The Quest Self-Assessment process is designed to help you benchmark your own performance in advance of the external assessment.

All Teams undertaking an Entry or Plus Assessment should conduct a self-assessment process for the 7 Core Modules. Teams going through Plus can self-assess against other listed Modules as well if they so wish. Teams going through the new Directional Review process should pick the 7 Modules of most relevance to them. CSP’s should use the current CSPN self-assessment model.

The results from the wheel should be shared with the Assessor ideally before the Assessment.

All Stretch Teams will need to complete a self-assessment for all listed modules as part of the process. The involvement of external parties/agencies is recommended to add another perspective.

The question areas relate directly to the Quest modules and reflect the broad approach of Quest by exploring how you PLAN-DO-MEASURE-REVIEW and IMPACT.

The questions listed below do NOT relate directly to the Guidance Notes. They are general questions that will help you prepare for the assessment and will make you think about how you are performing against best practice in the field.

The best approach is to involve a number of team-members (or partners/Board members) and for people to individually score how well you think you are performing against each question area.

Score 0 to 10 in each question to see how round your wheel is and note what factors score least and most highly in order to pinpoint improvement areas and recognise strengths.

Part of this process is to make a judgment on alignment within and across the team by comparing scores from the different perspectives. To get an overall score collate all the scores and take an average before producing a composite wheel for each module.

Using the spreadsheet provided you can look at you average scores across each modules, remembering all of the time to see how round your wheel is.

If it is helpful facilitators can be provided by the Quest Office to assist with this process which should be linked to work on the presentation on value and impact that forms part of the external assessment.

The Quest focus is particularly strong on measurement and impact so use this exercise to collect information and evidence which can be used during the assessment itself.

The self-assessment exercise is something you can repeat each year as part of an improvement plan.

The self-assessment is a self-scoring exercise - it is a reflecting exercise and is good for teambuilding and review.

It is not scored or rated as part of the overall assessment, but it will help the assessor to determine your levels of self-awareness and reflection. It is providing you with information on areas of improvement that can complement the views of the Assessor and Partners.

*Please submit a completed self-assessment to your assessor at least 72 hours before your assessment.

**Questions - Core Modules**

**Continuous Improvement**

1. We have a comprehensive and live 3 to 5 year **Business Plan/Strategy which is aligned** to both national and local strategies and needs assessments.
2. We have clearly defined our **purpose, vision and values** to influence and inform local delivery.
3. We have clear **business objectives** in place based on evidence of need which are outcome focused.
4. We have a “balanced scorecard” of **key performance indicators** that are driven by our business objectives.
5. We have robust and effective **decision making processes and good governance**
6. We **benchmark** inside and outside the sector to inform learning and service development.
7. We have effective **review processes** involving staff and partners.
8. We can define **high performance** in our sector and have a clear view of where we are and what we have to achieve to be high ranking.

**Active Community Outcomes**

1. We **research community needs** and know what Joint Strategic Needs Assessments and Public Health Outcomes Framework priorities are locally.
2. We are confident that key markets and particularly those people living in **disadvantaged** neighbourhoods who need our services most are engaged and supported.
3. We work well across agendas, organisational boundaries to co-produce **new approaches and shape services** that can contribute and effect long term change.
4. We know the community agencies, local spaces, facilities and opportunities that would support the development of a programme aimed at the inactive, disabled people, those at risk, and those who are most disadvantaged in order to **address inequalities**
5. We pro-actively **involve stakeholders**, referral agencies and the community in our planning, delivery and review processes.
6. We have an **organisational theory of change/outcomes framework** with appropriate indicators and measures that address physical well-being/mental well-being/individual development/social and community development/economic development as appropriate.
7. We use a monitoring and evaluation system to assess, manage and report the outcomes of our work.
8. We can communicate and **demonstrate** the impact of our work to a range of stakeholders, funders/commissioners to help **influence** change.
Insight and Marketing

