**Keeping expertise in its place: Understanding arms-length bodies as boundary organizations[[1]](#footnote-1)**

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**Abstract**

*Policy and administration scholars have struggled to explain the waxing and waning of arms-length bodies over time and across contexts. This article draws on the Science and Technology Studies' concept of boundary work — understood as practices which both demarcate and enable collaboration across distinct areas of expertise - to help explain variation in these institutional arrangements. Conceptualising arms-length bodies as boundary organizations shows how their authority rests on their capacity to enable ongoing coordination while preserving the authority and autonomy of relevant expert spheres. The article demonstrates this analytical purchase through reference to two cases in contemporary British government.*

**Key words**

boundary work; science and technology studies; administrative reform; agencies

**Acknowledgments**

I would like to thank Anna Wesselink, Hal Colebatch and Rod Rhodes for advice on earlier drafts, and the editor, Felicity Matthews, and the three anonymous reviewers for their very helpful comments during the revision process.

**Introduction**

As renewed pledges of ‘quangocide’ culminate in less radical reforms across Europe and beyond (Verhoest et al. 2012), scholars are still trying to make sense of what sustains arms-length governing arrangements. The most commonly rehearsed story relates to the New Public Management reforms of the 1980s and onwards: arms-length bodies are associated with the importation of private sector norms such as specialisation and efficiency. Others situate reforms within a broader account of depoliticisation that explains arms-length arrangements as mechanisms by which governing elites remove complex and contested issues from the public agenda. Though both accounts offer broad-brushed insights into the factors underpinning the proliferation of arms-length arrangements, neither explains the variable fortunes of these bodies as they wax and wane in practice. Attempts to drill down into drivers of this variation have found no clear patterns (van Thiel 2012; Howard 2016). A new analytical device is emerging that can shed vital new light on these fluctuations: boundary work.

In fact, boundary work has long represented the orthodox approach to detailed examination of arms-length governance arrangements in the cognate discipline of science and technology studies (STS). For STS scholars, such arrangements are less products of a drive for specialisation or issue containment and more an institutional outlet through which the boundaries between science, politics and practice can be contested and remade. That is to say, arms-length bodies are seen not as management instruments for the efficient, uncontentious delivery of services but as institutional configurations which redefine technical issues of scientific or administrative knowledge from pragmatic issues of expert practice as from normative issues of political calculation. In the process, they reproduce the ‘sacred stories’ of each sphere and reinforce the authority of the scientists, practitioners and policymakers in each.

This paper argues that boundary work can provide great purchase for analysts hoping to understand the vicissitudes of administrative reform. The logic of boundary work helps to explain arms-length bodies as *boundary organisations*—it shows how and why arms-length bodies appeal to a range of influential policy actors (in and beyond the state), and persist or dissolve in the messy, contested context of networked governance. As such, boundary work offers insight into the instabilities and fluctuations that have come to characterise arms-length arrangements. The crux is that boundary work implies no simple institutional fix. Many attempts to coordinate boundary work are resisted or eroded by the expert scientists, practitioners, or corporate or political elites involved.

This paper provides a conceptual account and empirical illustration of this argument. The first section sets out and explores the limitations of existing explanations of governance reform. The second introduces boundary work to develop an analytical framework that better accounts for these fluctuations. The third and fourth illustrate the benefits of adopting this approach by comparing two of the best-canvassed cases of arms-length governance in Britain: the National Institute for Health and Care Excellence (NICE) and the Food Standards Agency (the FSA). The fifth spells out the unique insights that the boundary work framework provides in explaining the divergent trajectories of these apparently similar bodies. The paper concludes by outlining a new research agenda to shed light on variation in administrative reform by focusing on how arms-length arrangements enact boundary work.

**Explaining patterns of arms-length governance**

Christopher Hood (1980) has famously described arms-length bodies as enduringly ‘useful’ in public administration, but precisely what provides that perception of usefulness remains contested. This is particularly so in light of renewed interest in the subject since such bodies became a target of recent austerity measures in Western Europe and the Anglo sphere. Again, observers note, many such bodies have survived another bout of ‘quangocide’ (see Dommett and Flinders 2015). Though reigned in and slimmed down, arms-length bodies remain an important feature of contemporary governance. And, as such, questions remain about how bouts of instantiation, reform and termination might be best explained.

