

# Quest Active Wellbeing – Purpose, Strategy and Place

## Guidance Notes



**Focus:** To assess how clearly the team understands and articulates its purpose and how well its work aligns with local place-based priorities.

### Key elements:

- Clarity of purpose and strategic goals
- Understanding of local needs (e.g., inactivity, inequality, health)
- Alignment with wider system plans (e.g., ICS, Active Partnership, PH priorities)
- Evidence of collaborative planning in and with the local “place.”

### General Guidance for Organisations

- Ensure your purpose is understood by all staff and reflects a commitment to health equity.
- Align to local ICS priorities, Joint Strategic Needs Assessments (JSNAs), Ward Profiles, and Sport England’s Uniting the Movement strategy.
- Collaborate early with partners to shape shared strategy and place-based interventions.
- Consider tools like Theory of Change or Results-Based Accountability.
- Include underrepresented voices in planning: residents, VCFSE groups, and marginalised populations.

### Best Practice Examples

- Clear slide deck outlining strategic goals and metrics.
- Strategy workshop held with Active Partnership, council, ICS, and community orgs.
- Use of participatory methods like citizens' panels or community mapping.
- Infographics linking purpose to local data and system goals.

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PLAN	
Challenge: Is there a clear, shared organisational purpose aligned to physical activity, health, and wellbeing outcomes?	
<b>Unsatisfactory</b>	<ul style="list-style-type: none"> <li>No clear or documented organisational purpose</li> <li>Little to no reference to physical activity, health, social care or well-being</li> <li>Staff and partners are unaware or confused about the purpose.</li> </ul>
<b>Satisfactory</b>	<ul style="list-style-type: none"> <li>Organisational purpose exists but is vague or generic</li> <li>Some reference to health/wellbeing/social care, but not well integrated</li> <li>Purpose known to some staff, limited partner awareness.</li> </ul>
<b>Good</b>	<ul style="list-style-type: none"> <li>Clear and documented purpose linked to physical activity, wellbeing and health &amp; social care</li> <li>Most staff understand and can articulate the purpose</li> <li>Purpose informs some planning and decision-making.</li> </ul>
<b>Very Good</b>	<ul style="list-style-type: none"> <li>Purpose is widely shared and embedded across teams.</li> <li>Used to drive operational priorities consistently</li> <li>Actively communicated to partners including health, social care and education stakeholders</li> <li>Influences resource allocation and workforce planning</li> </ul>
<b>Excellent</b>	<ul style="list-style-type: none"> <li>Purpose inspires and drives organisational culture.</li> <li>Champions, operational staff, and designated area leads across the organisation and wider system promote the purpose.</li> <li>Purpose shapes strategic partnerships and collaborative initiatives across ICSs, local authorities and communities.</li> <li>Evident in external communications, education/SEND inclusion, and policy influence.</li> <li>Regularly reviewed and refreshed to respond to emerging needs.</li> </ul>

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Challenge: How well does your strategic approach align with local, regional, or national plans (e.g. JSNA, ICS, NHS priorities, Local Authority plans)?	
<b>Unsatisfactory</b>	<ul style="list-style-type: none"> <li>• Strategy is disconnected from local or national priorities.</li> <li>• No evidence of referencing or aligning with wider health, social care, or place-based plans.</li> <li>• Strategy appears outdated or irrelevant to the current context.</li> </ul>
<b>Satisfactory</b>	<ul style="list-style-type: none"> <li>• Some awareness of local/national plans.</li> <li>• Partial or informal alignment with ICS, local authority system priorities or devolution plans.</li> <li>• Strategy is occasionally reviewed against wider frameworks.</li> </ul>
<b>Good</b>	<ul style="list-style-type: none"> <li>• Strategy reflects key local, regional, and national priorities.</li> <li>• Aligned with at least one formal plan (e.g., ICS, JSNA, social care).</li> <li>• Strategy guides delivery and partnership work.</li> </ul>
<b>Very Good</b>	<ul style="list-style-type: none"> <li>• Strong and demonstrable alignment with multiple system plans (e.g., health, social care, SEND, communities).</li> <li>• Strategic goals inform local health and wellbeing agendas.</li> <li>• Partners recognise shared strategic priorities.</li> <li>• Strategy used to influence and contribute to system-wide plans.</li> </ul>
<b>Excellent</b>	<ul style="list-style-type: none"> <li>• Strategy is fully integrated with health, social care and community frameworks.</li> <li>• Organisation actively shapes and co-develops system strategies.</li> <li>• Evidence of contribution to multi-agency work.</li> <li>• Regular horizon scanning and strategic foresight are embedded. (e.g., devolution, population change, outdoor space.)</li> <li>• Strategy supports innovation and transformation agendas.</li> </ul>