1. We have a long term marketing strategy in place as an integral part of our Business Plan which is informed by national/local insight, data and external/internal analysis.
2. We have a 1-3 year Marcomms plan in place working across places, product, promotion and programming elements of the mix to identify our roles and USPs in order to deliver market development and achieve greater influence, profile, sustainability in the longer term.
3. We have inspection capability which we use effectively to develop and retain new markets.
4. We have access to specialisms and skills sets that give us the ability to devise and deliver campaigns using social media and other channels to stimulate demand and engage new audiences/new markets.
5. Behaviour change theory is applied to activities and programmes and collateral is used that will engage and retain new users.
6. We have clear marketing objectives and measures in place.
7. We use best practice in the service and commercial sectors to guide our planning and actions.
8. We can demonstrate impact and positive behavioural change resulting from our use of insight; data capture and marketing activity.

Increasing Participation and Reducing Inactivity

1. We have a clear plan of action in place which is informed by local priorities and needs assessment.
2. We have identified our target markets/communities where there is a need to address health inequalities and increase levels of activity.
3. We make the right interventions and have the right products to reach, engage and retain our target markets.
4. We have the right partnerships and/or supply chain in place to reach and engage our target audiences and deliver effective market development.
5. We have KPIs and targets in place.
6. We are able to track users to demonstrate the change in participation levels and whether that behaviour change has been sustained long term.
7. We capture and then utilise data and information well to allocate resources and to prioritise our work.
8. We are making a clear contribution to increasing participation/activity levels in our patch and to social and community development through our work.

Partnership and Collaboration

1. We think through and plan our partnership approaches, stakeholder engagement and working practices.
2. We reach out to develop new partnerships inside and outside of sport to deliver our purpose.
3. We have effective partnership agreements in place with reviews planned.
4. We can track the additional resources and opportunities we generate through collaborative working.
5. We measure the satisfaction/value of our partners with our service/staff team.
6. We regularly and routinely consult with our partners at a strategic and operational level.
7. We learn from our partners and search for and share best practice from inside and outside our area.
8. We can demonstrate the impact and results of our collaborations to deliver participation, demonstrate added value and contribution to national/local outcomes.

People and Skill Development

1. We plan what we do around team and team working to create accountability and ensure we have the right skill sets to deliver results.
2. We have high quality leadership and management in place providing purpose, vision and clear values.
3. We have clear objectives and targets for individuals and the wider service.
4. We have an effective competency framework, training/development and appraisal processes that identifies skills/behaviours, supports individual and professional development and sets clear objectives.
5. We have measures in place to recognise our performance, our engagement and our productivity.
6. We have high morale in this team/service.
7. We recognise and reward high performance and manage poor performance.
8. We have a high performance culture in our team that strives to achieve excellence in all we do.

Quality Assurance

1. We have a quality assurance system in place to ensure that staff and partners/our supply chain deliver high standards of performance.
2. We have an Equality policy in place, external accreditation and can show clear results/improvement as a result.
3. We have a Safeguarding policy in place alongside external accreditation and can show clear results/improvement as a result.
4. We have bespoke Health and Safety policy/procedures/audit processes supporting delivery and can show results/improvement as a result.
5. We can demonstrate value for money including added benefits including economic development and social return on investment.
6. We have measures in place that can show improvement in our operational efficiency and performance.
7. We have a formal review process of core systems and processes as part of governance arrangements; efforts to promote innovation/enterprise, change management; the adoption of best practice and the deployment of resources to best effect.
8. We can evidence and demonstrate improvements in systems and processes that have had a positive impact on the service to customers/end users.
Questions - Stretch Modules

Leadership

1. We have total clarity around our purpose, vision, values and business objectives.
2. Leaders are really good at change management and make it happen to best effect.
3. Leadership creates PARA at all levels - Power, Authority, Responsibility and Accountability to support our work.
4. We have a high performance culture in our team, which is committed to delivering high standards, and is always looking for ways to improve delivery and processes.
5. We recognise achievement and success as part of a positive approach to performance management.
6. There is an effective leadership development programme in place that takes into account the succession needs of the organisation and the progression of individuals.
7. We have transparent processes in place that provide internal and external measurement and analysis of leadership performance.
8. The impact of our leadership strategies and actions can be clearly evidenced in our results and through the testimonials/evaluations of partners.