The orthodoxy ties these developments to the New Public Management reforms of the 1980s and onwards (eg. Dunleavy et al. 2006). Arms-length bodies, in this account, appealed to governing elites as a way of realising private sector ideals of specialisation and efficiency in the administration of public services. Despite considerable appeal, there is growing recognition that this is an overly simplistic narrative. It neither addresses the tremendous variability that typifies the nature and resilience of arms-length institutions across contexts, nor explains the durability of arms-length bodies that analysts note in a post-NPM era. An alternative narrative situates the NPM account within a broader story about socio-political forces. In this view, NPM has simply been a manifestation of a broader shift towards depoliticisation (see Flinders 2008; Roberts 2010). This broader story entails the reassignment of contentious issues from the public realm to the domain of experts or the market. Arms-length governance, in this sense, is an apt phrase for political elites who wish to distance themselves from problematic politics. Both accounts provide important purchase about the broad trends driving the spread of arms-length arrangements. Yet still neither can explain the complex waxing and waning of arms-length arrangements in practice.

There is a large body of more grounded empirical work that seeks to identify the factors that explain this variation. Behavioralists have sought to identify universal patterns in the incentives that drive or resist efforts towards delegation – though, as Howard (2016) explains, this scholarship has struggled to deliver robust findings. Elsewhere, institutionalists have focused on the impact of formal administrative configurations, especially on the experience of different types of arms-length bodies (eg. Pollitt and Talbot 2004), or else on determinants in different jurisdictions and sectors (eg. Verhoest et al. 2012). All of this work is immensely useful in pointing to a greater variety of factors in the complex dynamics that characterise arms-length arrangements. But it reveals little in the way of clear patterns – indeed, amid the complex mish-mash of findings, the fate of specific arms-length bodies is written off as ‘random’ (van Thiel 2012). Yet there may be hope for greater understanding if we expand analytic horizons in two key ways.

First, in an age of networked governing complexity, there is a greater need to understand institutional autonomy and legitimacy not as given but as *performed* (see especially Howard 2016). Orthodox approaches risk imbuing policymakers with a capacity to engineer institutional architecture that fails to recognise the limits to government autonomy (vis-à-vis other powerful actors). Policymakers cannot simply depoliticise complex issues cynically in the face of stakeholder opposition. Nor would such institutions be tolerated if they were not deemed valuable by the diversity of actors who interact with them. A fuller and more convincing account of reform must be attentive to the ways in which arms-length bodies are enacted to appeal to key stakeholders as legitimate or, in Hood’s phrase, ‘useful’, too.

Second, careful case studies show that broad-brush assertions about what factors determine institutional autonomy can mislead. Recent studies, for example, debunk the widespread notion that institutional size has a monotonic relationship with institutional success (see Corbett and Howard 2016) or challenge the presumption that institutional autonomy is eroded by political salience (see Wood 2014). There is a need for an analytical approach that can better peer inside the ‘black box’ to explore and unpack the contingent dynamics that sustain or erode autonomy.

**Introducing boundary work**

The notion of boundary work has developed over the last couple of decades in the field of STS (see Gieryn 1983; Shapin 1992; Jasanoff 1996; Guston 2001; Halffman 2002). It captures the ways in which scientific knowledge is mobilised and reinforced vis-a-vis other social spheres. ‘The scientific’ is not given; it represents a social sphere with fuzzy, porous borders. What counts as science is not a philosophical question but a practical one, negotiated by situated actors to buttress their authority (Gieryn 1983). Boundary problems emerge when the distinctiveness of the sphere comes into question—when “pseudoscientists” try to claim that authority or when the features perceived to be distinct to this sphere (such as objectivity) are challenged. Boundary work is what happens in response to the emergence of such boundary problems. It is the practices through which the boundaries of distinct social spheres like ‘the scientific’ are reproduced and maintained.

STS scholars, and those who have borrowed from this literature, have applied boundary work in different ways. Some make the normative case for boundary work in moderating the influence of science and other sources of traditional authority (see eg. Backstrand 2003; Hulme 2008). Others present boundary work as a strategy deployed by actors to manage conflicts between scientists and those occupying other spheres (see Hoppe 1999). The focus employed in this paper, however, aligns with the bulk of work in this field which uses boundary work as an analytical tool to identify the empirically observable practices that demarcate and buttress the scientific sphere (see Jasanoff 1990; Guston 2001; Halffman 2002).

Despite clear affinities between boundary organizations and institutions of arms-length governance, scholars of public policy have only recently begun to make use of boundary work to make sense of the science-policy nexus. Interpretive scholars have led the charge, unsurprisingly given their shared interest in the meanings and practices through which scientific expertise relates to policy work (see Metze 2008). One useful move has been to decouple the notion of boundary from its tight association with science (understandably, given its origins in the STS literature) and begin to see other social spheres such as administration and politics as equally being defined and redefined by boundary work (eg. Meyer and Hammerschmid 2006). Another has been to extend the focus of boundary work to understanding governance arrangements themselves. Hoppe et al. (2013), for instance, draw on the notion of boundary work to explain developments in the institutionalisation of global climate governance. Most germane to this paper, Koriket and Veit (2015) use boundary work to make sense of the interaction between the Food Standards Agency and central Ministries in German governance, showing how this institution of arms-length governance contains the boundary problems of nutrition and food safety science, policy and practice.

