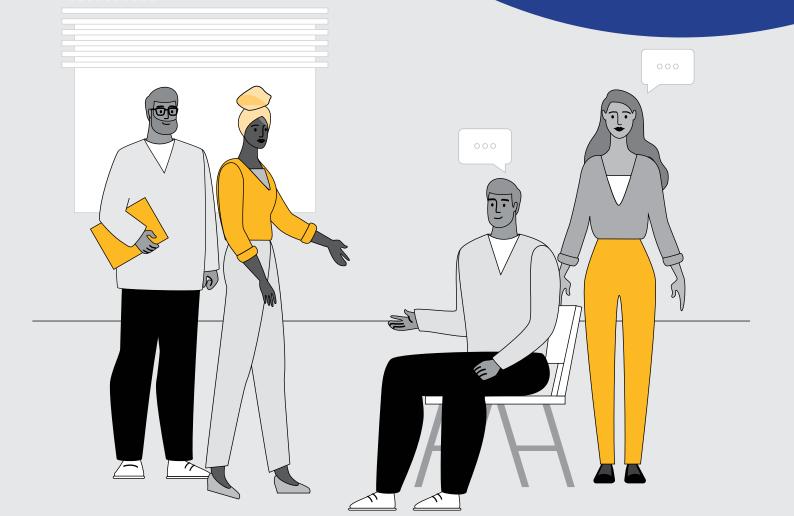


Practical guide on the welfare of asylum and reception staff

Part II: Staff welfare toolbox

EASO Practical Guides Series

September 2021



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ABOUT THE GUIDE

Why was this guide created? The mission of the European Asylum Support Office (EASO) is to support Member States of the European Union and associated countries (EU+ countries) by providing common training, common quality standards and common country of origin information, among other things. To achieve its overall aim of supporting EU+ countries in achieving common standards and high-quality processes within the Common European Asylum System, EASO develops common practical tools and guidance.

This guide on staff welfare was created as a result of a request from the EASO Vulnerability Experts Network. Working in the field of asylum and reception has been acknowledged as taking a toll on the overall well-being of managers and their teams. Authorities indicated a need for guidance on how best to integrate staff welfare measures within the ongoing activities and support provided.

How was this guide developed? The development of this guide started with a mapping exercise across EU+ countries to learn the needs of first-line officers working in the field of asylum and reception, and to understand the existing good practices that can be built upon. The findings of the mapping exercise were the basis for the development of this guide. Member State experts supported the development of content, and the drafting process was coordinated by EASO. Before finalisation, a targeted consultation with experts in the field of staff welfare took place, and the guide was reviewed by the EASO Vulnerability Experts Network.

Who should use this guide? This guide is primarily intended for managers in asylum and reception authorities. Nevertheless, parts of this guide are useful to human resources departments, first-line officers, internal and external specialists, and civil society organisations.

How to use this guide. This guide comprises three stand-alone although complementary parts. Part I: Standards and policy focuses on how authorities are to develop a staff welfare strategy when there is not yet a strategy in place; it is supported by suggested standards and indicators for that purpose. Part II: Staff welfare toolbox details all the practical tools identified as good practices, which have already been implemented in some EU+ countries. Part III: Monitoring and evaluation provides a monitoring and evaluation mechanism to support authorities with tools to monitor progress made by measures rolled out in a simple manner. This guidance intends to complement, not to replace, local policies and strategies focusing on staff welfare in EU+ country authorities.

How does this guide relate to national legislation and practice? This is a soft convergence tool and is not legally binding. It reflects good practices shared by EU+ countries and their experts, which have been translated into standards to guide authorities in their efforts on staff welfare.

Contact us. If you have any questions or feedback on this document, contact the EASO vulnerability team by email at vulnerablegroups@easo.europa.eu.

CONTENTS

Acknowledgements About the guide Abbreviations Background	2 3 5 6
 INTRODUCTION 1.1. Main target groups for this practical guide 1.2. How to use this practical guide 	8 11 12
 2. ASSESSMENT TOOLS 2.1. Preliminary staff welfare screening 2.2. Semi-structured one-on-one meetings 2.3. Focus group discussions 2.4. Quality of employment survey 2.5. Self-assessment: burnout test 	16 18 19 20 21 22
 3. SUPPORT INTERVENTIONS PROVIDED BY MANAGERS AND PEERS 3.1. Intervision 3.2. Team building 3.3. Targeted support interventions linked to critical incidents 	24 25 31 35
 4. SUPPORT INTERVENTIONS PROVIDED BY INTERNAL AND EXTERNAL SPECIALISTS 4.1. Psychosocial group sessions and coaching 4.2. Individual counselling sessions 4.3. Educational supervision 4.4. Mediation 	44 46 46 47 48
5. SELF-CARE 5.1. How to develop a self-care plan 5.2. How to set healthy boundaries	50 53 55
6. CAPACITY-BUILDING INTERVENTIONS6.1. The benefits of investment in the capacity of staff6.2. Staff welfare-centred capacity building	56 58 58
Annex 1. Definitions Annex 2. Recruitment interview grid template Annex 3. Semi-structured check-ins or one-on-one meetings Annex 4. Quality of (de-)employment survey samples Annex 5. Self-assessment: burnout test Annex 6. Methods of intervision Annex 7. Team-building activities by stage Annex 8. Critical incident checklist Annex 9. Internal support provision regarding critical incidents Annex 10. Critical incident reporting template Annex 11. Reflection tool after a critical incident has occurred Annex 12. Setting boundaries and grounding techniques after a critical incident Annex 13. Self-care plan Annex 14. Sample training programme with a focus on staff welfare	64 65 68 71 73 78 80 90 104 110 119 121 122 124 125
Annex 14. Sample training programme with a locus of start wehate	132

ABBREVIATIONS

COA	Central Agency for the Reception of Asylum Seekers
IID	Dienst Justitiële Inrichtingen (Custodial Institutions Agency)
DT & V	Dienst Terugkeer en Vertrek (Repatriation and Departure Service)
EASO	European Asylum Support Office
EU	European Union
EU-OSHA	European Agency for Safety and Health at Work
EU+ countries	Member States of the European Union and associated countries
Fedasil	Federal Agency for the Reception of Asylum Seekers
FGD	focus group discussion
HR	human resources
IND	Immigratie- en Naturalisatiedienst (Immigration and Naturalisation Service)
JCvSZ	Justitieel Centrum voor Somatische Zorg (Judicial Centre for Somatic Care)
КСТ	ketenbreed calamiteitenteam (organisation-wide incident team)
SOP	standard operating procedure
SWS	staff welfare standard

BACKGROUND

Academic research (1) conducted on this topic and the European Asylum Support Office (EASO) meetings held with staff in the field indicate that professionals working in the fields of humanitarian aid and asylum are more prone to suffer from depression, anxiety or burnout than staff working in other settings. Reasons that were given include that the work is particularly demanding owing to lack of resources, exposure to the suffering of the population they are working with and job insecurity, all of which can take their toll on well-being. At the beginning of 2019, EASO was requested by the national contact points of the EASO Vulnerability Experts Network to share good practices, from across Europe, of self-care and staff welfare during the annual meeting of the EASO Vulnerability Experts Network. As a first step, EASO distributed a survey to the national contact points from across the Member States of the European Union and associated countries (EU+ countries) that are members of EASO networks for reception and asylum processes and the EASO Vulnerability Experts Network. The aim of the survey was to learn more about efforts made by authorities and civil society organisations in the area of staff welfare. A mapping report $(^{2})$ on the practices currently being used and on the needs and gaps identified by respondents was compiled and shared with the three EASO networks in December 2019.

One main lesson learnt from the mapping exercise was that chronic work-related stressors that are left unmanaged can lead to changes in the way staff behave, can affect their belief systems as well as their emotional states and can have consequences for their physical well-being. This is particularly evident in terms of how staff feel when exposed to prolonged stress. Prolonged stress leads to an increase in mood swings, feelings of anger and a lack of motivation to work, as reported by respondents to the survey launched by EASO in 2019.

Solanki, H., Mindfulness and Wellbeing: Mental health and humanitarian aid workers – A shift of emphasis from treatment to prevention, Action Against Hunger, London, 2015; Antares Foundation, Managing Stress in Humanitarian Workers – Guidelines for good practice, 2012.

⁽²⁾ A total of 23 countries participated in the survey, 21 of which are EU Member States. Contributions were also received from Norway and Serbia. A total of 89 individuals participated. First-line officers mentioned daily exposure to traumatic content, a high workload and low salaries as main stressors. Meanwhile, managers rated the high level of bureaucracy, lack of structure at work and job insecurity as major reasons for stress, among others. The findings indicate that participants noted changes in the way they feel, behave and act, both at work and in their private lives.

Overall, the survey revealed a need to improve the following areas within work settings **to prevent risks** of ill health (physical and mental) for employees:

- senior management's commitment to and awareness of the **duty of care** and the importance of ongoing support provision to staff throughout the deployment/ employment cycle;
- strengthening pre-hire activities (e.g. medical and psychological screening of all staff);
- availability of and access to clear information on policies and activities relating to staff welfare.

