this in a critical way that makes them [LAs] feel exposed. You can say, look here's the data, here are the benchmarks, have a look and you'll see that this LA is actually not paying carers to the level they should be, you have lower numbers [of SL arrangements] than similar LAs."
>
> (Ewan King, SLP CEO speaking in 2023)

3.3. Promotional functions

Under Van de Ven et al.'s (2008) framework 'market functions' relates to activities aimed at shaping markets and generating consumer demand, reflecting the commercial orientation of their research. We view the work of SLP in raising awareness of SL amongst the public, ASC professionals and local and national policymakers more broadly as fulfilling promotional functions. We identify the 'promotion' phase of the SL innovation journey as beginning around 2010, coinciding with the appointment of Alex Fox as CEO in 2010.

Fox explained that when he started SL was not seen as compatible with national policies emphasising 'personalisation' and 'independent living' as alternatives to residential care (DH, 2005, 2006). Talking when he was still SLP CEO, Fox reflected on how they sought to change this perception:

> "The work that we've done over the last ten years… has been around clarifying the story… having a story to tell that's about why this model works for people and what it's there for. And the idea that there are people who want to live socially, perhaps lots of people who want to live socially, not everybody wants to live on their own, that's not everybody's life goal, particularly not at every point in their lives."
>
> (Alex Fox, CEO SLP, 2010–22)

Fox (2018) had previously explained his view that the key to understanding the positive impact of SL was the emphasis placed on relationships and 'ordinary family life'. Showing a determination to challenge established institutional logics SLP proponents also argued that this approach could help to improve the lives of many more adults with care needs, not just those with LD. Greater use of SL arrangements for the care of older people, hospital discharge, mental illness, physical disability, addictions, domestic abuse, and young people leaving care

were all promoted and substantial funding for a range of pilot schemes was raised (Brookes and Callaghan, 2013; NDTi, 2016; 2019; PPL et al., 2017; Cordis Bright, 2019; DCMS and SLP, 2020; Mitchell-Smith et al., 2020).

The success of SLP in changing perceptions, and in adapting to shifting narratives and priorities in national policy, is evidenced by references to the model in government policy documents including two White Papers published almost a decade apart. *Caring for our Future: Reforming Care and Support* (HM Government, 2012) presents SL as an example of how to improve health and wellbeing while reducing inequalities by harnessing community resources. Almost a decade later, *People at the Heart of Care* (DHSC, 2021) cites SL as an example of an innovation in ASC, designed to do things differently to meet people's needs.

But developing demand has been about more than just 'clarifying the story'. As the present CEO of SLP, Ewan King (2023), argued: SLP has worked with others to develop the evidence-base needed to persuade national and local government to invest. Part of this work is collating the personal testimonies of carers and the people they support to show the positive impact of living in a family environment (see Todd and Williams, 2013; Fox, 2018; SLP, 2018). However, evidence presented on the purported cost-effectiveness of SL compared to other forms of care services (Todd and Williams, 2013; Brookes and Callaghan, 2014) has also been critical in persuading government and other public funding bodies to invest in SLP and initiate various pilot programmes aimed at growing and diversifying the model. The claim made by Todd and Williams (2013), and repeated by Fox (2018), is that LAs could save an average of £26,000 of expenditure for every person with LD and £8000 for everyone with mental health problems by using SL as an alternative to other services including home care, individual/personal budgets, care homes with and without nursing, and supported accommodation. These figures were again quoted by DHSC (2023) when it announced the Accelerating Reform Fund funding for SLP. Significantly, our case study participants reported their reliance upon these data on outcomes and costs in presenting their business cases to LAs for investment in additional staff.

Despite SLP's success in raising the profile of the model within the DHSC and amongst LA Directors of Adult Social Services it remains very small and has not grown or diversified to the extent that many had wished. In this sense SLP has not achieved its transformative aims, since it has not replaced or altered existing models of care (Pel et al., 2020). The limited impact of some well-funded pilot programmes is striking. For example, in 2015 Big Society Capital made a £950,000 'social investment' in the 'Shared Lives Incubator Pilot' to provide funding and practical support for the creation of four 'spin out' SL schemes operating independently of LAs. However, the evaluation reported that only 47 new arrangements were made over four years across the four sites, against a target of 181 (Kewley and Jupp, 2019). In 2016 a five-year 'Scaling Shared Lives in Health' programme received £1.75 m. from NHS England. Since this pilot did not generate sufficient referrals from NHS teams to assess its feasibility, the programme ceased after three years (Cordis Bright, 2019).