This work is encouraging. But its sights remain limited to explaining the micro-dynamics of particular cases. This paper asserts a more general value in using boundary work to understand practices of arms-length governance. The key here is that though clearly arms-length governance arrangements can contain the boundary problems that inevitably emerge in relation to such problems, they do not always do so. How and why is boundary work successfully performed and sustained in some circumstances? And how and why is it not in others? Answering these questions helps to get a better grip on the seemingly ‘random’ variation exhibited in arms-length governance arrangements.

First, boundary work makes space for the diversity of actors involved in contemporary governance. Arms-length bodies emerge to enable boundary work in the context of expert and stakeholder demands; they are a solution that ‘works’ not just for political elites, but for the range of actors involved, and the range of different spheres that they inhabit or comprise. These institutional forms persist on the basis that they successfully contain *boundary problems*.

Second, extant approaches to studying and unveiling boundary work provide the tools to understand the complex dynamics of legitimation. They allow analysts to probe beneath factors typically taken to be determining of the success or failure of arms-length bodies—such as formal institutional types, basic organizational variables (size, budget, etc), sponsorship and accountability arrangements—to reveal the ways in which arms-length arrangements are performed in practice by all the actors involved. The pay-off is nuanced insight into how and why particular arms-length bodies build and retain legitimacy better than others.

Halffman (2002) identifies two key functions in boundary work: *demarcation* and *coordination*. *Demarcation* refers to the protection and sustenance of discrete social spheres. Demarcation represents the (re-)establishment of sites of interaction across these spheres that concentrate and contain the negotiation of boundary problems. It is through these institutional arrangements that contestation among spheres is seen to be funnelled and made intelligible, and compromise forged and cascaded. They provide space for the *performance* of boundary work—meant both in the sense of where it happens, and where *it is seen to happen*. It is the enactment of boundaries through discourse and public performance (see Mol 2002; Metze 2008). In practice, the performance of demarcation often takes on a familiar form for policy and administration scholars—the establishment of a committee, a specialist task force, a steering group, or a board of directors as components of a semi-autonomous body. *Coordination* refers to the ways by which such interaction is undertaken. It is the adoption and adaptation of new practices that can be seen as enabling and sustaining these new configurations (Halffman 2002). It encompasses the practices of communication across spheres—engaging in dialogue and producing (or translating) artefacts that are digestible for diverse audiences. Again, in terms familiar to policy and administration scholars, these are the practices of committee work, of developing technical documents, of reporting to and engaging with stakeholders.

**Table 1: A Boundary Work Framework for understanding the dynamics of arms-length bodies**

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| --- | --- | --- |
|  | **Prevailing perspectives** | **A boundary work perspective** |
| **Understanding the appeal of arms-length arrangements** | Linked to broad socio-political trends (depoliticisation) and governing strategies (NPM) | Grounded in contextual emergence of ‘boundary problems’*- Blurring of science, regulation, politics and beyond (see Jasanoff 1990)* |
| **Understanding processes of delegation**  | Identifying behavioural drivers or formal institutional configurations | Examining performances of demarcation*- Understanding how boundaries are ‘enacted’ through discourse and public performance (see Mol 2002)* |
| **Understanding variation in practice** | Establishing political, cultural or institutional determinants of survival/failure | Exploring modes of coordination*- Identifying the common practices through which interaction across spheres is made possible and intelligible (see Halffman 2002)* |

**Approach: Implementing the boundary work framework**

Having clarified the boundary work framework, the next step is to apply it in a comparative analysis of the Food Standards Agency (FSA) and the National Institute for Health and Care Excellence (NICE). This section justifies this case selection, outlines the data collection, and discusses the analysis.

