SMART Objectives Template

When it comes time to define the goals and objectives of your application, this template will walk you through the process of developing *specific, measurable, achievable, realistic, and time-based* objectives.

Once you have created the goals of your application, it is time to think about objectives and activities needed to accomplish these goals. Here's an example:

EXAMPLE: Increase the number of people in public health informatics who are from minority groups or vulnerable populations.

Key Component	Objective
Specific - What is the specific task?	Inform minority students about the field of public health informatics and recruit them to join as professionals.
Measurable - What are the standards or parameters?	Number of minority institutions where recruitment activities are implemented; Number of new minority individuals who attend the Public Health Informatics Network (PHIN) conference
Achievable - Is the task feasible?	Yes, when connected to the training initiatives of national partner organizations.
Realistic - Are sufficient resources available?	Not at the local or state level (no time or resources to commit to this activity). Involve national organizations.
Time-Bound - What are the start and end dates?	One year – between the 2008 and 2009 PHIN conferences
SMART objective 1a: From August 2008-2009, establish recruitment initiatives at historically Black colleges and other minority institutions in conjunction with the training initiatives of national partner organizations (e.g., NACCHO, ASTHO).	

You can use the following tables to help your CBO develop SMART objectives that will ensure you reach the goals set forth in your application.

Activity 1: Describe your Community

Use data to identify communities with social high vulnerability, high COVID-19 case burden, and/or disproportionately low COVID-19 vaccination rates. – Use CDC's SVI or equivalent CDC SVI metrics at the ZIP code level, or another more granular level like Census tracts and other COVID-19 burden/vaccination data to identify specific communities of focus (e.g., geographic areas and the racial/ethnic minority groups or other vulnerable population(s) groups within them, such as the elderly and people with disabilities, communities with low car ownership, limited access to public transportation, the number of people who live within a defined radius of a vaccine provider, limited access or inability to effectively use technology, etc.).

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Activity 2: Ensure Complete Demographic Data through simplified vaccine registration

Ensure completeness of reporting race and ethnicity, other demographic information, and location of vaccine administration and residence in data submissions to CDC. OSIIS team will provide baseline data for your county at the beginning of the grant period and will be updating you on the progress quarterly. Ensure registration is accessible to those with limited English proficiency or limited literacy and access to technology. Registration should not require nonessential documentation, such as proof of citizenship that is likely to deter individuals from immigrant communities from seeking vaccination.

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Activity 3: Listening/Engagement Sessions

Hold community listening sessions, town halls or other partner engagement sessions aimed at specific disproportionately affected populations (e.g., communities of color, incarceration facilities, eProvide subject-matter expertise during community events promoting and/or educating about COVID-19 vaccination in racial and ethnic population sub-groups. Examples of community events include town halls, round-tables, and Q/A sessions.

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Activity 4: Promote and Conduct Vaccine Education

Develop and promote vaccine education and outreach events that will reach community members served by your organization. Engage in existing community outreach activities and collaborate and/or contract with local Community Health Workers, immunization coalitions, and patient navigators to improve education and outreach to the organization's communities of focus. Support culturally sensitive methods to translate communication materials into community-specific languages or dialects to help ensure information is conveyed in an accurate manner and fosters meaningful community engagement. Eg: Use existing CDC social media and campaign resources, as appropriate and implement community-based and culturally and linguistically appropriate messages that focus on COVID-19 spread, symptoms, prevention and treatment, and benefits of vaccination. Utilize community engagement forums, advisory groups, etc. to ensure the messages are appropriate and suitable for the audience.

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Activity 5: Maintain Repository of Existing Education and Outreach

Maintain a repository of existing resources, organized by disproportionately affected populations, at the state and local level to provide transparency, accountability, and improved access to the public as well as internally. Example resources include: • community-based organizations, • faith-based organizations, • sheriff's associations, • homeless shelters.

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Activity 6: Create and ensure access to vaccine

Ensure access to vaccination sites and appointments throughout the jurisdiction by using multiple types of locations and with flexible hours that are accessible to and frequented by the identified communities of focus. Vaccination sites should include, but not be limited to: • pharmacies, • healthcare facilities, • community-based sites, • mobile sites, • both large-scale vaccination sites and small or on-site pop-up vaccination sites. Hours of vaccination sites should take into consideration: • the needs of frontline workers and communities that may not be able to leave work during core daytime hours; • the needs and capacity of community-based sites, as not all will be able to meet requirements of size, hours, and staffing.

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Activity 7: Partner with local transportation services

Partner with local transportation services or transportation network companies to provide no-cost transport to vaccination sites in communities of high social vulnerability. Rural Areas only

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Activity 8: Support Coordination of a Mobile Clinic

Examples would be Helping to register participants receiving vaccine to ensure completeness on the forms and/or providing a venue in which to hold the vaccine clinic or education panel.

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Activity 9: Reach Homebound Individuals

Partner with nutrition, HIV, and STD programs to plan and implement mobile vaccine clinics to reach homebound individuals in communities of high social vulnerability.

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