We found evidence of difficulties encountered in raising the local profile of SL and in generating referrals from LD-specialist social workers across all schemes, although such specialist roles are not widespread nationally. Enthusiasm for the model amongst senior leaders and scheme staff was generally not reflected amongst middle managers. Reflecting on the challenge of implementing SL, one of the public policy consultants interviewed commented:

> "It's pretty common for a lot of health and social care innovations; they really struggle to take hold in systems… there isn't really an ecosystem that can support it. So, there's lots of agreement that it's a really interesting model – it's strengths-based, it's-the-future-of-social-care-type narrative that you get from very senior leaders… but the ability to put some localised money into it so it can grow and develop is really tricky."
>
> (Public policy consultant)

Alongside this both SLP and schemes face the challenge of trying to increase the numbers of SL carers. Although SLP continues to promote greater awareness and provides materials for schemes to support carer recruitment, scheme staff reported that advertising and recruitment campaigns had limited impact because most new carers were recruited through 'word of mouth'. Moreover, as with much of the care sector, the challenge of recruiting and retaining carers has been exacerbated by increases in those taking retirement since the COVID-19 pandemic. Concerns were expressed by several interview groups about the rising age profile of carers. After the pandemic the case study schemes were only maintaining the current number of placements they offered, despite multiple efforts to grow. Concerns about pay, expenses and the high expectations placed on carers, may be making it harder to retain and recruit carers. This point was acknowledged by SLP's Chair of Trustees:

> "We could place more people and people with greater levels of need into SL arrangements but need to recognise the investment needed in rates paid to carers and the provision of respite support. I think we've just accepted or thought people are going to, out of the goodness of their hearts, keep coming forward and offering to be carers. The demographic's going to change as many carers come to the end of their SL careers and we need to recognise and value the contribution SL carers make in part by appropriately remunerating them for the fantastic work they do."
>
> (Richard Jones, SLP Chair of Trustees)

4. Discussion

This article has responded to calls for empirical research to improve our understanding of the key actors and mechanisms that drive social innovations (Borzaga and Bodini, 2014) to support this emerging field of research (van der Have and Rubalcaba, 2016) and challenge policy discourses that casually promote social innovation as a panacea for solving complex social problems (Gurrutxaga and Galarraga, 2022; Pel et al., 2020). In this discussion we reflect on the theoretical contribution of this case study.

Our first research question was: *what role can IGUs play in the development of a community infrastructure to support the social innovation process?* Our findings show that SLP is a mechanism for collective action, taking on roles that its members would find difficult to resource independently. It operates in many ways as predicted by Fligstein and McAdam (2011): it liaises with and lobbies key external actors, provides routine administration services and information to its members, and develops rules to shape and modify members' behaviour. Much of this work is broadly conservative, aiming to ensure the smooth functioning and reproduction of the field. However, SLP is not solely a conservative force. Like Muzio et al. (2016) we observe here a drift away from the interests of founding members. Over time SLP has opened-up to include SL carers as members and the leadership of SLP no longer sits with the founding members, nor with SL scheme members. SLP illustrates how IGUs can play a more proactive role in helping to reshape and expand a strategic action field. Although we have focused on the role of SLP as an organisation, our findings also highlight the pivotal role played by some individuals operating in the policy-making arena, particularly Lockwood and Fox as SLP CEOs, in ways reminiscent of the 'orchestrators' driving social innovation at the community level (Wegner et al., 2023). IGU leadership could be a topic for future social innovation researchers to consider.

This case study provides further support for the applicability of Van de Ven et al.'s (2008) community infrastructure framework for the study of social innovations. With respect to each infrastructure component, we find various ways in which developments both constrain (e.g. through adherence to standards) and facilitate (e.g. through SLP's pandemic guidance that helped SL remain viable) the actions of SL schemes.

However, we have labelled these components as network of expertise, regulations and standards and promotional functions to better reflect the wok of SLP. Furthermore, in the context of social innovation, the application of Van de Ven et al.'s (2008) work on infrastructure development may need reconceptualising in two further areas.

First, is the appropriateness of the component they refer to as 'proprietary functions'. This component captures the activities of individual firms (in our case SL schemes) operating independently from one another. There were several examples of this in our research (e.g. producing evaluations, marketing) but, given SL schemes are either charitable or publicly-owned, the concept of proprietary functions seemed inappropriate to describe their activities in the 'field' even where they serve only to advance the SL scheme's goals. This is partly because there was little sense of competition between schemes; rather an overriding need to justify their value to commissioners. Instead, we refer to this component as 'organisational functions' to better reflect the SL context, as with the three other components.