Insight

1. Outcomes Framework and/or a Theory of Change Model drives our thinking and we value the use of insight and embed it as a pre-requisite for all planning and decision making processes.
2. We access Local Sports and Health Profiles, segmentation tools and national insight material produced for women; disabled people and young people to plan strategy and projects/programmes making use of data and information to guide action planning and support staff and partners in their work.
3. We have a monitoring and evaluation process in place to provide information and evidence on the interventions we make on the back of the insight we have used.
4. We have a high quality data management process in place which provides us with the information we need on who is accessing our projects/programmes as well as where and when.
5. Staff are comfortable and skilled in the use of insight data and can access specialist knowledge/support when necessary.
6. We have a high level understanding of our patch and community, using insight tactically to shape services, develop collaborations and prioritise.
7. We review our use of insight - its usefulness/effectiveness; how we share it across partners and how it can be developed to support learning, growth and the promotion of best practice.
8. We can demonstrate that our use of insight has influenced, shaped and impacted on service delivery and led to greater engagement and activity by the people who we are aiming to reach, engage and retain.

Contribution to Health and Wellbeing

1. We have a strategy and plan in place that is well communicated and jointly owned with key agencies in our area.
2. We understand the public health agenda and the organisation of the NHS locally.
3. We have the right skill sets in the organisation.
4. We have influenced the Public Health commissioner’s priorities locally, to include sport/physical activity.
5. We have protocols and processes in place that meet public health commissioner requirements.
6. We have gold standard measures that evidence the quality and impact of our work. Measures are robust and accepted by commissioners as medical evidence that the service/intervention is effective.
7. We can demonstrate that our interventions represent good value for money to the commissioner, when compared to other available interventions – sustainable change realised.
8. We can show we are making a difference to levels of activity and to individuals on our programmes demonstrating added value to physical and mental well-being outcomes.

Engaging with Communities

1. There is a Community Engagement Strategy which is informed by local planning processes and part of the wider Business Planning Model.
2. There is a Stakeholder Engagement Matrix which identifies levels of influence/interest in relation to the core purpose.
3. Target communities/populations are clearly identified and prioritised in or plans and that is where we focus our resources/interventions.
4. Collaborative working is in place and there is evidence in place that shows it is operating well.
5. Staff are representative of the population and communities served. The team know the patch well and work “out of the box”.
6. Stakeholder groups are fully involved in service planning and review.
7. Performance measures and targets are in place.
8. The impact of community engagement, local regeneration, capacity building and grassroots development can be clearly evidenced in terms of participation, volunteering, skills development and/or activity levels.

Engaging with Disabled People

1. Plans are in place to engage, attract and retain disabled people to activity and sport.
2. Participation rates are improving as a result of actions planned and interventions made.
3. There is extensive use made of national and local insight as well as local needs assessments and plans.
4. There are effective partnerships and collaborations in place which help listen to, reach, involve and support disabled people.
5. Staff are well trained, skilled and confident in this area of work.
6. There is full involvement of disabled people in planning, design, development and review processes.
7. Measures and targets are set to help manage performance and improvement.
8. There is evidence of impact which is well communicated and articulated.
Getting the Inactive Active