These cases were selected on the basis of a ‘most similar’ research design. Both arms-length bodies have a (primarily) regulatory function, drawing on natural science to make technical policy judgments. They are, in this sense, both reminiscent of organizations at the centre of existing STS scholarship on boundary work, and so they appeal as good candidates for an exploratory study (albeit that this methodological choice also raises questions of the broader generalizability of the comparison, which I revisit in the conclusion). Both were established during the first term of the New Labour government. Both bodies also emerged in similar circumstances of high-profile crisis in the mid-1990s, as boundary problems emerged across the spheres of science, administration, industry and politics. Both have also shared the same government sponsor, in the form of the Department of Health—a point significant both because of the overlap in actors involved, and because recent research has also emphasised the importance of cultural features, understood in sectoral as well as national terms, in influencing the manner in which boundary work manifests (eg. Hoppe et al. 2013). However, for all these similarities, their stories are quite different: the FSA’s powers have become slowly eroded, while NICE has gradually consolidated its position and influence. There is thus particular value in seeking to explain these contrasting trajectories.

The analysis is based primarily on archival material in the form of documentation, including internal reports, Parliamentary reviews of both institutions and government responses, and newspaper coverage in *The Guardian* and *The Telegraph* (in practice this totalled over 100 documents in relation to each case). It also draws on extensive video archives of the board meetings of the FSA between 2004 and 2013 (around 25 hours of footage). Though not directly related, insights are informed by interviews with a handful of officials, scientists, charity and food industry representatives from a previous qualitative project on the UK’s obesity politics (see Boswell 2016)—a project which intersected with both agencies.

These complex institutional stories are analysed using the framework developed earlier. The analysis focused on the emergence of *boundary problems* which instigated the establishment of the two bodies. It then identifies the performances of *demarcation* which enable the institutions to come into being. Most attention, however, is focused on the modes of *coordination* that these institutions subsequently perform to maintain the boundaries between distinct spheres.

**The Food Standards Agency (FSA)**

*The emergence of a boundary problem*

The public has the right to expect the very highest standards of food safety. Confidence in the safety of the food we eat has been severely undermined in recent years and I am determined to rebuild that trust(Tony Blair, May 1997).

The FSA emerged in the wake of food safety crises in Britain in the 1990s, especially the *bovine spongiform encephalopathy* (BSE) scare affecting British cattle stock. The context was a messy political scandal, in which the cosy relationship between agribusiness and the Ministry of Agriculture, Farms and Fisheries (MAFF) was seen to have compromised safety standards. The initial response to the crisis was one of angry denial from the Conservative Major government. However, pressure mounted from consumers and powerful food retailers, inflamed by intensive media coverage about the dangers of British beef (for background, see Wales et al. 2006). A perception of crisis in Britain’s food system spread. The boundaries across agribusiness, science, politics and administration became blurred. And, in the context of declining trust, the incoming Blair government established a public BSE Inquiry.

*The performance of demarcation*

The Government is determined to do away with the old climate of secrecy and suspicion and replace it with modern, open arrangements which will deliver real improvements in standards. This fresh approach will help to command the confidence of consumers, industry and our partners in the EU and beyond (Blair in FSA 1998).

The response in the wake of the Inquiry was to set about establishing an agency—The Food Standards Agency—that would administer food and nutrition policy. The Blair government signalled the new prioritisation of safety by granting the agency a special status. It was to be independent from government but have the authority of a government department. It was also now tied to the Department of Health and not MAFF. The FSA had a number of features typical to agencies—technical divisions and collaborative working groups. But it also had a unique statutory requirement to be ‘open’ in its work and make public its advice to government. To fulfil this function, it was set up to house a range of important institutional innovations. One was the establishment of a board comprised of successful actors from across the private and third sectors, with a requirement that there be only a minority with experience in the food industry. Another was the establishment of a Community Committee to advise on FSA policy and scrutinise the decisions and procedures of the expert actors involved. These arrangements were designed to signal a break from the past, heralding a new transparent approach that could restore consumer confidence.

As a performance of demarcation, the creation of the FSA had the obvious appeal of creating distance between the government and a recent crisis, and to remove this complex and disaster-prone issue from the agenda. But it should not be seen just as a crude act of depoliticisation. Just as importantly, it met with near unanimous endorsement among the constellation of actors engaged in food and nutrition policymaking. Central to its emergence was its appeal to these stakeholders. The crisis and its aftermath had reinforced the growing economic power of large-scale retailers, whose threats to increase imports of meat products signified growing influence over the entire supply chain. The FSA could provide these actors with an important new outlet through which to wield this influence. Linked to the power of retailers was the rise of consumer groups. The new institutional arrangements appealed to these actors as a way of attaining significant status and access. For those in nutritional science, similarly, the agency provided key professional and interpersonal links into the inside of the machinery of government which had been conspicuously lacking in the pre-BSE crisis era. It also promised to provide closer expert scrutiny of policymaking and policymakers’ relationships with industry, as outlined in the influential report of James (1997) that paved the way for the FSA. Among the powerful agribusiness lobby, meanwhile, the key priority was to restore consumer confidence in the wake of lost revenues. The emergence of a new agency to administer (largely) existing regulations was deemed preferable to an alternative of harsher regulation. Engagement with the agency appealed as a way to symbolically mark a very public performance of a new, consumer-centred regime.