Lastly, addressing the work-context pressures related to how **migration** is currently perceived in Europe appears crucial. Findings demonstrate that the often rather negative narratives on the topic will need consideration when assessing and addressing the staff welfare needs of managers and first-line officers.

During 2020, EASO, together with Member State experts from **Belgium**, **Germany**, **Greece**, the **Netherlands** and **Romania**, developed this practical guide by integrating findings from the intial mapping exercise conducted in 2019. The guide comprises **three stand-alone parts** with the aim of supporting asylum and reception authorities in their efforts to ensure staff well-being.



1. INTRODUCTION

1. INTRODUCTION

This guide focuses on work in the field of operational asylum, which, by the nature of the work, necessitates specific work environments. Staff working in asylum-related workplaces (such as case officers, workflow managers, registration officers, reception officers and team leaders) often face various challenging physical and psychological conditions. These challenges can include a constantly high workload, an often unpredictable working environment due to the constant changes in the numbers of arrivals of applicants for international protection, exposure to persons who have experienced trauma and, in some instances, a lack of resources to deal with daily tasks.

For the purpose of this practical guide, these risk factors can be placed into **two** main categories (³).

- Risk factors that affect first-line officers working directly with applicants for international protection. The risk factors can potentially lead to vicarious trauma. Examples include case officers who listen to traumatic experiences shared by applicants and reception officers working with traumatised people on a daily basis.
- Stress factors (⁴) that risk affecting entire teams. Stress factors can lead to burnout, since a prolonged stressful work environment can affect the well-being of staff members, from first-line officers to managers.

It is important to note that people working in this line of work do so with great commitment to the cause of supporting persons in need of international protection arriving in Europe. They come to work every day because the work has purpose and are glad to work in their organisation and in the field of asylum and migration. In addition, the work is experienced by many as very rewarding despite its challenges.

The aim of this practical guide is therefore to **support managers** in **preventing, reducing and handling strain** in staff working in the asylum context. Occupational strain and associated health risks (physical and psychological) are a common situation facing all organisations. Occupational strain is often a result of the **inability to cope with stress and pressure** in the workplace. It can harm both individual staff members and the whole organisation (⁵).

At the same time, the creation of a culture of support and understanding in an organisation or authority will have a positive impact on the subjective feeling of wellbeing of individual staff members as well as their effectiveness (⁶).



⁽³⁾ This practical guide does not focus on work setting-related safety and security risks such as accidents and other unintentional safeguarding concerns due to lack of planning or maintenance of office structures, office vehicles or the like.

⁽⁴⁾ Refer also to Leka, S., Griffiths, A. and Cox, T., 'Chapter 5.1. Assessing risks at work', in Work Organisation and Stress, World Health Organization, Geneva, 2004, p. 10: 'Work stress can be effectively managed by applying a risk management approach as is successfully done with other major health and safety problems. A risk management approach assesses the possible risks in the work environment that may cause particular existing hazards to cause harm to employees. A hazard is an event or situation that has the potential for causing harm. Harm refers to physical or psychological deterioration of health. The causes of stress are hazards related to the design and management of work and working conditions, and such hazards can be managed and their effects controlled in the same way as other hazards.'

⁽⁵⁾ Mezomo, D. S. and de Oliveira, T. S., 'Stress prevention and management program for public security professionals', in Rossi, A. M., Meurs, J. A. and Perrewé P. L. (eds), Stress and Quality of Working Life – Interpersonal and occupation-based stress, Information Age Publishing Inc., Charlotte, NC, 2016, p. 166.

⁽⁶⁾ Refer also to research conducted by Hart, P. M. and Cotter, P., 'Occupational wellbeing and performance: a review of organisational health research', Australian Psychologist, Vol. 38, No 2, 2003, pp. 118–127.

This approach with a focus on **preventing occupational strain** in staff is also referred to as **Trauma Informed Care (TIC) within the workplace**, particularly in organisations caring for traumatised populations. This is also done to an extent by European asylum and reception authorities. **Trauma Informed Care** generally considers organisational staff care, self-care management, team support and personal self-care. All of these aim to prevent burnout and secondary trauma in staff while also increasing compassion, satisfaction and secondary resilience. These topics are covered in this threefold practical guide.

The EASO *Practical guide on the welfare of asylum and reception staff* is composed of three interlinked parts that complement one another in order to achieve long-term impact on staff well-being. The three parts of the guide can be used together in their entirety, in combination or as stand-alone tools, depending on the needs of the asylum or reception authority. The guide proposes a holistic threefold approach to staff welfare. It pays attention to the setting up of standards and the development of policy (Part I), the selection and implementation of practical tools (Part II) and the enforcement of monitoring and evaluation mechanisms (Part III) to guarantee that staff welfare policy is tuned to the needs of staff at all times. Interventions are designed in a participatory manner and as a consequence of needs and risk assessments.

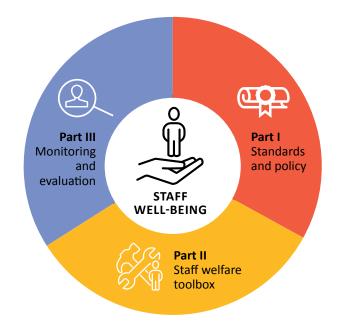


FIGURE 1. Holistic approach to staff welfare

Part I: Standards and policy puts forward **eight standards** to guide staff welfare policy formulation, implementation and evaluation in EU+ country asylum and reception work environments. These standards are linked to quality benchmarks, indicators and suggested activities to be employed by authorities to streamline staff welfare in their departments. Recommendations are provided on how to formulate a staff welfare strategy as the basis for the development and implementation of a staff welfare policy to ensure staff well-being. The **main target group** for Part I is **management and human resources (HR) departments**.

Part II: Staff welfare toolbox proposes a range of practical tools, exercises and soft-skill training suggestions. These are for managers and first-line officers, as well as internal and external specialists, to meet the standards of staff well-being introduced in Part I. The list of tools, exercises and capacity-building activities recommended, including self-care activities, is not exhaustive but presents good practices shared by Member State experts. The **main target group** for Part II includes **all staff working in the field of asylum and reception**, management and HR staff, teams in charge of critical incident management and staff involved in internal capacity building. This also includes specialists supporting the staff welfare efforts within teams working for asylum and reception authorities.

Part III: Monitoring and evaluation recommends measures to be put in place to assess if and how the well-being of staff is being positively affected by the measures introduced. The **main target group** for Part III is those **staff members focusing on monitoring and reporting within an asylum and reception authority**. The lessons learnt as a result of monitoring will inform management on adjustment needs to achieve overall effectiveness.

A number of terms relating to staff welfare, including 'well-being', 'stress' and 'burnout', are used in the three parts of the EASO *Practical guide on the welfare of asylum and reception staff* based on definitions provided by the European Agency for Safety and Health at Work (EU-OSHA), other EU bodies and academic sources. For information on terminology used throughout the three parts of this guide, refer to Annex 1 'Definitions'.

1.1. MAIN TARGET GROUPS FOR THIS PRACTICAL GUIDE

This part targets **all staff working in the field of asylum and reception**, from first-line officers directly engaged in work with applicants to senior management. The content in this part may also be relevant for internal and external specialists providing psychosocial support to staff working with and for the relevant authorities.

The main target groups for the use of Part II of this practical guide are:

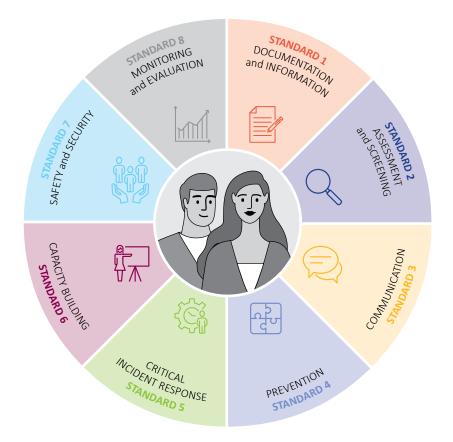
- first-line officers,
- senior and middle managers, team leaders and coordinators working in the field of asylum and reception,
- HR and safety and security officers,
- internal and external specialists.

Although interventions are proposed to effectively support first-line teams, the guide reminds all staff of the importance of ensuring self-care and the responsibility that everyone bears to do so.

1.2. HOW TO USE THIS PRACTICAL GUIDE

Although not exhaustive, the good practices that have been collected and included in this part of the guide detail a range of approaches from EU+ countries. These good practices involve on-the-job support tools for staff, which, when introduced and nurtured within authorities, can improve communication between managers and staff and among peers. They can also prevent anxiety, stress and burnout, help in processing the emotional impact of critical incidents, strengthen teams, and enhance effectiveness and efficiency in the execution of daily tasks. The tools can be used to provide support at team or individual level to all staff members, including first-line officers, team leaders and managers. These practices can be implemented by managers, peers, internal or external specialists, or, in the case of self-help tools, by staff members themselves. The selection of tools to be used within a particular authority will depend on the work setting, staff welfare needs and resources. They may be used by management regularly or offered based on demand. The tools, interventions and practices are linked to the standards set out in Part I of the guide, as shown also in Figure 2.