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DO	
Challenge: How do you co-develop your strategy or plans with key local partners or stakeholders?	
<b>Unsatisfactory</b>	<ul style="list-style-type: none"> <li>• Strategy developed in isolation.</li> <li>• Little or no partner engagement.</li> <li>• Consultation, if any, is superficial.</li> </ul>
<b>Satisfactory</b>	<ul style="list-style-type: none"> <li>• Some partners consulted informally.</li> <li>• Limited collaboration in developing the strategy.</li> <li>• Partnership input is not consistently reflected.</li> </ul>
<b>Good</b>	<ul style="list-style-type: none"> <li>• Partners actively engaged in strategy development.</li> <li>• Shared priorities are identified.</li> <li>• Evidence of joint planning or workshops.</li> </ul>
<b>Very Good</b>	<ul style="list-style-type: none"> <li>• Strategy co-produced with a range of partners, including health, social care, education and community partners.</li> <li>• Shared ownership and joint accountability.</li> <li>• Collaborative decision-making forums are in place.</li> <li>• Partners regularly review and refresh plans together.</li> </ul>
<b>Excellent</b>	<ul style="list-style-type: none"> <li>• Co-development is embedded and ongoing.</li> <li>• Partners led aspects of strategy alongside the organisation.</li> <li>• Strategy reflects diverse community voices, including SEND, disability and communities.</li> <li>• Formalised governance supports joint strategy.</li> <li>• Approach recognised as an exemplar within the system.</li> </ul>

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DO	
Challenge: How well is your strategy communicated across the organisation and with partners?	
<b>Unsatisfactory</b>	<ul style="list-style-type: none"> <li>• Strategy is poorly communicated or not shared.</li> <li>• Communication is unclear or inconsistent.</li> </ul>
<b>Satisfactory</b>	<ul style="list-style-type: none"> <li>• Some internal communication takes place.</li> <li>• Strategy awareness varies across teams.</li> <li>• Partner communication is irregular or limited.</li> </ul>
<b>Good</b>	<ul style="list-style-type: none"> <li>• Strategy is communicated internally.</li> <li>• The majority of staff understand key strategic goals.</li> <li>• Partners are informed of the strategic direction.</li> </ul>
<b>Very Good</b>	<ul style="list-style-type: none"> <li>• Regular, clear communication with staff and partners across health, social care, education and communities.</li> <li>• Strategy embedded into organisational culture.</li> <li>• Multiple channels are used to reinforce messaging.</li> <li>• Feedback mechanisms support communication.</li> </ul>
<b>Excellent</b>	<ul style="list-style-type: none"> <li>• Communication is proactive, consistent, and engaging.</li> <li>• Strategy is integrated into day-to-day operations.</li> <li>• Strategy drives shared understanding and collaboration.</li> <li>• Communication supports system-wide alignment across health, social care, education and communities.</li> <li>• Organisation recognised for excellence in strategic communication.</li> </ul>

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DO	
Challenge: How does your leadership team support a shared purpose and strategic alignment across systems and teams?	
<b>Unsatisfactory</b>	<ul style="list-style-type: none"> <li>• Leadership is disengaged from purpose.</li> <li>• Little evidence of strategic alignment.</li> <li>• Teams work in silos without coordination.</li> </ul>
<b>Satisfactory</b>	<ul style="list-style-type: none"> <li>• Leadership supports strategy operationally.</li> <li>• Some attempts at cross-team alignment.</li> <li>• Limited influence beyond the organisation.</li> </ul>
<b>Good</b>	<ul style="list-style-type: none"> <li>• Leaders promote shared purpose.</li> <li>• Regular collaboration across teams.</li> <li>• Leadership fosters alignment with wider systems.</li> </ul>
<b>Very Good</b>	<ul style="list-style-type: none"> <li>• Leadership champions purpose and strategic coherence.</li> <li>• Active engagement with system partners.</li> <li>• Encourages innovation and shared accountability.</li> <li>• Role modelling and supporting inclusive leadership behaviours.</li> </ul>
<b>Excellent</b>	<ul style="list-style-type: none"> <li>• Leadership is visionary and highly influential, referencing EDI and SEND awareness.</li> <li>• Drives system-wide alignment and collaboration.</li> <li>• Builds leadership capacity internally and across partners.</li> <li>• Leads culture change and innovation across ISCs, social care, education and local communities.</li> <li>• Recognised for system leadership at place and community level.</li> </ul>