*The mode of coordination*

In its initial re-marking of these boundaries, the FSA was deemed very successful. Key to this was a branding of the new arms-lengths arrangements as transparent, as distinct from the old climate of negotiation and secrecy. In his response to the release of the Phillips inquiry into the BSE crisis, MAFF Minister Nick Brown spoke about the FSA’s critical role:

The report of Lord Phillips identifies institutional and political failure throughout the BSE story. Our task today is to do everything we can to ensure that those failures do not happen again. Since coming to office, the Government have committed themselves to a policy of open and transparent working on issues of food safety. Our aim is to provide consumers and others with timely, accurate and science-based information and advice, enabling people to make informed decisions and choices. To establish credibility, it is necessary to generate trust. Trust can be generated only by openness. Openness requires that, where there is uncertainty, it is recognised and explained (House of Commons, 2001)

This mode of coordination was to be sustained by a variety of innovative practices. Public dialogue was established by way of a high-profile and (for the time) innovative internet presence and blog. There was also a commitment to full disclosure of FSA administration via this web presence. Data was made publicly available, including the setting of targets for industry actors and their performance according to key metrics. But the most famous plank of transparency was the establishment of open board meetings. The board was to meet once a month in a fully open public meeting that would be broadcast and archived on the internet. This was a commitment to public cooperation across the spheres of science, business and policymaking.

In important respects, this commitment to transparency enabled the FSA to perform its core functions effectively. The threat of public exposure incentivised administrators within the FSA but also industry actors to set, and reach, ambitious targets on safety practices and nutritional guidelines. Indeed, the FSA soon became a popular model for effective and efficient food and nutrition policymaking. FSA Chair Dame Deirdre Hutton could claim triumphantly in the organization’s 2005/6 Annual Report:

…Agency staff across the UK have been able to maintain consumers’ trust in the food supply. Indeed, the latest in our annual series of Consumer Attitudes to Food surveys, published in March 2006, illustrates that confidence is growing in our ability to protect people’s health.

But while a commitment to transparency might have enabled efficient administration and effective compliance, it also served to gradually undermine the successful demarcation achieved in the creation of the FSA. Transparency enabled policymaking success, but underpinned institutional instability. The initial buy-in for this mode of coordination began to give way as key stakeholders perceived transparency, at least as manifest in the practices of the FSA, as contrary to their long-term interests.

The first plank to go was the Community Committee. The Committee came to be seen as peripheral to the FSA’s operations, with a widespread perception that its deliberations were not integral to, or instrumentally useful for, the policymaking process. This apparent lack of consequentiality, which foreshadowed a creeping scepticism about the authenticity of transparent governance, saw it soon quietly abandoned.

Over time, the other more high-profile practices of transparency began to reveal contradictions, too, slowly undermining key actors’ faith in the authenticity of the commitment to transparent coordination. On the one hand, food and nutrition scientists became increasingly cynical about the public relations driven ‘show’ of transparency. Convinced that the powerful food lobby exercised significant influence behind the scenes, outspoken scientists began to question the motives of FSA officials in failing to adequately set and enforce targets in food reformulation. Public health advocates also criticised the creep towards industry dominance on the FSA Board:

The Food Standards Agency was established to protect consumers and to end the practice by the old Ministry of Agriculture Fisheries and Foods of putting industrial interests before consumer protection. The FSA has to gain and retain the trust of the public, but it will only be able to do so if Ministers keep their promise to ensure that the FSA Board is free of industrial influence (Millstone 2008).

On the other hand, industry representatives became increasingly wary of what they saw as a drift in the FSA’s remit towards advocacy on high-profile policy debates around salt reduction and obesity prevention. Before the July 2011 open board meeting, for instance, Food and Drink Federation representatives sent an aggressive letter to all board members expressing their dismay at the proposed agenda for discussion and their lack of input into this agenda.

Overall then, the perception grew that the ‘open’ practices of the FSA were losing their fitness for purpose. Former journalist and founding Board member Richard Ayre reflected during one meeting:

[W]e, by common consent I think, set the pace for openness in the way government businesses transacted. Well it’s six years on, I don’t think we’re necessarily the leader anymore, but other people may have a different view about that. And I think it is time over next few months that we had a fundamental review of our approach to openness. Why do we do it? Apart from the fact the statute says we have to, what is the purpose of openness? What are the risks of openness? How is openness best delivered? (FSA Open Board Meeting, June 2006).