FIGURE 2. The eight staff welfare standards



1. INTRODUCTION

Figure 3 provides a complete overview of **all the good practices** and **tools** presented in this part of the guide and the suggested means of implementation of each.

FIGURE 3. Overview of all interventions

	TYPE OF 1	TOOL	
Assessment tools Used by managers	Interventions Provided by managers and peers	Interventions Provided by specialists	Self-care tools Used by all staff
 Screening questions Semi-structured one-on-one meetings Focus groups Quality of employment survey Self-assessment tool: burnout test 	 Intervision Team building Critical incident management 	 Psychological group sessions and coaching Individual counselling sessions Educational supervision Mediation 	 Self-care plan development Setting of healthy boundaries
	Capacity bu Provided by internal or o	•	

The need to build the capacity of staff working in the field of asylum and reception is a consideration to be taken into account by authorities throughout the employment cycle of staff members and is elaborated on in Chapter 6 'Capacity-building interventions'.

Important note on confidentiality. For all interventions presented in this guide, considerations around confidentiality need to be observed. None of the content from discussions held with staff members should be communicated either to their colleagues or to management without the consent of the affected staff member(s). The only exception would be if risks around potential self-harm or harming others are identified, as these relate to the safety and security of all involved.

Lastly, while the employer's responsibility is first and foremost to its staff, in some cases direct support to affected family members may also need to be considered, for example where a staff member has been affected by a critical incident with lasting consequences.



TOPICS COVERED IN THIS SECTION

- ✓ 2.1. Preliminary staff welfare screening
- ✓ <u>2.2. Semi-structured one-on-one meetings</u>
- ✓ 2.3. Focus group discussions
- ✓ 2.4. Quality of employment survey
- ✓ 2.5. Self-assessment : burnout test

Tools to be used mainly by managers and HR staff; the selfassessment tools are to be used by all staff.

This section **presents five assessment tools for identifying the well-being needs of staff members** and assessing stress management capacities in first-line staff. This screening serves to prevent stress reactions and to facilitate the timely introduction of support interventions at both individual and team levels (⁷).

Regular **assessments** are useful and necessary for the purpose of measuring, monitoring, evaluating, learning about and documenting conditions for and changes in staff members. They give an overall picture of staff needs and weaknesses throughout the employment cycle. While assisting managers in maintaining the well-being of staff, assessment tools can also facilitate first-line officers in understanding their strengths and weaknesses. This is done using the feedback received from these tools, which encourages both professional and personal growth. The proposed tools are to be used mainly by managers, who, to be able to use them effectively, need the skills necessary to identify physiological and psychological strain. Therefore, linking these efforts with the section on recommended training topics, as detailed in Annex 14 'Sample training programme with a focus on staff welfare', is important.

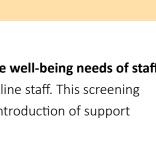
It is important to note that the information gathered through assessments should be treated as strictly confidential. Findings identified at team or organisational level are to be shared with relevant professional groups only as necessary and always anonymously.

By integrating the **five interventions** into a staff welfare action plan, authorities will be able to meet the following standards.

SW2 assessment and screening

SW4 prevention





⁽⁷⁾ Staff well-being assessments are not to be mistaken for performance reviews or appraisals. The purpose is to assess the needs of a staff member, including with regard to their professional development.

2.1. PRELIMINARY STAFF WELFARE SCREENING

Only 19 % of participants in the 2019 EASO mapping exercise stated that their employer systematically screened the capacity of staff members to respond to and cope with anticipated stressors in their work (e.g. through a pre-employment psychological assessment). In total, 52 % of participants were clear in saying that no screening had been carried out prior to employment (⁸).

Staff welfare screening in terms of stress exposure risks and coping capacities could be introduced at the earliest stages in employment. This could be as early as the selection phase, or during induction. Screening questions focusing on staff welfare can be inserted into an existing **interview questionnaire template** (⁹) used by authorities during selection processes or as part of initial induction meetings with line managers. Such a template has already been introduced in Part I: Standards and policy. If it is used later in the recruitment and onboarding process, the questions may be slightly adjusted to better fit the situation. Preliminary staff welfare screening could focus on questions covering stress management skills, coping mechanisms used when under stress and self-care efforts. Questions could also be aimed at learning more about a (future) employee's motivation, approach to teamwork and conflict-handling skills.

The overall selection interview questionnaire should be designed by the HR department and the relevant expert departments. Depending on the job profile, the selection interview will focus on a candidate's self-presentation, technical expertise (knowledge, skills and experiences), approach to collaboration (e.g. with donors or local partner management), financial expertise (budget cycle), and monitoring and evaluation competencies. Integrating these questions may slightly lengthen the interview or induction meeting, but answers can be understood as a baseline and will enable managers to monitor the staff member more effectively during their employment/ deployment (¹⁰). Furthermore, such preliminary screening can serve to inform managers in terms of training recommendations and team-building efforts to be undertaken for incoming staff members. This is for the benefit of the staff member in question as well as the team they are joining.

⁽⁸⁾ EASO, Mapping report on staff welfare initiatives introduced by agencies working in the field of asylum in Europe, 2019, p. 11 (restricted document).

⁽⁹⁾ See examples of proposed screening questions for interviews in Annex 2 'Recruitment interview grid template'.

⁽¹⁰⁾ Certain deployed experts may need more attention if they are deployed away from family and friends in a country where another language is spoken. This can be particularly challenging for some, even without considering the demanding work to be done.

2.2. SEMI-STRUCTURED ONE-ON-ONE MEETINGS

A semi-structured one-on-one meeting (¹¹) is not to be mistaken for a performance review meeting or an appraisal, although there may be some overlap in terms of the information shared. These one-on-one check-ins are intended to support staff members to share some of their needs and enable them to successfully implement their daily tasks. In addition, these regular meetings provide managers with an opportunity to identify early on whether a staff member might need additional support to reduce the risks of stress and burnout (related either to work or to their private life). Early identification of such needs and the provision of relevant support increase staff well-being and the overall effectiveness of staff members.

These one-on-one check-ins are semi-structured interviews in which the manager does not strictly follow a formalised list of questions. Instead, a flexible interview protocol is followed, supplemented by follow-up questions, to encourage a dialogue between the manager and the staff member. This format encourages two-way communication, which allows for a comprehensive discussion on relevant topics. Facilitated by the informal setup of the meeting, the employee may feel comfortable elaborating on their thoughts on certain topics.

During these meetings, managers could have a number of questions ready, out of sight of the staff member. Although these check-in meetings should feel not like an interview situation but, rather, a dialogue, it is useful to have certain questions in mind to monitor staff well-being over a longer period of time and help in ascertaining what support is needed. Acting on the answers to such semi-structured interview questions can help in preventing staff becoming unwell or stressed. These check-ins are important during different stages of employment. They should be implemented when staff join and during their employment, as well as when they leave an assignment or position and find themselves in a transition period. Outside of these particular transitional periods, managers should be encouraged to hold such meetings on a regular basis to the extent possible.

OBJECTIVES OF SEMI-STRUCTURED ONE-ON-ONE MEETINGS

- Identify the core motivations of the employees overall (¹²).
- Explore the experiences / challenges / protective factors and coping mechanisms they have used in the past.
- Understand their existing negative and positive coping mechanisms (¹³) when under stress (¹⁴).
- Pinpoint their current needs, expectations and concerns (¹⁵).

The feedback received during the meeting should be documented. If immediate, specialised follow-up is needed, the person should be referred to the relevant internal or external professional. Other needs expressed, such as professional development needs, should also be noted in writing. These will be considered when possible. These meetings should take place four to six times a year and last approximately 30 minutes.

Important remark. In order to conduct such interviews, managers must be sufficiently trained to distinguish between appraising and checking in and to be **non-judgemental**. Generally, and where possible, it is advised that only a manager who is not responsible for the appraisal of the particular person, or another third party, should conduct such interviews.

2.3. FOCUS GROUP DISCUSSIONS

A focus group discussion (FGD) is a qualitative research method used in the social sciences. An FGD is an effective way to gather people from similar backgrounds or with similar experiences together to discuss a specific topic. The group of participants is guided by a moderator (or group facilitator), who introduces topics for discussion and helps the group to participate in a lively and natural discussion among themselves.

The moderator asks broad questions (semi-structured interview style) to elicit responses and to generate discussion among the participants.

An FGD can be used to understand an issue in depth. A survey can be issued beforehand to identify challenges on which in-depth qualitative information is to be gathered during the FGD. FGDs are helpful for creating a greater depth of understanding of existing knowledge or getting at the 'why' and 'how' of a topic. FGDs can be used by authorities to learn more about staff welfare challenges that might otherwise be difficult to identify.

⁽¹²⁾ These objectives are extracted from an internal EASO operations document developed by Panou, A. and Triantafyllou, D., Greece Staff Support Policy Plan.

⁽¹³⁾ An example of a negative coping mechanism for dealing with stress could be increased alcohol consumption, whereas a positive coping mechanism could be sleeping enough hours each night.

⁽¹⁴⁾ Being aware of your own coping mechanisms is important also for managers. Furthermore, managers who are aware of positive or preferred coping mechanisms used by staff members will be able to recognise these in situations of stress when needed.