Second, in contrast to Ven de Ven et al.'s description of commercial innovation infrastructure development, we find a particularly prominent role for one organisation, which we have conceptualised as an IGU. SLP emerged at an early stage of infrastructural development and was founded through a co-operative project to develop service standards (a code of practice). Over time SLP has evolved, performing work not only to *develop* infrastructure but also to *maintain* it (e.g. change guidance in response to policy and other developments). Its role has been vital: without the lobbying of SLP (NAAPs) to challenge the *Care Standards Act* 2000 regulations, its ongoing work to promote SL within government, and activities over the COVID-19 pandemic it seems very unlikely that SL would be as widely established as it is. An important question for future research is whether the case of SLP is unusual or whether IGUs perform as critical a role in relation to the infrastructure development for other social innovations and whether certain conditions make the prominence of the IGU more or less likely.

Our second research question asked: *what are the constraints faced by IGUs that limit their ability to meet the transformative aims of social innovation initiatives?* This invites us to think about the reasons why SL remains an institutional 'niche' (Pel and Bauler, 2017). Here we find that Pel et al.'s (2019) research on ecosystems for local social innovations provides an important counterweight to our more '*meso*' level analytical framework. They draw attention to the importance of grassroots resources and processes for the local embedding of social innovations. The expansion of the strategic action field and distancing from the interests of its founding members have introduced challenges for SLP in how it works with its members to develop and maintain the infrastructure for local SL schemes. As SLP has grown as an organisation, adding new roles and services to its central team, some have highlighted the diminishing collective knowledge and expertise of SLP officers, many of whom have not worked in local schemes. Moreover, we found evidence that some scheme managers and LA commissioners were more likely to turn to colleagues or other SL schemes for support than to SLP or the networks it facilitates. This research also highlights the variable implementation of the voluntary standards for local schemes set by SLP and the impact of this on some carers. In interviews it was evident that SLP recognised these challenges and proposed placing a stronger emphasis on 'co-production', acknowledging that it needs to hone the expertise of those working elsewhere in the SL sector, and was considering introducing some mechanisms to promote closer adherence to voluntary standards.

Our research suggests limits to what an IGU might be able to achieve with respect to the development of an infrastructure for social innovation. Based on this case study we propose that *IGUs are likely to be most effective* where the interests of all the members align, they share a common understanding of the problem and its likely solutions, there is a clear role for collective action, and there is a small set of national stakeholders who can be influenced to unlock the problem. Successes for SLP that fit with this description are the negotiations around the *Care Standards Act 2000* and pandemic representations. In contrast, we propose that even where there is a case for collective action *IGUs are likely to be less effective* where any of the following apply: the interests of all the members do not align, they do not share a common understanding of the problem and its likely solutions, there are multiple stakeholders at both national and local levels who need to be influenced and their role is not unique. The deliberations of the current leadership described above fit within this description, as do the challenges to create greater demand for SL and expand carer numbers.

Regarding the latter two challenges, SLP has been very successful in promoting the SL model within central and local government policy-making circles, as reflected in government ministers' support and the grant income it has continuously generated. Yet, this support has not translated into the widespread local embedding (Pel et al., 2019) of SL. Collective national action with national stakeholders is insufficient to create local markets of supply and demand for SL. Our evidence suggests this is because the problem has a fundamentally local flavour, due to local differences in the living situations and options for potential carers, and differences in local commissioning and professional practices. To grow, SL schemes may need to address the specific challenges of their localities. Our interviews with its leaders suggest that SLP recognises this need and is presently reorienting its efforts 'internally' with the intention of helping schemes to understand and address local challenges to scaling-up schemes.

However, we must also be careful not to simply assume that solutions can be found at the local level. Our findings, particularly those relating to the recruitment of carers, hint at wider cultural and social constraints to the growth of SL as an alternative model of care. Carers were overwhelmingly positive about SL with many describing the benefits that living in an 'ordinary' family-home had on the lives of those being supported, but also how rewarding carers and their own families found the role. But the role of SL carers requires deep commitment and a degree of sacrifice and cannot simply be thought of as 'a job'. Research on the foster care of children (Schofield et al., 2013) has shown how the carer role blurs with the role of parent making the boundaries between work and family difficult to manage. Unless more people agree to take on these responsibilities or they are differently balanced, SLs could remain a 'niche' institution.