But little tangible came of these pleas. The boundaries between science, politics and business had begun to blur once more. Increasing pressures led the incoming Coalition government to embark on a re-organization that stripped the FSA of much of its power. Food systems expert Professor Tim Lang penned a withering critique of this failure of ‘collective memory’ for *The Guardian*:

The last Tory government was bombarded by food crises for a decade – remember salmonella and BSE? It mismanaged these spectacularly at times. Labour's response was to set up the Food Standards Agency (FSA), designed to "create blue water between us and safety difficulties", as one minister told me in 1998. The FSA opened in 2000 and, despite ups and downs, it has performed well, winning trust and irritating and offending all sides equally. The new government has now decided to dismember the FSA. Its role as public health adviser on nutrition is to be absorbed into the department of health; its role as inspector of farms, food processing plants and so on will revert to Defra. The much diminished FSA will only enforce food safety and hygiene – the least controversial aspect of its current remit (Lang 2010).

**The National Institute for Health and Care Excellence: NICE**

*The emergence of a boundary problem*

Like the FSA, NICE’s origins lie in perceptions of political crisis. The specific concern related to treatments and services available on the NHS. NICE’s emergence is especially closely linked to mounting controversy over localised healthcare provision, and so-called ‘postcode lottery’ that reproduced inequalities in access across different localities. Health providers found themselves pressed between the need to tighten health budgets and pressure to improve access to treatments and services.

By the mid-1990s a number of high-profile cases threw the issue into the media spotlight. The mounting belief was that assessments of new technologies and treatments remained ad hoc and politically motivated. Yet there was mindfulness that any move to curb the discretionary power of elites in the medical profession and disrupt the relationship between policymakers and the medical industry could not be taken lightly. The boundaries between practice, science, politics and administration had become blurred.

The incoming Blair government had made solving the dilemmas of ‘postcode prescribing’ a healthcare priority. Their move was to set up NICE in 1999. A senior bureaucrat, quoted (off the record) in the *Telegrap*h, later reflected cynically:

Nice was really created to get photogenic patients [who'd been denied drugs] off the TV screens every night (senior bureaucrat quoted off the record in Eastham 2006).

*The performance of demarcation*

NICE was designed as a special health authority to reduce variation in the availability and quality of NHS treatments and care. It was set up as an advisory body with a focus on the production of guidelines for health providers and practitioners. The aim was to ensure that the most clinically and cost effective drugs and treatments were made available widely on the NHS in England and Wales, although in practice the authority had no capacity to follow-up on compliance. NICE’s initial internal structures reinforced this rather limited role. It was set up to entail scoping workshops and professional working groups, comprised of technical analysts, practitioner specialists and patient group representatives. Workshops would meet to define and delimit NICE technical assessments, and groups would meet periodically to oversee the development of guidelines stemming from these assessments (but not evaluate their effectiveness). There was also, echoing the FSA example, a move to set up Citizens Council which could provide input especially into ethically contentious areas.

Powerful stakeholders among the medical profession and medical industry provisionally accepted the legitimacy of the new authority. They recognised a need to have a settled, impartial body that could provide the basis for stable practice. Yet there remained wariness about surrendering professional autonomy. Implementation was characterised by ‘painful foot-dragging’, led by the powerful British Medical Association, over concern about the effects on individuals in medical practice (Irvine 2014, pp. 16-17). The move to deal with the so-called ‘postcode lottery’ also appealed to individual professionals, patient groups and a broader public concerned about inequality in service provision, so long as NICE did not become a crude tool of service rationing—a term which the government consciously shoed away from using. A criticism recalled by Conservative MP Ann Widdecombe in the House of Commons debate surrounding the establishment of NICE colourfully compared the government’s action to:

A child hiding under the bedclothes . . . imagining the problem of rationing is a monster that will go away if it refuses to acknowledge it (House of Commons 1999).

This broader context can help explain why NICE’s remit was limited in the initial stages. Wariness among practitioners and industry stakeholders accounts for why NICE originally attained something less than full agency status, with powers only to recommend standards and no powers to enforce them. Wariness among civil society actors and the broader public about the rationing (and thus creeping retreat from provision) of health services similarly required a commitment to softening assessments and leaving space for stakeholder and citizen input.

Yet, in practice, time has served to extend the remit of NICE and reinforce its powers and autonomy. It subsequently absorbed the public health and health prevention roles of the Health Development Agency. And, in the face of another famed bout of quangocide with the election of the Coalition government in 2010, NICE bucked the trend, attaining full agency status and expanding its remit to incorporate key aspects of social care. Its independence, influence and scope have all been strengthened (see Department of Health 2013).