⁽¹⁵⁾ Knowing what staff in a stressful working environment need to stay healthy and the resources available is important to send a signal of care as well as allowing managers to respond in a timely fashion when the need arises.

2. ASSESSMENT TOOLS

Selecting a facilitator for an FGD. The facilitator plays an important role in a focus group. Their role is much more than merely asking questions relevant to the topic to be addressed (e.g. in the case of staff welfare, satisfaction with the level of interventions available, areas for improvement). The facilitator ensures that the composition of the group fits the purpose (taking the roles/responsibilities of the participants in the authority in question into account, as well as gender, etc.) and is ultimately responsible for the outcome of the session. If the facilitator plays their role effectively, a meaningful result is much more likely. Documentation of the discussion should be encouraged, in line with confidentiality agreements. Establishing some ground rules on how to organise the FGD and how group members respond to one another is advised. Participation on a voluntary basis is recommended.

Important remark. Depending on the topic to be tackled, managers or the head of the department **should not** facilitate such a focus group with people they supervise (¹⁶). Expressing candid opinions will be more difficult for those participating; employees may feel uncomfortable and may seek to please the senior staff member by saying what they think the facilitator wants to hear. HR representatives can make good facilitators, as can skilled external specialists. Whoever is selected must remain neutral and have the skills to keep the discussion on track, to prevent the conversation becoming a general griping session and to avoid an uninspired, mostly silent meeting. It is also important to note that on some occasions a separate follow-up may be required with a particular individual (e.g. if someone mentions increased stress levels at work, capacity-building needs or other challenges).

Confidentiality considerations. The outcome of the discussion is summarised and made available to management such that individual staff members are not identifiable. The key issues and suggested recommendations are packaged in a way that easy and straightforward follow-up actions by senior management are possible.

2.4. QUALITY OF EMPLOYMENT SURVEY

Approximately a third (36 %) of respondents felt that the current staff welfare-related services offered by their agency were in line with the needs of staff working directly with applicants for and beneficiaries of international protection (¹⁷).

The primary goal of this intervention is to measure how work life and the experience of work have changed over a period of time. A quality of employment survey (¹⁸) helps

(17) EASO, Mapping report on staff welfare initiatives introduced by agencies working in the field of asylum in Europe, 2019, p. 10 (restricted document).

(18) For an example, refer to Annex 4 'Quality of (de-)employment survey samples'.

⁽¹⁶⁾ Society for Human Resource Management, 'How to conduct an employee focus group'.

to establish benchmarks that can be used in the future. Through these questionnaires, further needs and gaps in staff care can be identified and documented, in order to take further action on and stay up to date with regard to staff well-being. Secondary goals include measuring the relationship between job/organisational characteristics and workers' health and safety, and identifying targets for preventative interventions. It is also important to assess the psycho-emotional status and well-being of staff members, to explore team dynamics and to identify existing and emerging challenges and stressors. The questions are generally qualitative in nature, and certain topics addressed can be covered in any phase of deployment. The anonymised results may be used by the HR department to understand the key topics to be addressed and identify actions to do so.

Categories covered by the survey could include:

- employee perceptions workload, skill utilisation, participation, professional development, repetitiveness of tasks, resource adequacy, topics around reward/ recognition/promotion, supervisory behaviour, job tenure, training needs and options, layoffs, teamwork, role clarity and role conflicts, staffing, safety and health, fairness, stress management and physical effort;
- work culture/climate health and safety, discrimination, harassment, respect, trust;
- health outcomes physical health, mental health, injuries, sleeping problems;
- other including performance, general job satisfaction, intent to leave, job commitment, overtime, flexibility at work.

Long surveys have disadvantages, so shorter and more focused surveys are recommended. More detailed modules on specific themes can be added if considered necessary. A regularly conducted quality of employment survey allows HR staff and senior management to monitor progress made in relation to staff well-being and the success of any measures introduced.

2.5. SELF-ASSESSMENT: BURNOUT TEST

Sometimes, it is possible to feel that something is not right for quite some time, but the cause is difficult to pinpoint. If you notice that you feel more tired than usual and have been feeling this way for some time, that you have a hard time concentrating, that you have less motivation than in the past or no motivation to work, or that you have started to make mistakes, a self-assessment or test to see if you are at risk of burnout might be advisable (¹⁹). Burnout is not something that appears overnight; it is a slow process. Burnout may first present itself in signs of a lower tolerance for frustration or being easily irritated (²⁰).

⁽¹⁹⁾ For an example, refer to Annex 5 'Self-assessment: burnout test'.

⁽²⁰⁾ View the EASO animation The importance of the early identification of signs of stress, 2021.

2. ASSESSMENT TOOLS

Often, burnout (²¹) starts with a phase of **extreme enthusiasm** for work and setting unrealistic goals. The employee feels committed and cannot stop. This phase is normally followed by a moment of **stagnation and pessimism** when the person realises that the initial expectations and goals cannot be reached. The next phase is marked by **frustration and social withdrawal**. This third phase can be linked to feelings of incompetence, not being able to perform, negativity or similar. In the last phase, an employee may experience **apathy and loss of confidence** in their professionalism. This last phase may be accompanied by signs of depression, as well as small accidents, feeling physically unwell and an increase in sick leave.

Burnout is a syndrome the signs of which include exhaustion, cynicism and diminished professional efficacy; it is closely associated with the work environment. The exhaustion component consists of fatigue and depletion of emotional and physical resources (²²). After identifying the phenomenon of burnout, researchers have concentrated on further defining it, creating measurement tools to capture its complexity and studying various causes and outcomes. The research has shifted from a descriptive model of burnout to an emphasis on intervention and prevention (²³). It should be noted that, in addition to the example of a burnout test presented in this guide, there are several online **self-assessment tools** available for individuals to monitor their own stress levels. These tools can help to create awareness and therefore decrease the risk of actual burnout.

Authorities can encourage the use of these self-assessment tools by organising online information sessions led by an internal or external specialist. In these focused sessions, a set of self-assessment tools can be introduced and discussed to ensure that staff are able to use these tools and analyse the outcomes. During such an information session, it is important that, in addition to explaining how such tools work, the specialist makes staff aware of when, where and how professional support can be provided by the authority in question.

Lastly, EU-OSHA offers a simple e-guide on stress (²⁴), which presents some basic insights into the topic, taking gender into consideration.

⁽²¹⁾ For further reading on the topic of burnout, see Finlay, L., 'Burnout', Headington Institute, 2017.

⁽²²⁾ Maslach, C. and Leiter, M. P., 'Understanding the burnout experience: recent research and its implications for psychiatry', World Psychiatry, Vol. 15, No 2, 2016, pp. 103–111.

⁽²³⁾ For more information on this topic, refer to the Eurofound study *Burnout in the Workplace: A review of data and policy responses in the EU*, Publications Office of the European Union, Luxembourg, 2018.

⁽²⁴⁾ EU-OSHA, E-guide to Managing Stress and Psychosocial Risks, 2021.

Practical guide on the welfare of asylum and reception staff: Part II



3. SUPPORT INTERVENTIONS PROVIDED BY MANAGERS AND PEERS

TOPICS COVERED IN THIS SECTION

- ✓ <u>3.1. Intervision</u>
- ✓ <u>3.2. Team building</u>
- \checkmark 3.3. Targeted support interventions linked to critical incidents



Tools to be used by managers and internal or external specialists.

This section presents **three interventions that are already well established in some EU+ countries**. These interventions improve the communication and interaction between managers and their staff, as well as among peers and within teams, and they help to build constructive team dynamics to strengthen teams. They can also enhance effectiveness and efficiency in the daily tasks of first-line officers. These interventions are a powerful vehicle for building cohesion and a sense of belonging in the workplace for staff, and they can also enhance feelings of motivation and satisfaction, all of which are key to maintaining staff well-being. Most staff working in the field of asylum are highly motivated. Nurturing their commitment is therefore important.

By implementing these **three interventions** as part of a staff welfare action plan, authorities will be able to meet the following standards.



SWS 3 communication

SWS 4 prevention

SWS 5 critical incident response

SWS7 safety and security

3.1. INTERVISION

Intervision (²⁵) is a form of knowledge development in a small group of professionals, managers or other employees who have a common challenge or problem (²⁶). The core feature is mutual support and consultation between equals. It is an opportunity for professionals and colleagues to consult the expertise of others to help them gain valuable new insights.

(25) For more in-depth information on how to integrate intervision within your authority, refer to 'The 10-step method' in Annex 6 'Methods of intervision'.

⁽²⁶⁾ EASO, Mapping report on staff welfare initiatives introduced by agencies working in the field of asylum in Europe, 2019 (restricted document). Definition of 'intervision' taken from Janse, B., 'Intervision', Toolshero, 2019.

WHAT ARE THE BENEFITS OF INTERVISION?

When used within a team, intervision (²⁷):

- helps to use all the potential, in terms of expertise, experience and skills, available in a team or in a group of experts;
- is a cost-effective learning method;
- contributes to a well-functioning multidisciplinary team;
- offers a platform for exchange between different professions and for the creation of a shared understanding of the value of the inputs from different disciplines into the work.