1. There is a multi-provider approach with agencies working to common goals and outcomes
2. There is a Physical Activity Action Plan in place
3. Behaviour Change is at the heart of delivery
4. There is co-production and delivery of services, interventions and projects
5. There is gold standard measurement of performance and change
6. There is a Standard Evaluation Framework in place
7. There is a process whereby learning and best practice is shared so effective interventions can be scaled up or replicated
8. There is evidence of impact informed by soft outcome studies, case studies and quantitative analysis which has been well communicated /articulated
Measuring Outcomes and Impact

1. We have an Outcomes Framework and Logic Plan to help us plan how to provide and communicate analysis of the impacts/outcomes of our work to our key stakeholders.
2. We have the evaluation processes in place that can help demonstrate the impact of our work across the local landscape against national outcomes in the new Sports Strategy.
3. We can demonstrate the impact of our work in sport across local priorities in health, education and regeneration agendas locally.
4. We have the ability to track users and the associated impact of the activity/intervention.
5. We can demonstrate value for money and effectiveness to ensure it is valued by commissioners and decision makers locally.
6. We have sufficient individual case studies and “soft outcomes” studies around the key areas of our work to demonstrate how we reach and retain new markets.
7. We work closely with partners/stakeholders/third parties to produce proxy measures and outcome analysis.
8. We can provide evidence of our impact on well-being, individual development and social/community development priorities and outcomes.

Engaging with the Voluntary Sector

1. We have a Plan/Strategy in place that is working well which links with our wider club and coach development work.
2. We understand the needs and requirements of the voluntary sector inside and outside sport.
3. We have developed excellent communication channels with the sector to help them leverage funding, advice and support.
4. We provide direct and effective financial and technical support and advice to the sector to support and design in sustainable development.
5. We proactively recruit, deploy and support volunteers in our locality - a Volunteer Investment Programme or equivalent over the long term.
6. We have clear measures and targets in place for our work with the voluntary sector.
7. We can put a social and economic value on our work with the voluntary sector and volunteers.
8. We can demonstrate the difference we make to our outputs and outcomes through our work with the voluntary sector and volunteers.

Sports Specific Development

1. We have a Plan/Strategy in place that is locally driven with reference to national agendas and local opportunities.
2. We have identified the sports and local clubs/facilities where we can make most difference to participation levels in the area.
3. We have identified the sports and local clubs/facilities where we can make most difference to the development of development pathways for young people in particular.
4. We have local support and development programmes in place to build up the capacity of coaches, volunteers and clubs and are growing our reach.
5. We adopt and learn from best practice to make things happen on the ground that increases participation and performance levels.
6. We have clear and open KPIs and targets in place for our work.
7. We have soft outcome and case studies in place that show the impact of our work with clubs and NGBs.
8. We can show the difference our work with clubs and NGBs has made to our own aims and objectives.

Financial Management and Business Development

1. We have a long term financial and business development plan in place that underpins our core purpose and business objectives.
2. We manage budgets well with staff easily able to access live financial and management information.
3. We are trained on financial management and wider commercial thinking and can access skills/support in this area.
4. We have clear Key Performance Indicators in place across the service to provide clear measures that drive income, cost control, occupancy, financial leverage; economic/skills development and social return on investment.
5. We can demonstrate our value for money and the targeting of subsidy to commissioners and funders.
6. We are creative and enterprising and use marketing/business planning tools to generate income, attract funding and reduce subsidy levels.
7. We review our budget performance regularly and have trend analysis on our performance.
8. We can show improvement in our financial performance over time through our efficiency and business development planning.

Customer Insight

1. We are pro-active around market research/community engagement to find out what attracts users and what barriers impact most on non-users of facilities/services.
2. We understand the market place and are able to analyse/identify who exactly are currently using our products and services.
3. We are customer-centric and can deliver well directly to end users.
4. We are able to use social media effectively for information, communication and analysis of behaviours and trends.
5. We are able to track individual customers to show the impact of our interventions both to engage and also to retain.
6. We can show the improvement we have made in reaching key market segments and delivering products and services that change behaviours and deliver positive health outcomes.