*The mode of coordination*

We see then that there are broad similarities in the institutional configurations of NICE and the FSA—with an emphasis on multi-stakeholder committees and input solicited from lay citizens. Such institutional arrangements entailed associated practices of collaboration and transparent reporting (and indeed NICE, like many arms-length bodies now, has followed the lead of the FSA in open policymaking). However, a key difference emerged in the mode of coordination practices. Where a commitment to openness had been the defining mode of coordination for the FSA, it was a commitment to evidence-based policymaking that played a similar role for NICE. The key enabler of boundary work was shared buy-in for the notion of evidence-based practice and policymaking—a kind of meta-discourse which has profoundly shaped health policymaking and administration in Britain since the early days of the New Labour government (see Parsons 2002 for a critique). Whereas the open FSA came under fire for perceptions of political bias (either way), NICE, in the words of one official, ‘embodies evidence-based policymaking’. Evidence, then, has been at the heart of NICE’s efforts to coordinate action across the political, professional and scientific spheres.

Of particular import was NICE’s emphasis on evidence of both *clinical* and *cost* effectiveness. This was something that initially reignited debate about NICE’s legitimacy in ‘rationing’ healthcare, leading a former healthcare trust chairman to ask:

Is the real agenda not what works best for patients, but what works best for the Treasury? (quoted in Brindle 1999).

However, on the back of the broader ‘what works’ agenda, cost-effectiveness quickly came to be seen as an indispensable element of evidence-based policymaking. The contest instead moved to a finer level of detail, over how cost-effectiveness should be understood and measured. Take, for example, concerns raised by the Multiple Sclerosis (MS) Society over NICE’s assessment of beta interferons and glatiramer acetate (pharmaceutical treatments), in perhaps the first major controversy in NICE’s existence:

The economic model’s narrow definition of the costs of multiple sclerosis underestimates its impact on daily life and reduces the process to one interested only in how much the drugs save the NHS rather than their real effect on people’s lives (MS Society 2001).

But it is important not to confuse mutual acceptance of NICE’s mode of coordination with widespread compliance with the actual assessments it produced. Indeed, where the effect of transparency had important benefits for the FSA’s policymaking performance, the commitment to clinically and cost-effective evidence-based policymaking has arguably had adverse consequences for NICE’s performance. It has enabled stakeholders—especially medical professionals, patient groups and pharmaceutical interests—to contest assessments and pressure NICE to expedite procedures (see Sheldon et al 2004; Boswell 2017). Take the MS example referred to above, for instance. A deal was eventually struck with the pharmaceutical companies, medical professionals and patient groups who were so critical of the initial assessment. NICE officials acquiesced to the demands to fund the drugs on the face-saving condition that emerging evidence built up through the proliferation of treatment would be carefully monitored by a ‘risk sharing scheme’ consisting of all parties. The formal review subsequently commissioned to make the assessment found no evidence of cost effectiveness, but recommended a continuation of the status quo on the basis that:

…uncertainties make reliable interpretation of the short term results problematic, and we have not presented data for the individual treatments, which are likely to be further confounded by selection bias because disease severity might itself determine which treatment is used. The scientific advisory group considered that it was premature, at this stage, to reach any decision about re-pricing the drugs without further follow-up and analyses (Boggild et al. 2009).

So a commitment to evidence-based policymaking has not really entailed a commitment to evidence-based policymaking: it has been a commitment to organising the interaction between science and policy in reference to this discursive repertoire. The emphasis on evidence-based policy making as the mode of coordination has sacrificed some degree of compliance in policymaking terms, and invited criticism and contestation of assessments. But in the process it has buttressed the autonomy of professionals and thus consolidated NICE’s legitimacy as an institution. Politicians, medical professionals and NHS managers might disagree with specific guidelines (and act on that disagreement). They might bemoan a lack of clear guidelines in specific areas (and make-do purely with other sources of expertise, such as practical wisdom). Such concerns have been high in the myriad criticisms aired the media and through periodic scrutiny of NICE via the House of Commons Health Committee (see especially HCHC 2002; 2013). But no one is fundamentally at odds with NICE and its modus operandi. The broader point is that an emphasis on evidence-based policymaking, in the practice of coordination, has provided a means by which the boundaries between science, politics and administration can be safely contested.

**How Boundary Work helps to explain these contrasting trajectories**

Though both NICE and the FSA emerged at the same time, and both have persisted to the present day, a boundary work approach highlights key and revealing differences in their trajectories. This section spells these insights out with reference to the analytical framework developed earlier.

