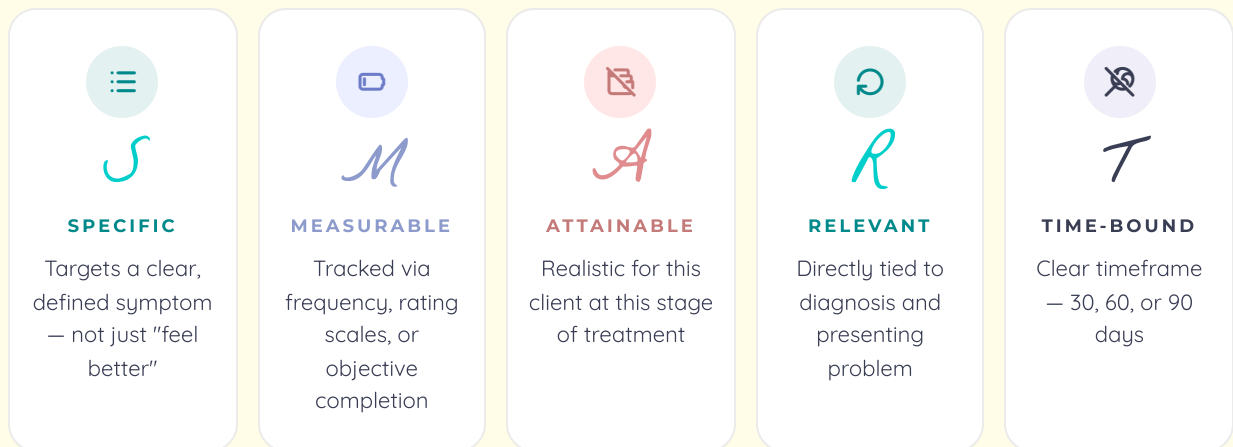




How to Write SMART Treatment Plan Goals

A clinical reference for therapists who want goals that are audit-ready and client-centered

THE SMART FRAMEWORK



WHAT THE RESEARCH SAYS

Why goal quality actually matters



GOAL IN PRACTICE



TOO VAGUE

"Client will reduce anxiety."



SMART GOAL

"Client will manage panic attack symptoms, reducing frequency from 4+ to 2 or fewer per week within 90 days, as measured by self-report and weekly check-ins."

MAKING GOALS CLINICALLY SOUND & AUDIT-READY



Tie every goal to the diagnosis

Payers need a clear line: symptoms → diagnosis → goals → interventions → progress.



Name a measurement strategy

Use PHQ-9, GAD-7, PCL-5, client rating scales, or objective completion.



Stick to realistic timeframes

30, 60, or 90 days is the standard — both realistic and what reviewers expect.



Update plans regularly

Review every 3–6 months. A stale, unsigned plan is one of the easiest audit risks to avoid.



Pro tip: Use client language + objectives for measurability

Write the goal in your client's own words about what they want their life to look like. Then let your treatment objectives carry the clinical specificity. Their goal, your documentation. That's the sweet spot.