With regard to personal functioning, intervision can help in:

- dealing with problematic issues and situations and thus contribute to preventing burnout;
- providing insights into personal habits and patterns that can influence work with applicants for international protection;
- clarifying the personal motivations of staff;
- clarifying the strengths and weaknesses of staff;
- finding (mutual) support for tasks at hand and recognition of accomplishments.

GROUP COMPOSITION

The ideal group consists of about five to eight participants. Together, they dissect a problem that has been introduced by a participant. The person sharing is considered the 'case provider'. Intervision is not primarily intended to solve a problem; instead, the group encourages each other to find answers by asking questions of the case provider. These questions should help the case provider to develop a new way of thinking in order to gain insights into the case presented and the challenges linked to it.

Intervision can also take place on a personal level. It can be about dealing with problems at work, problems with an approach or other types of problem. Intervision is always tied in some way to day-to-day practice, professionalisation and improvement, and learning and development. It makes the person involved aware of individual styles and preferences, their personal view of the work and the ways in which work can be handled.

⁽²⁷⁾ Project Office for the Baltic States, United Nations Office on Drugs and Crime, *Intervision Guidelines*, United Nations Office on Drugs and Crime, Vienna, 2010.

INTERVISION VERSUS OTHER METHODS

Peer consultation (²⁸). Peer consultation is defined as a disciplined process of mutual benefit for helping professionals to provide critical and supportive feedback and to help each other to function more effectively in their professional roles (²⁹). Intervision aims to enable individuals to discover their own style and what works best for them.

Coaching (³⁰). Coaching is a process that aims to improve performance and focuses on the 'here and now' rather than on the distant past or future. The relationship between the coach and the person being coached is hierarchical, since the latter learns from the discussion and the coach supports them through their issues. Coaching differs from intervision because of the presence of hierarchy.

Supervision (³¹). In the context of this section, both supervision and intervision are understood as vocationally oriented, on-the-job guidance, where a person systematically learns how to deal with a specific issue that they are facing in their work situation. However, supervision is led by a supervisor, someone who has a different relationship to the person being guided from the participants in intervision, either because they know more about the issue or because they hold a higher hierarchical position (e.g. a line manager). With this in mind, supervision (³²) differs from intervision because of the unequal relationship between the participants and because it is a one-on-one relationship, whereas intervision works using a group format.

HOW TO SELECT A FACILITATOR

In the intervision method, there is the option to choose between appointing a direct colleague or appointing someone from the wider team working within the authority as a facilitator. In some settings, an external expert is invited to cover the role of facilitator. Using an internal facilitator is more cost-effective and this person will already be acquainted with the issues that the team faces in its work. Therefore, informal intervision sessions can benefit from an internal facilitator. However, this familiarity can also be a disadvantage. An internal facilitator will have developed a position in the workplace and may have established relationships within the team (perhaps favouring some people over others). They may lack the distance to be able to reflect objectively on the group processes in the team. An external facilitator is not party to these processes. It may be easier to 'think outside the box' and come up with alternative suggestions with an external facilitator. For a more formal intervision programme, therefore, an external facilitator is advised.

⁽²⁸⁾ National Career Development Association, 'Peer consultation: a best practice for career development professionals', 2018.

⁽²⁹⁾ Benshoff, M., 'Peer consultation as a form of supervision', ERIC Digests, EDO-CG-94-20, 1994.

⁽³⁰⁾ Skills You Need, 'What is coaching?', 2021.

⁽³¹⁾ Bellersen, M. and Kohlmann, I., Intervision: Dialogue methods in action learning, Management Impact Publishing, Amsterdam, 2017, p. 16.

⁽³²⁾ In this context, 'supervision' refers to administrative supervision and is not to be mistaken for peer, educational, clinical or direct supervision.

A general rule is that the facilitator (internal or external) does not participate in the discussions during an intervision session. The facilitator guides the meeting (i.e. ensures the agenda is followed, that all participants have their say, that all participants obey the jointly agreed behavioural rules, etc.). A facilitator can also come up with tentative suggestions for group behavioural alternatives if the need arises.

THE FACILITATOR

There should be no hierarchical relationship between the participants and the facilitator. This means that a team leader/coordinator **cannot** be a participant in intervision sessions.

Furthermore, the following requirements with regard to knowledge, skills and attitude should be met. The facilitator should:

- be an expert with the relevant education/training (e.g. in psychology or social work);
- have knowledge/experience of motivational interviewing and group dynamics (processes);
- have work experience in the field or related fields (so that they understand the issues discussed and are familiar with chairing group sessions);
- have a positive/supportive attitude;
- possess the ability to listen with a non-judgemental and motivating attitude;
- be able to find an appropriate balance between directive and non-directive behaviour.

ROLE OF THE FACILITATOR

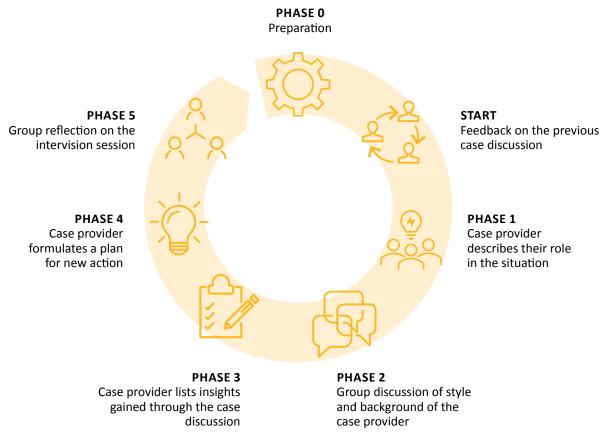
The facilitator's tasks include:

- putting together the group for the intervision session;
- collecting information about the educational and professional backgrounds and interests of the participants;
- if conducting a series of intervision sessions, ensuring that the plan for the series is well described and communicated with the participants;
- ensuring that appropriate accommodation and all practicalities (flip chart, markers, pens, refreshments, etc.) are arranged;
- informing participants in time about the intervision session (date, time, agenda);
- ensuring that all participants have a shared understanding of the agenda;
- ensuring that time is managed effectively;
- confining their role to chairing the session and refraining from participating in the discussion;
- checking regularly if there is agreement within the group by summarising the input of the participants;
- ensuring all participants have their say and are involved (i.e. preventing the more vocal participants from dominating the discussion and motivating silent participants to contribute asking all the participants in turn to share their views on a certain issue can sometimes be helpful);
- setting group rules to be followed by all participants.

HOW DOES INTERVISION WORK?

Every case discussion goes through a process that depends on the characteristics of the selected intervision method (³³). Every meeting starts with preparation and ends with reflection. During the reflection phase, the participants, the facilitator and the case provider exchange their views on the outcome of the meeting. All intervision methods include a number of key phases, and each session starts with a review of the previous case discussion.

FIGURE 4. The five phases of intervision



NB: For more information on how intervision works in practice, see 'The 10 steps of intervision' in Annex 6 'Methods of intervision'.

EXPLANATION OF THE PHASES

- Phase 0. Preparation. The facilitator prepares the case discussion with the case provider.
 - **Example.** The case provider has a very demanding applicant in their caseload. Every morning, the applicant comes with questions and expects the case provider to solve all their problems immediately. When the case provider does not respond or meet the requirements, the applicant becomes very upset.

(33) Bellersen, M. and Kohlmann, I., Intervision: Dialogue methods in action learning, Management Impact Publishing, Amsterdam, 2017.

- **The case provider's question.** How can I maintain personal and professional boundaries with an applicant who is very demanding?
- Start. The facilitator, case provider and participants take time to briefly reflect on the case provided during the previous session and the benefit of the intervision for the case provider and the applicants before presenting a new case.
- Phase 1. The case provider describes the nature of the case, what they want to achieve and the role they played in the situation.
- Phase 2. During this phase, the participants use an intervision method to explore the case and the behaviour of the case provider. The '10-step' method or the 'helpful questions' method can be used.
- Phase 3. The case provider lists insights gained through the case discussion. The case provider becomes aware of their behaviours (e.g. their desire to please and habit of avoiding conflict, which make it difficult to maintain personal and professional boundaries).
- Phase 4. The case provider formulates a plan for new action. For example, the case provider describes how they want to act towards the applicant. This involves actions to stop helping the applicant every morning, and instead to invite the applicant to a weekly session where the applicant can ask all of their questions in one go.
- Phase 5. Group reflection and feedback on the intervision session.

LEVELS OF INTERVISION

There are three levels of intervision (³⁴). These levels describe the degrees of depth that are achieved in a case discussion.

1. Case level: specific issue

The case is discussed in terms of the issue. What would be more effective? What could I do? What are my alternatives? What worked well and what could have gone better? This is where the content of the case is most important. The underlying case question and the reason for presenting the topic are not discussed here to the same extent as the content.

2. Characteristic actions level: the approach

The case is discussed in terms of the actions of the case provider in the specific situation. What is their working style and why did they choose it? Why did they go for this approach? What are the characteristics of their style of working? What do they normally bring to assignments in terms of working style or approach? The case provider is the focus here. In-depth views on the case itself are discussed less.