The first insight, founded in an appreciation of the emergence of boundary problems, is that both cases reveal more at play in each context than just moves towards efficiency (the NPM model) or depoliticisation. Of course, both broad narratives have some resonance with each case: the FSA clearly entailed greater specialisation and a desire to put ‘clear water’ between the government and food safety concerns; NICE clearly entailed a move towards rationalisation and a motivation to distance government from emotive media stories about denied access. But both cases also speak to a broader crisis of traditional sources of authority (see especially Hajer 2009) – a blurring of boundaries between science, administration, business and politics and a need for scientists, bureaucrats and politicians to symbolically perform their authority in order to reclaim public trust and legitimacy.

The second insight derives from a focus on the enactment of that authority in the attempts to performatively and discursively demarcate the boundaries between these spheres. The divergent trajectories of these arms-length bodies cannot be attributed to a path dependency founded in different institutional settings. Institutional scope, size and degree of statutory independence have decidedly *not* conferred greater institutional security in practice: the FSA began as a potent and autonomous agency, but finds itself now placed on a tight leash with its central government sponsor and a drastically slimmed down remit; NICE began as a tentative arrangement but has grown to become a fully autonomous agency with a remit increased to include public health and social care as well. These outcomes are not ‘random’. Understanding institutional reform as a performance of demarcation reveals that key organizational variables are not fixed and determining, but fluid and contingent.

The third insight comes from the different modes and practices of coordination across each case that these discursive and performative gestures to transparency (in the case of the FSA) and evidence-based policy making (in the case of NICE) set in train. For the FSA, a commitment to transparent coordination proved unsustainable. The point is not that transparency proved an impossible standard in practice—it did, of course—because evidence-based policy making was an equally impossible standard for NICE. Rather, the point is that the commitment to transparency was a short-term fix that ultimately opened the FSA up to charges of hypocrisy over time. Public and private criticism, from multiple angles, slowly eroded the trust essential to its legitimacy. In contrast, for NICE, the common refrain to evidence-based policymaking has allowed controversies over new treatments to be resolved in ways that sustain buy-in from all sides. The key here is that considerable ‘wriggle room’ remains in the nature and meaning of key measures, such as the notion of ‘value-based pricing’ at the heart of NICE calculations (see HCHC 2013). This inherent ambiguity means that officials can defer or fudge contested assessments; professionals can reinterpret guidelines in tune with their situated understandings; and scientists (and medical and pharmaceutical interests) can go back to the lab in the hope that ‘the truth will out’.

**Conclusion**

This paper has used a boundary work framework to explain how and why the FSA has been subject to radical, disempowering changes in recent times, while NICE on the other hand seems to go from strength to strength. The analysis reveals how the institutional ‘fix’ of an arms-length body depends on effective practices that can sustain buy-in across boundaries without threatening to undermine or transgress them.

The challenge that always confronts case study research like this, though, is that of generalisability. Can this framework help explain variation in other contexts, where arms-length bodies do not perform a regulatory role, or one focused on translating science into policy practice? Though claims to generalisability are typically seen as taboo in the interpretive tradition of rich contextual research (see Schwartz-Shea and Yanow 2012), recent writing from influential figures re-asserts the broader theoretical resonance and relevance of such work. Rhodes (2014) argues that the aim ought still to be ‘plausible conjecture’: that interpretive researchers should still engage with theoretical concerns in ways that achieve broader resonance and challenge or augment existing understandings. On those terms, there are clear grounds for ‘plausible conjecture’ here. The nature of the practices identified in this analysis as enacting and coordinating boundary work certainly have broad resonance across policy settings and sectors: there is a mundane familiarity to the work of committees, working groups, and so on, and a broad appeal to the lofty but vague commitments towards transparent governance and evidence-based policy making. These are not practices and discursive commitments unique to the British context, or to regulatory policy, or to sectors reliant on natural science expertise. Though performances of demarcation and modes of coordination might differ across context, or at least manifest differently, the framework implemented in this paper appears capable of capturing relevant practices elsewhere.

As such, a greater appreciation of boundary work might broaden the research agenda on arms-length governance. In particular, given clear affinities with recent interpretive case research on the legitimation of arms-length bodies (see eg. Wood 2014; Tonkiss and Skelcher 2015; Corbett and Howard 2016), it can provide a framework to allow meaningful comparison across context in the accumulation of rich and embedded insights. It can therefore assist greatly in the broader task of challenging, revising and augmenting received wisdom about arms-length governance to better explain the waxing and waning of such bodies over time and place.

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1. A slightly adapted version of this paper is forthcoming in *Policy & Politics*. [↑](#footnote-ref-1)