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MEASURE, MONITOR AND REVIEW	
Challenge: How do you monitor and review your strategic priorities and direction?	
<b>Unsatisfactory</b>	<ul style="list-style-type: none"> <li>• No formal monitoring or review process.</li> <li>• Strategy remains static despite changing context.</li> <li>• Little use of data or feedback.</li> </ul>
<b>Satisfactory</b>	<ul style="list-style-type: none"> <li>• Ad hoc or informal review mechanisms.</li> <li>• Some awareness of progress, but limited adaptation.</li> <li>• Monitoring focuses on outputs rather than outcomes.</li> </ul>
<b>Good</b>	<ul style="list-style-type: none"> <li>• Regular reviews based on data and stakeholder feedback.</li> <li>• Adjustments made to priorities as needed.</li> <li>• Monitoring includes some outcome measures.</li> </ul>
<b>Very Good</b>	<ul style="list-style-type: none"> <li>• Embedded review cycles with comprehensive data use.</li> <li>• Monitoring incorporates tools and insights (Census Mapping, Moving Communities, Active Lives, local dashboards).</li> <li>• Reviews include partner and community input.</li> <li>• Learning culture supports continuous improvement.</li> <li>• Clear documentation and communication of reviews.</li> </ul>

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<b>Excellent</b>	<ul style="list-style-type: none"> <li>• Continuous, real-time monitoring and responsive adaptation.</li> <li>• Co-led reviews with partners and communities.</li> <li>• Reviews shape innovation and strategic evolution.</li> <li>• Transparent reporting drives accountability and includes system partners (health, social care, education and neighbourhoods).</li> <li>• Process recognised as best practice.</li> <li>• Horizon scanning built into the review cycle.</li> </ul>
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IMPACT	
Challenge: How is your strategic direction contributing to place-based outcomes and system priorities?	
<b>Unsatisfactory</b>	<ul style="list-style-type: none"> <li>• Strategic direction is unclear or poorly defined.</li> <li>• Limited connection to local priorities or system-wide goals.</li> <li>• Partners and stakeholders are not engaged in shaping strategy.</li> </ul>
<b>Satisfactory</b>	<ul style="list-style-type: none"> <li>• Strategic priorities reflect some local and system objectives.</li> <li>• Some alignment with partners or stakeholders, but impact is limited</li> <li>• Contribution to place-based, health and social care outcomes is partial or inconsistent.</li> </ul>
<b>Good</b>	<ul style="list-style-type: none"> <li>• Strategic direction is clearly aligned with local health, social care, education, and system priorities.</li> <li>• Evidence shows that activities are contributing to agreed outcomes.</li> <li>• Partnerships and teams are aware of their roles in achieving system goals.</li> <li>• Some use of insights/tools (e.g., census mapping, community data) to evidence contribution.</li> </ul>
<b>Very Good</b>	<ul style="list-style-type: none"> <li>• Strategy is closely integrated with place-based, community, neighbourhood and system-wide priorities.</li> <li>• Evidence demonstrates tangible improvements for diverse population groups (e.g., SEND, disability, older people, long-term conditions and use of outdoor space).</li> <li>• Collaborative work with partners drives shared objectives and improvements.</li> <li>• Partners and communities recognise impact, with triangulated evidence from conversations, stakeholders and policies.</li> </ul>



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<p><b>Excellent</b></p>	<ul style="list-style-type: none"><li>• Strategy drives systemic impact, influencing local outcomes, population health, and wider health and social care priorities.</li><li>• Outcomes are measurable and demonstrably linked to organisational direction.</li><li>• Strategy is co-designed with partners, stakeholders, and communities, naming key organisations and roles where appropriate.</li><li>• Learning from strategic outcomes informs continuous improvement and positions the organisation as sector-wide leadership.</li><li>• Evidence includes insights, horizon scanning (e.g., devolution, shifting geographies) and comparative modelling against other areas.</li></ul>
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