5. Conclusion

The purpose of studying SL was to generate fresh empirical insights to help us understand the spread and scaling-up of social innovations. Our research reveals the potential importance of IGUs – in our case SLP – in these processes. Specifically, we have shown how IGUs work with actors internal and external to the field to develop and maintain an innovation infrastructure. Importantly, the case of SL also demonstrates the limits of IGUs. They cannot alone ensure spread and scale-up of innovations beyond an 'institutional niche' (Pel and Bauler, 2017) Their effectiveness as an instrument for collective action to develop and maintain an innovation infrastructure is, we propose, affected by whether the interests of the IGU's members align, whether they share a common understanding of the problem and its likely solutions, and whether there are national stakeholders who can be influenced to unlock the problem. We encourage researchers studying social innovation ecosystems to pay greater attention to the role IGUs play in the social innovation process, conditions related to their prominence and to further test the propositions regarding their likely effectiveness.

CRediT authorship contribution statement

Carl Purcell: Writing – review & editing, Writing – original draft, Project administration, Methodology, Investigation, Formal analysis, Data curation, Conceptualization. **Jill Manthorpe:** Writing – review & editing, Supervision, Methodology, Investigation, Funding acquisition, Formal analysis, Data curation, Conceptualization. **Juliette Malley:** Writing – review & editing, Supervision, Project administration,

Methodology, Funding acquisition, Formal analysis, Conceptualization.

Declaration of competing interest

The authors declare none.

Acknowledgements

The support of the Economic and Social Research Council (ESRC) is gratefully acknowledged (ES/T001364/1).

Data availability

The data that has been used is confidential.