3. Views level: hidden drivers

The case is discussed in terms of the case provider's professional and personal views. What views underlie their judgements or conclusions? How can the case provider

⁽³⁴⁾ Bellersen, M. M. and Kohlmann, I., Intervision – Dialogue methods in action learning, Management Impact Publishing, Amsterdam, 2017, p. 18.

explain them? What do those judgements mean and what is their effect on the situation in question? What assumptions that the case provider holds about the profession, themselves and others became clear in the case discussion? When did things become uncomfortable for the case provider? Analysing specific situations is a tool for learning how to recognise our hidden drivers. These drivers form the behaviour that repeats itself in patterns and influences our ways of thinking and acting without us noticing.

To provide detailed guidance on how intervision can be structured within teams in authorities, two methods, known as the 10-step method and the helpful questions method, are detailed in Annex 6 'Methods of intervision'.

3.2. TEAM BUILDING

Team-building activities (³⁵) are important to ensure that teams are effective, particularly when working in a volatile environment. People who participate in team building feel more positive about their team. This positive feeling is manifested in certain ways, such as more trust for fellow team members, more satisfaction as a result of feeling part of the team, and more confidence that the team will achieve its objectives. Furthermore, teams that engage in team-building sessions have better interactions. They communicate, coordinate and manage conflicts better. These processes contribute significantly to the well-being of staff and are key to accomplishing the team's tasks, which is particularly important in the field of asylum and reception. This section focuses on teams and the various team-building techniques available to managers.

What team building means is not always clear (³⁶). Researchers studying the topic consider that there is no single definition of 'team building'. Instead, the term refers to a category of interventions aimed at teams. These interventions have the following in common.

- Objective. The aim is to improve a team's functioning in general, by developing interpersonal relationships, clarifying roles or solving existent problems.
- Method. The intervention involves mostly informal team-building activities, such as games and physical exercises, as opposed to sitting in a classroom and discussing a topic.
- Location. The activities usually take place in a different location from that where the team works (e.g. in nature, in an events hall).

(35) For more information on the stages of team building and team-building activities, refer to Annex 7 'Team-building activities by stage'.

If you want to go fast, go alone. If you want to go far, go together.

African proverb

⁽³⁶⁾ Science for Work, 'Team building: how to get real results from team building activities', 2019.

Team-building interventions might sound similar to teamwork training, which is another type of intervention aimed at helping teams work better together. However, the two are different. Teamwork training focuses on building specific skills, for example teaching team members how to formulate an action plan. It is more formal and systematic; for example, the trainer develops specific objectives for each session and evaluates if they have been achieved. This type of training is usually held in the same location as the team's normal workplace (e.g. in a conference room in the office).

CHOOSING BETWEEN TEAM-BUILDING INTERVENTIONS AND TEAMWORK TRAINING FOR YOUR TEAM

If you know the specific needs of your team and you want to provide focused support to meet those needs, then teamwork training may be preferable. However, if you are looking for an intervention to improve the general functioning of the team and to increase team members' satisfaction, then team building may be better. In the field of asylum and reception, with all its challenges, taking time for team building is crucial for overall team spirit, which is linked to the professionalism and effectiveness of the individual team members. The mapping exercise conducted by EASO in 2019 on the matter clearly indicated that teamwork is perceived as useful for creating a trusting work environment. Giving and receiving feedback in an organised, respectful and structured way is considered crucial in this line of work (³⁷).

Team effectiveness (³⁸) is enhanced by a team's commitment to reflection and ongoing evaluation. In addition to evaluating accomplishments in terms of meeting specific goals, for teams to be high performing it is essential for them to understand their development **as a team**. The most commonly used framework for a team's stages of development was developed in the mid 1960s by Bruce W. Tuckman. He developed a recognisable five-stage pattern: **forming**, **storming**, **norming**, **performing** and **adjourning/transforming** (³⁹).

(39) Stein, J., 'Using the stages of team development', MIT Human Resources.

⁽³⁷⁾ EASO, Mapping report on staff welfare initiatives introduced by agencies working in the field of asylum in Europe, 2019, p. 20.

⁽³⁸⁾ This includes also incoming and outgoing staff. New staff may take over from existing or leaving team members; therefore, transitions need to be appropriately managed, and the integration of newcomers and phasing out of leaving staff members should be taken seriously.

Stage 1	Forming
Feeling	During the forming stage of team development, team members are usually excited to be part of the team and eager about the work ahead. Members often have high positive expectations of the team experience. At the same time, they may also feel some anxiety, wondering how they will fit in with the team and if their performance will measure up.
Behaviour	Behaviours observed during the forming stage may include lots of questions from team members, reflecting both their excitement about the new team and the uncertainty or anxiety they may be feeling about their place in the team.
Team tasks	The principal work for the team during the forming stage is to create a team with clear structure, goals, direction and roles so that members begin to build trust. A good orientation/kick-off process can help to ground the members in terms of the team's mission and goals. It can establish team expectations about both the team's products and, more importantly, its processes. During the forming stage, much of the team's energy is focused on defining the team, so task accomplishment may be relatively low.
Stage 2	Storming
Feeling	As the team begins to move towards its goals, members discover that the team cannot live up to all of their early excitement and expectations. Their focus may shift from the tasks at hand to feelings of frustration or anger with the team's progress or processes. Members may express concerns about being unable to meet the team's goals. During the storming stage, members are trying to see how the team will respond to differences and how it will handle conflict.
Behaviour	Behaviours during the storming stage may be less polite than during the forming stage, with frustration or disagreements about goals, expectations, roles and responsibilities being openly expressed. Members may express frustration about constraints that slow their individual progress or the team's progress. This frustration may be directed towards other members of the team, the team leadership or the team's sponsor. During the storming stage, team members may argue or become critical of the team's or goals.
Team tasks	Team tasks during the storming stage of development call for the team to refocus on its goals, perhaps breaking larger goals down into smaller, achievable steps. The team may need to develop both task-related skills and group process and conflict management skills. Redefinition of the team's goals, roles and tasks can help team members move past the frustration or confusion they experience during the storming stage.
Stage 3	Norming
Feeling	During the norming stage of team development, team members begin to resolve the discrepancy they felt between their individual expectations and the reality of the team's experience. If the team is successful in setting more flexible and inclusive norms and expectations, members should experience an increased sense of comfort in expressing their 'real' ideas and feelings. Team members feel an increasing acceptance of others on the team, recognising that the variety of opinions and experiences makes the team stronger and its products richer. Constructive criticism is both possible and welcomed. Members start to feel part of the team and the team and the team and the team and take pleasure from the increased group cohesion.
Behaviour	Behaviours during the norming stage may include members making a conscious effort to resolve problems and achieve group harmony. There may be more frequent and more meaningful communication among team members and an increased willingness to share ideas or ask teammates for help. Team members refocus on established team ground rules and practices and return their focus to the team's tasks. Teams may begin to develop their own language or inside jokes (e.g. nicknames).
Team tasks	During the norming stage, members shift their energy to the team's goals and show an increase in productivity, in both individual and collective work. The team may find that this is an appropriate time for an evaluation of team processes and productivity.

Stage 4	Performing
Feeling	In the performing stage of team development, members feel satisfaction in the team's progress. They share insights into personal and group processes and are aware of their own (and each other's) strengths and weaknesses. Members feel attached to the team as an entity 'greater than the sum of its parts' and feel satisfaction in the team's effectiveness. Members feel confident in their individual abilities and those of their teammates.
Behaviour	Team members are able to prevent or solve problems in the team's processes or in the team's progress. A 'can do' attitude is noticeable, as are offers to assist one another. Roles on the team may have become more fluid, with members taking on various roles and responsibilities as needed. Differences among members are appreciated and used to enhance the team's performance.
Team tasks	In the performing stage, the team makes significant progress towards its goals. Commitment to the team's mission is high, and the competence of team members is also high. Team members should continue to deepen their knowledge and skills, including working to continuously improve team development. Accomplishments in team processes and progress are measured and celebrated.
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Is the 'performing' stage the end of the process?

processes and products, setting new goals as appropriate. Changes such as members coming or going or large-scale changes in the external environment can lead a team to cycle back to an Although working on a high-performing team may be a truly pleasurable and enriching experience, it is not the end of team development. There is still a need for the team to focus on both earlier stage. If these changes – and the resulting behaviours – are recognised and addressed directly, teams may successfully remain in the performing stage indefinitely.

earner stage. It these changes	earlier stage. It these changes – and the resulting behaviours – are recognised and addressed directly, teams may successfully remain in the periorming stage indentifierly.
Stage 5	Adjourning/transforming
Some teams do come to an end, when their attention to the end or termination process.	Some teams do come to an end, when their work is completed or when the organisation's needs change. Although not part of Tuckman's original model, it is important for any team to pay attention to the end or termination process.
Feeling	Team members may feel a variety of concerns about the team's impending dissolution. They may be feeling some anxiety because of uncertainty about their individual role or future responsibilities. They may feel sadness or a sense of loss about the changes coming to their team relationships. At the same time, team members may feel a sense of deep satisfaction in the accomplishments of the team. Individual members may feel all of these things at the same time or may cycle through feelings of loss followed by feelings of satisfaction. Given these conflicting feelings, individual and team morale may rise or fall throughout the ending states. It is highly likely that, at any given moment, individuals on the team will be experiencing different emotions about the team's of the team.
Behaviour	During the ending stage, some team members may become less focused on the team's tasks, and their productivity may drop. Alternatively, some team members may find focusing on the task at hand is an effective response to their sadness or sense of loss. Their task productivity may increase.
Team tasks	The team needs to acknowledge the upcoming transition and the variety of ways that individuals and the team may be feeling about the team's impending dissolution. During this stage, the team should focus on three tasks:

as a basis for team conversation, rather than boxing the team into a 'diagnosis'. Just as human development is not always linear, team development is not always can be an important part of the self-evaluation process. The stages are a helpful framework for recognising a team's behavioural patterns. They are most useful Each stage of team development (40) has its own recognisable feelings and behaviours. Understanding why things are happening in certain ways in your team a linear process either. Having a way to identify and understand causes of changes in team behaviours can help the team to succeed.

