SMART Objectives

SMART Objectives are valuable tools that your organization can use to establish meaningful mileposts as you work toward specific goals.

Objectives are more immediate than goals and should be based on the strategies you have selected to meet your goals.

Because strategies are implemented through objectives and quality improvement activities, multiple objectives are generally needed to address a single strategy. Objectives are the



basis for monitoring the implementation of your strategies and progressing toward achieving your goals. Objectives also help set targets for accountability.

SMART Objectives are:

1. Specific:

- Provide the who and what of quality improvement activities.
- Use only one action verb, since objectives with more than one verb imply that more than one activity or behavior is being measured.
- Avoid verbs that have vague meanings to describe intended outcomes, since it may be difficult to measure them.
 - -Vague: "CNA will understand proper turning technique."
 - Specific: "CNA will list three appropriate ways to turn residents and use these techniques daily."
- Remember, the more specific it is, the more measureable it is.

2. Measurable:

- Quantify the amount of change expected. The objective provides a reference point from which a change in the target population can be clearly measured.
- Remember, it is impossible to determine whether objectives have been met unless they can be measured.

3. Achievable:

• Be sure that objectives are attainable within a given time frame and with available program resources.

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SMART Objectives (continued)

4. Realistic:

- Accurately address the scope of the problem and establish steps that can be implemented within a specific time frame.
- Be sure that objectives directly relate to the program goal.

5. Time-phased:

• Provide a time frame in which the objective will be measured or met. This will help you plan and evaluate your quality improvement strategy.

Examples:

Non-Smart Objective

• CNAs will be trained on the selected evidence-based pressure ulcer curriculum.

This objective is not SMART because it is not specific, measurable, or time-phased.

Smart Objective

• By the end of 2012, the DON and other nursing staff will have trained 75 percent of CNAs on the selected evidence-based pressure ulcer curriculum.

This objective is SMART because it indicates who is responsible for training, how many will be trained, who will receive the training, and when the trainings will be completed.

Non-Smart Objective

• Ninety percent of residents' family members will participate in training on effective communication with nursing home staff.

This objective is not SMART because it is not specific or time-phased.

Smart Objective

• By the end of the first quarter of 2013, AAA staff will have delivered training to 90 percent of residents' family members on effective communication with nursing home staff as part of a formal new resident orientation program.

This objective is SMART because it specifically indicates who will conduct the training, who will participate in the training, a target number to be trained, and a completion date.

Additional Resources:

More information on writing SMART objectives can be found at: http://www.cdc.gov/HealthyYouth/evaluation/resources.htm.





Criteria to Assess SMART Objectives

1. Is the objective SMART?

Specific:

Who is doing what? List person completing the activity and the target population, followed by description of the activity.

Measurable:

Can you count it or observe it?

Achievable:

Can this realistically be accomplished given our internal and external resources?

Realistic:

Does this objective work toward the facility's mission, goals, and values?

Time-Phased:

Provides the timeline.

2. Can you answer the questions who, what, where, when, and how?

3. How and when do you plan to evaluate the outcome?