References

Anheier, H., Krlev, G., Mildenberger, G., 2019. Social Innovation: Comparative Perspectives. Abingdon-on-Thames, UK, Routledge.
Ayob, N., Fagan, K., Teasdale, S., 2016. How social innovation 'came to be': tracing the evolution of a contested concept. J. Soc. Policy 45 (4), 635–653.
Baptista, N., Pereira, J., Moreira, A.C., Matos, N.D., 2019. Exploring the meaning of social innovation: a categorisation scheme based on the level of policy intervention, profit orientation and geographical scale. Innovation 21 (3), 379–397.
Bernard, S., 2005. A national survey of adult placement schemes in England: recruitment and retention of adult placement carers. Health Soc. Care Community 13 (6), 563–569.
Borzaga, C., Bodini, R., 2014. What to make of social innovation? Towards a framework for policy development. Soc. Policy Soc. 13 (3), 411–421.
Bowen, G.A., 2009. Document analysis as a qualitative research method. Qual. Res. J. 9 (2), 27–40.
Braun, V., Clarke, V., 2019. Reflecting on reflexive thematic analysis. Qual. Res. Sport, Exerc. Health 11 (4), 589–597.
Bright, Cordis, 2019. Scaling Shared Lives in Health: Implementation Evaluation. Cordis Bright Limited, London.
Brookes, N., Callaghan, L., 2013. What next for shared Lives? Family-based support as a potential option for older people. Journal of Care Services Management 7 (3), 87–94.
Brookes, N., Callaghan, L., 2014. Shared Lives: Improving understanding of the costs of family-based support. In: Curtis, L., Burns, A. (Eds.), Unit Costs of Health & Social Care (2014), Personal Social Services Research Unit. University of Kent, Canterbury.
Cajaiba-Santana, G., 2014. Social innovation: moving the field forward. A conceptual framework', Technological Forecasting and Social Change 82, 42–51.
Care Quality Commission (CQC) (2013) 'Supporting Information: Shared Lives Schemes', *https://www.cqc.org.uk/sites/default/files/documents/20130725_100998_v2_00_supporting_information_-_shared_lives_schemes_for_external_publication.pdf*.
Chammem, R., Domi, S., Schott, A.M., 2021. 'Perceptions and experiences of older persons in two types of institution in France: Foster Care family institution and medico-social one', *Frontiers in public health*, 9. https://www.frontiersin.org/articles/10.3389/fpubh.2021.684776/full.
Department for Culture Media and Sport, Shared Lives Plus and Safe Lives, 2020. Shared Lives Domestic Abuse Project Report. Liverpool, Shared Lives Plus.
Department of Health, 2005. Independence, Well-Being and Choice: Our Vision for the Future of Social Care for Adults in England. The Stationery Office, London.
Department of Health, 2006. Our Health, our Care, our Say: A New Direction for Community Services. The Stationery Office, London.
Department of Health and Social Care (DHSC), 2021. People at the Heart of Care: Adult Social Care Reform White Paper. Department of Health and Social Care, London.
DHSC, 2023. Innovation projects in adult social care receive £42.6 million boost: accelerating reform fund to support innovation in local areas to boost quality and accessibility of adult social care in England, London, DHSC, 23rd October. https://www.gov.uk/government/news/innovation-projects-in-adult-social-care-receive-426m-boost.
Eisenhardt, K.M., 1989. Building theories from case study research. Acad. Manage. Rev. 14 (4), 532–550.
Eisenhardt, K.M., Graebner, M.E., 2007. Theory building from cases: opportunities and challenges. Acad. Manage. J. 50 (1), 25–32.
Fiedler, B., 2005. Adult Placement in England: A Synthesis of the Literature. Social Care Institute for Excellence, London.
Fligstein, N., McAdam, D., 2011. Toward a general theory of strategic action fields. Sociol Theory 29 (1), 1–26.
Fox, A., 2018. A New Health and Care System: Escaping the Invisible Asylum. Policy Press, Bristol.
Goldstein, J.L., Godemont, M.M., 2003. The legend and lessons of Geel, Belgium: a 1500-year-old legend, a 21st-century model. Community Ment. Health J. 39 (5), 441–458.
Gurrutxaga, A., Galarraga, A., 2022. Controversies in social innovation research. Innovation: The European Journal of Social Science Research 35 (2), 224–244.
Hill, M., Nutter, R., Giltinan, D., Hudson, J., Galway, B., 1995. Family placements for adults and children—a double comparison. Br. J. Soc. Work 25 (2), 209–226.
HM Government, 2012. Caring for our Future: Reforming Care and Support. Norwich, The Stationery Office.
Huber, G., Van de Ven, A., 1995. Longitudinal Field Research Methods. Studying Processes of Organizational Change, London, Sage.
Hutter, M., Knoblauch, H., Rammert, W., Windeler, A., 2015. Innovation society today. The reflexive creation of novelty. Hist. Soc. Res. 40 (3 (153)), 30–47.
Jessop, B., Moulaert, F., Hulgård, L., Hamdouch, A., 2013. Social innovation research: A new stage in innovation analysis? In: Moulaert, F., MacCallum, D., Mehmood, A., Hamdouch, A. (Eds.), The International Handbook on Social Innovation. Edward Elgar Publishing, Cheltenham.
Jütting, M., 2020. Exploring Mission-oriented innovation ecosystems for sustainability: towards a literature-based typology. Sustainability 12 (16), 6677.
Kewley, K., Jupp, B., 2019. The Shared Lives Incubator. Social Finance, London.
King, E., 2023. What can IMPACT learn from the growth of shared Lives? https://impact.bham.ac.uk/2023/03/28/learning-from-shared-lives-growth/.
King, E., Milnes, T., 2022. Improving outcomes through shared Lives. https://socialcare.blog.gov.uk/2022/12/01/improving-outcomes-through-shared-lives/.