⁽⁴⁰⁾ For more information on team building and activities, refer to Annex 7 'Team-building activities by stage'

3.3. TARGETED SUPPORT INTERVENTIONS LINKED TO CRITICAL INCIDENTS

This section aims to guide managers and team leaders in particular. Relevant and timely support for teams is always important, particularly during a critical situation. Although it is clear that critical incidents can occur, guidance is often provided only **after** an incident has taken place. Although most staff exposed to critical incidents with traumatic content may not develop mental health concerns, the provision of social support and the recognition of the impact by the organisation (colleagues and managers) is important to facilitate resilience.

WHAT IS CONSIDERED A CRITICAL INCIDENT?

The main characteristics of a critical incident are as follows:

- the event is unique, sudden and unexpected;
- the event arouses intense feelings of helplessness and emotional reactions such as anger, sadness, anxiety and distress;
- the incident confronts the victim directly or indirectly with death (their own or that of others) and their own vulnerability;
- it abruptly interrupts the continuity between the victim's past, present and future.

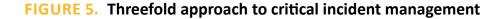
Critical incidents include acts or threats of violence and aggression, threats of or attempts at self-harm including suicide, and hunger and thirst strikes.

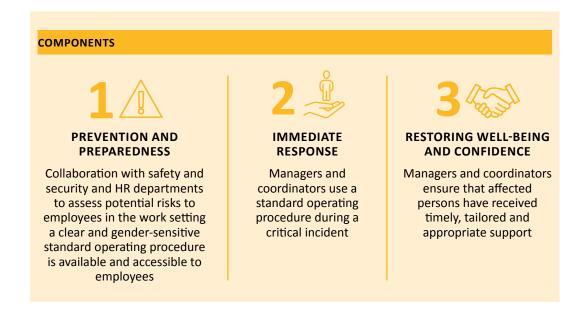
3.3.1. CRITICAL INCIDENT MANAGEMENT

Staff welfare in relation to critical incidents can be best maintained within a well-designed and well-implemented critical incident management framework. Particular support interventions for staff are to be designed as part of a systematic and time-sensitive management approach that addresses issues of prevention, de-escalation and support for both applicants and staff involved. As a manager following up on a critical incident, three main components are to be considered: (1) prevention and preparedness, (2) immediate response and (3) the importance of restoring the well-being and confidence of staff members. 66

Staff well-being is having the knowledge and tools to understand the risks and possible consequences of working in a high-risk environment, and how to prevent / deal with possible challenges connected to this (⁴¹).

⁽⁴¹⁾ EASO, Mapping report on staff welfare initiatives introduced by agencies working in the field of asylum in Europe, 2019, p. 12 (restricted document).





Component 1: prevention and preparedness

Collaboration with the safety and security department and the HR department is recommended to assess potential risks to employees in the work environment, and to streamline relevant procedures. Ensuring that appropriate occupational health and safety measures are in place and that their implementation is regularly monitored is crucial in order to minimise the risk of critical incidents (⁴²). As part of prevention, raising awareness of the standard operating procedures (SOPs) is important, as are capacity-building efforts such as training on vicarious trauma, stress management and how to identify warning signs in applicants for international protection that a critical incident may take place.

Component 2: immediate response

Principles to guide the immediate response after an incident

- Immediate action must be taken after the incident, within 24 hours, preferably, or a maximum of 48 hours.
- The details of all relevant contact persons (support staff) should be clearly displayed so they can be contacted.
- Support should be provided in accordance with a protocol (SOP).
- The material (physical) conditions for safety must be guaranteed first, followed by psychosocial care.
- Correct and continuous information about the incident and its consequences must be given. If information is not (yet) available, it is essential to say so.

Reminder. Do not wait for a request from the person(s) affected by the incident before responding. The offer of care is a duty and a right.

Focal person

Select (a) focal person(s) for critical incidents within the authority, which should include one or more of the following:

- management staff,
- safety and security personnel,
- staff welfare focal person(s) / stress team / integrated incident team,
- other relevant focal person(s) from the authority in question.

Reminder. The focal person(s) selected to provide internal support must have received the relevant training.

Documentation of a critical incident

The selected focal person(s) will:

- log a critical incident (⁴³) in the form of a telephone call, email, text message, etc., and share information with the designated person (e.g. safety and security personnel and senior management);
- enable immediate acknowledgement by the focal person(s) in charge when critical incidents occur;
- categorise the incident (high, medium or low priority);
- respond to the incident appropriately and as suggested, and where relevant involve the focal person for critical incidents;
- when the case has been appropriately responded to, close the case (with appropriate documentation).

Reminder. A team meeting to discuss what has happened using guided questions (⁴⁴) can help to reduce anxiety in staff members and improve staff preparedness. The discussion points will include opportunities for learning to prevent similar situations. Sharing knowledge on **de-escalation techniques** and how to **identify warning signs** should be part of such an intervention.

In an emergency situation, including during a critical incident, staff may be overwhelmed with emotions such as guilt, anger, anxiety and panic. It is important to know that such reactions are a normal response to situations loaded with a high degree of tension or risk. It is important, therefore, to be aware of some simple yet **powerful techniques** (⁴⁵) **to help with staying calm**, staying connected to reality and acting reasonably. This will benefit staff as well as applicants. It is also important to acknowledge the fact that not all challenging situations in this field of work can be controlled.

⁽⁴³⁾ See Annex 10 'Critical incident reporting template'.

⁽⁴⁴⁾ See Annex 11 'Reflection tool after a critical incident has occurred'.

⁽⁴⁵⁾ See Annex 12 'Setting boundaries and grounding techniques after a critical incident'.

Component 3: restoring well-being and confidence

Managers are required to ensure that affected staff members receive the relevant support (internal/external) in a timely fashion.

This can refer to:

- peer support or collegial support, through stress team members, other assigned focal person(s) and first-line support persons (**internal support**);
- specialists such as psychologists, psychiatrists, medical officers, nurses, police or legal officers (which, in most settings, form part of **external support**).

The scope of internal and external support is described below.

Internal support

- Acknowledge the emotional impact of the incident and offer first-line psychosocial aid (listen, recognise feelings and give psychosocial information (normal reactions to an abnormal event)). This offer is systematic and both organised and provided by colleagues.
- Follow up with the affected person to evaluate and discuss changes in signs of stress in the days and weeks after a critical incident.
- Offer to refer the person to external professional support if necessary; recognise the limits of the first-line psychosocial aid that it is possible to provide internally.
- Give recommendations to management regarding lessons learnt and how to manage similar critical incidents and avoid further ones.

External support

External support is called on if the person cannot cope with the impact of an incident, for example if the affected person presents signs of psychological impact several weeks after the incident (post-traumatic stress disorder), in which case they should be assessed by a specialist (a psychiatrist, doctor, psychologist or, in some authorities, a member of the internal support team). Making arrangements for external support could also be proposed if the affected person cannot be provided with psychosocial aid through internal support. This could be because internal support is not available within a particular authority or for other specific reasons.

3.3.2. COLLEGIAL SUPPORT AFTER A CRITICAL INCIDENT

The objective of **collegial support** is to acknowledge the emotional impact on an individual. In some settings, this is referred to as peer support or psychological first aid. It is administered by a **stress team or a collegial support team** (⁴⁶) after a critical incident. Furthermore, it allows for the provision of immediate psychosocial support and in particular a feeling of safety and a chance for the affected individual(s) to talk about what has taken place. Collegial support offered by this type of team can provide comfort and help the affected person to accept what has happened, and the stress reaction that the affected individual may be experiencing should decrease. The role of the peer/ colleague is to offer first-line psychosocial aid (often referred to as psychological first aid). This is done through **listening**, **recognising the feelings of the affected person** and **giving psychosocial information**. The members of such stress teams are peers who have been selected and have received some additional training (e.g. psychological first aid, active listening, critical incident management). The **stress team cannot include managers** with a hierarchical relationship to staff.

Although in a way this support is systematically organised, it is still intuitive and takes place among colleagues. Members of the stress team, as in the Belgian authority (⁴⁷), may be professionals in the field (psychologists, social workers, etc.). Members of the collegial support team in the Netherlands, on the other hand, are asylum or reception professionals, and referrals to internal/external professionals and specialists are conducted where necessary, with recommendations made to line management when this is deemed crucial (e.g. in cases in which the affected person might self-harm or harm others)

WHY IS COLLEGIAL SUPPORT CONSIDERED USEFUL AFTER A CRITICAL INCIDENT?