Langley, A., 1999. Strategies for theorizing from process data. Acad. Manag. Rev. 24 (4), 691–710.
Leinonen, E., 2021. Caring in space: the boundaries between public and private spaces in Finnish adult foster care homes. Ageing & Society 41 (5), 1184–1201.
Lindhult, E., 2008. Are partnerships innovative? In: Svensson, L., Nilsson, B. (Eds.), Partnership as a Strategy for Social Innovation and Sustainable Change. Sateruns Academic Press, Stockholm.
Mair, J., Seelos, C., 2021. Organizations, social problems, and system change: invigorating the third mandate of organizational research. Organization Theory 2 (4), p. 26317877211054858.
Malley, J., Mah, J. and Ferlie, E. (2024) 'Exploring the diversity and complexity of adult social care innovations in England: an exercise in mapping innovations and a research agenda', *Manuscript submitted for publication*.
Mitchell-Smith, Z., Caton, S., Potter, A., 2020. Shared Lives 16+ (Pilot). Department for Education, London.
Mollica, R., Ujvari, K., 2021. Adult family care: a viable alternative to nursing homes. Washington DC, AARP Public Policy Institute. https://doi.org/10.26419/ppi.00128.001.
Munly, K., Roberto, K.A., Allen, K.R., 2023. Adult family care: A homelike environment for community-based care. In: Ferdous, F., Roberts, E. (Eds.), (re)Designing the Continuum of Care for Older Adults: The Future of Long-Term Care Settings. Springer International Publishing, Cham.
Muzio, D., Kipping, M., Kirkpatrick, I., 2016. Governance units and field evolution dynamics: the case of UK management consulting. Acad. Manag. Proc. 1, 10672.
National Development Team for Inclusion (NDTi), 2016. Evaluation of the Shared Lives Mental Health Project. Bath, NDTi.
Natow, R.S., 2019. The use of triangulation in qualitative studies employing elite interviews. Qual. Res. 20 (2), 160–173.
NDTi, 2019. Shared Lives Intermediate Care: Evaluation Report. Bath, NDTi.
Noack, A., Federwisch, T., 2019. Social innovation in rural regions: urban impulses and cross-border constellations of actors. Sociol. Rural. 59 (1), 92–112.
Oeij, P.R.A., van der Torre, W., Vaas, F., Dhondt, S., 2019. Understanding social innovation as an innovation process: applying the innovation journey model. J. Bus. Res. 101, 243–254.
O'Shea, E., Costello, J., 1991. Boarding out as an option for the Care of Elderly People. Age Ageing 20 (2), 95–99.
Pel, B., Bauler, T., 2017. A transitions studies perspective on the social economy; exploring institutionalization and capture in Flemish 'insertion' practices. Annals of Public and Cooperative Economics 88 (2), 279–298.
Pel, B., Wittmayer, J., Dorland, J., Søgaard Jørgensen, M., 2019. Unpacking the social innovation ecosystem: an empirically grounded typology of empowering network constellations. Innovation: The European Journal of Social Science Research 33 (3), 311–336.
Pel, B., Haxeltine, A., Avelino, F., Dumitru, A., Kemp, R., Bauler, T., Kunze, I., Dorland, J., Wittmayer, J., Jørgensen, M.S., 2020. Towards a theory of transformative social innovation: a relational framework and 12 propositions. Res. Policy 49 (8), 104080.
Pol, E., Ville, S., 2009. Social innovation: buzz word or enduring term? J. Socio-Econ. 38 (6), 878–885.
PPL, Cordis Bright and Shared Finance (2017) An independent review of Shared Lives for older people and people living with dementia. https://sharedlivesplus.org.uk/wp-content/uploads/2019/04/Review_of_Shared_Lives_for_older_people_and_people_living_with_dementia_2017-1.pdf.
PSS, 2017. Social Impact Report: Shared Lives and TRIO. PSS, Liverpool.
PSS, 2019. What Ought to Be Done: A Collection of Real Stories Celebrating 100 Years of PSS. Liverpool, PSS.
Schofield, G., Beek, M., Ward, E., Biggart, L., 2013. Professional foster carer and committed parent: role conflict and role enrichment at the interface between work and family in long-term foster care. Child Fam. Soc. Work 18 (1), 46–56.
Shared Lives Plus, 2018. Shared Lives in England Annual Report 2017–18. Liverpool, Shared Lives Plus.
Shared Lives Plus, 2023. The State of the Sector: Shared Lives in the UK 2022–23. Liverpool, Shared Lives Plus. https://sharedlivesplus.org.uk/wp-content/uploads/2023/12/UK-state-of-sector-22-23-final-digital-compressed.pdf.
Todd, R., Williams, B., 2013. Investing in Shared Lives. Social Finance, London. https://www.socialfinance.org.uk/insights/investing-in-shared-lives.
Tracey, P., Stott, N., 2017. Social innovation: a window on alternative ways of organizing and innovating. Innovation 19 (1), 51–60.
Van de Ven, A., Polley, D., Garud, R., Venkataraman, S., 2008. The Innovation Journey. Oxford University Press, New York/Oxford.

van der Have, R.P., Rubalcaba, L., 2016. Social innovation research: an emerging area of innovation studies? Research Policy 45 (9), 1923–1935.
Wegner, D., Hölsgens, R., Bitencourt, C.C., 2023. Orchestrating collaborative networks for social innovation: Orchestrators' roles in socially innovative initiatives. Technol. Forecast. Soc. Chang. 195, 122786.
Yin, R., 2009. Case Study Research: Design and Methods, Fourth edition. Sage, London.
Zahra, S.A., 2016. Portrait of a research Pioneer: Andrew van de Ven. Strateg. Entrep. J. 10 (4), 413–429.
Zigante, V., Malley, J., Boaz, A., Ferlie, E., Wistow, G., 2022. How Can the Adult Social Care Sector Develop, Scale and Spread Innovations? A review of the literature from an organisational perspective, Care Policy Evaluation Centre, London.