Managers of first-line officers have an important role to play. They support the stress team through a support policy, by calling on them at the right time and by focusing on preventative actions. Good collaboration between managers and the stress team assigned to provide collegial support within a given authority is therefore essential.

OBJECTIVES OF STRESS AND COLLEGIAL SUPPORT TEAMS

- Create a framework in which attention can be paid to the psychosocial well-being of staff after incidents and they can speak freely about it.
- Offer psychosocial assistance following incidents (especially potentially traumatic events).
- Offer to refer the person to external help if wished and deemed necessary.

(46) Collegial support is provided by a stress team in Belgium and by a collegial support team in the Netherlands.

(48) Comment by a first-line officer working in a reception facility.



Peers [i.e. colleagues] know best what I am going through. We share the same environment, we witness the same suffering. It is easier to talk with a peer, someone who is close to you. You don't need to describe everything. Peer support is enough in most situations [i.e. critical incidents]. Anyone can be supportive, there is no need to be a professional always. (48)

⁽⁴⁷⁾ See Annex 9 'Internal support provision regarding incidents', 'Stress team', for an approach taken by the Federal Agency for the Reception of Asylum Seekers in Belgium.

- Formulate management-related recommendations on how to improve certain mechanisms to prevent incidents and offer support also to managers where necessary.
- Provide information on emotional, physiological and cognitive reactions after experiencing an incident, to normalise these feelings for the affected person.

FOR WHOM?

This individual support is intended for staff members, interns, volunteers and contractors. In the case of Belgium, it is primarily intended for staff in reception facilities. It can also be adjusted for asylum authorities. Timely provision of collegial support helps to prevent short- and longer-term psychological problems as a consequence of distressing and traumatic incidents. Adequate support from family and friends, as well as colleagues and other persons in the affected person's immediate environment, is seen as an important factor in recovery from a difficult experience (⁴⁹).

AVAILABILITY

As soon as possible after an incident (within 24 hours if possible), the stress team should meet the employees involved. A short time between incident and response decreases the chances of additional problems arising.

ACTIVATION

Three suggested means of contact are as follows:

- as soon as possible after the incident, management (the line manager) asks the stress team to contact the affected staff member;
- the staff member contacts the stress team directly;
- a stress team member takes the initiative to intervene (it is important to inform the other members of the stress team to ensure effective coordination).

INTERVENTIONS

Depending on the situation, either the stress team will come to the scene shortly after the incident, before the affected person returns home, or the intervention is scheduled for the following days. The stress team should favour face-to-face intervention rather than providing support over the telephone or using video conferencing. Telephone calls should primarily be used to make appointments.

3.3.3. INTEGRATED INCIDENT TEAM

An integrated incident team is established to support staff working with applicants who have caused or attempted to cause a critical incident. The applicants in question are supported emotionally and psychologically, with the aim of ending or de-escalating the critical situation. The incident team intervenes by way of conversation(s) with the applicants. By supporting applicants and de-escalating critical incidents, the integrated incident team reduces the stress on exposed staff members and can be of great benefit to authorities and their teams.

The Netherlands provides one example of how an incident team can be structured, as detailed in this section. An incident team was established in the Central Agency for the Reception of Asylum Seekers (COA) in 2012 after a critical incident took place and an applicant lost their life.

An incident team is composed of professionals affiliated with the main asylum institutions in the country. They act as neutral counsellors in case of an incident response and are therefore, to an extent, an external party in relation to the reception setting in question.

The reasons for establishing an incident team are as follows.

- Time. Staff working in the field of asylum and reception may need to work long hours when incidents occur. An incident team member, as opposed to other first-line officers, is able to take as much time as is needed for discussion with the applicant. As a result, the applicant feels genuine interest and respect, and feels safe to share what they wish to share.
- Skills and knowledge. The members of the incident team are experienced and trained in de-escalating a situation, especially where an applicant threatens to commit suicide, or has attempted suicide or a self-destructive act, or in case of hunger and/or thirst strike. In addition, the incident team provides advice in these cases.
- Documentation. Lastly, in the case of the Netherlands, the incident team collects all the incident notifications from the various organisations working in the field of asylum. The team is therefore able to detect trends, which can be used to support staff in reception centres. Besides detecting trends, this overview also enables the team to make reports – monthly, quarterly and annually – which can be used by authorities to improve applicant procedures and care.

Unfortunately, access to professional psychological support is not always available to applicants for various reasons. Members of the incident team are flexible and available for discussion with the applicant within 1 day and not later than 2 days after the incident has occurred.

THE INCIDENT TEAM

Although the size of the incident team depends on the number of applicants and reception centres it serves, experience from the Netherlands shows it should have no fewer than 4 members and no more than 8 or 10.

For the team to function well, it is important that there is a relationship of trust between its members. When a team has too many members, it will be difficult to develop trusting relationships. However, it is not advisable for an incident team to consist of fewer than four members. There are several arguments that support this view.

- First, the emotional strain for members is high; thus, the smaller the team, the more emotional strain for each member to bear.
- Second, it is important to have a variety of personnel who can be deployed for an intervention. Each team member has their own strengths and weaknesses, and these can be taken into account when determining which team member would be most suitable to carry out a certain intervention.
- Third, when assembling a team, the gender and age of team members should be considered. If the team is too small, it will not be possible to have enough diversity.

The average number of incidents that occur per week determines, more or less, the average work time the incident team should dedicate to providing support. This forms part of the team's general tasks within the institution its members are affiliated with. According to the incident team in the Netherlands, in practice the average time needed is **16 hours per week**.

In the Netherlands, having an incident team in place to provide support has proven to be of great benefit for authorities and staff. This example can be considered a good practice in dealing with critical incidents in this line of work.

4. SUPPORT INTERVENTIONS PROVIDED BY INTERNAL AND EXTERNAL SPECIALISTS





TOPICS COVERED IN THIS SECTION

- ✓ 4.1. Psychological groups sessions and coaching
- ✓ <u>4.2. Individual counselling sessions</u>
- ✓ <u>4.3. Educational supervision</u>
- ✓ <u>4.4. Mediation</u>

Tools to be used by internal or external specialists.

This section focuses on **four interventions** that are **standard practice in many professional settings** and can be particularly beneficial in highly demanding and stressful work environments, such as those related to reception and asylum. The interventions aim to improve awareness and functioning at work by offering safe spaces for the discussion of job-related challenges and difficult feelings that may arise. They can also help in processing difficult aspects of team dynamics, in learning boundary setting and in preventing anxiety, stress and burnout (⁵⁰). The tools can be very effective in supporting well-being but also in strengthening the team and enabling first-line officers in particular to fulfil their daily tasks in a professional manner.

Although in-person engagement is preferred, **the interventions proposed can be adjusted to an online or hotline format**. These can be valuable alternatives in instances where staff members work in multiple locations and far from one another, during periods of deployment of experts to another EU+ country or during a crisis situation that makes movement and joint meetings of staff difficult (e.g. the COVID-19 pandemic, insecurity in a certain region). An online or hotline format is also a useful option for EU+ countries with a limited budget for staff welfare activities; interventions in these formats may be able to reach more staff members in need than in-person interventions could.

The interventions presented involve support to staff at team and/or individual level. They can be implemented by internal and/or external specialists with the relevant expertise and training. These specialists are invited by managers and team leaders to support staff members and teams on a regular basis. Each internal or external specialist, depending on their professional training, may have a slightly different approach to executing the interventions proposed. The costs of a specified number of sessions should be covered by the authorities and/or the relevant health insurance scheme.

By implementing the suggested **four interventions**, authorities will be able to meet the following standards.



SW4 prevention

SW5 critical incident response



SWS 6 capacity building

4.1. PSYCHOSOCIAL GROUP SESSIONS AND COACHING

Participation in a psychosocial group aims to prevent psychological distress, fatigue and burnout. Staff are able to participate in these sessions during working hours. According to Duijts et al. (⁵¹), coaching can be effective for the prevention of burnout and for the general well-being of employees. These sessions provide the opportunity for problem resolution, crisis management and managing stress, and create a platform to enable staff to learn from one another.

Duration	1.5–2 hours per session
Group size	Maximum of five to eight people
Frequency	Depending on need, but not less than every 8 weeks
Facilitator	Staff psychologist or external specialist

4.2. INDIVIDUAL COUNSELLING SESSIONS

These sessions can be crucial for staff members, particularly after a critical incident has occurred. These sessions should be provided by a trained professional (internal or external, depending on availability). The way these sessions are structured depends on the training background of the professional. The progress of the sessions will be reported by the professional to the individual, who passes on the information to management, if requested. The staff psychologist or external professional documents sessions conducted but does not share any of the content of the individual sessions, unless a risk of self-harm and/or harming others is identified. In terms of selecting the right specialist, factors such as language, age, gender and cultural background may be important to consider. Although

⁽⁵¹⁾ Duijts, S. F. A, Kant, I, van den Brandt, P. A. and Swaen, G. M. H., 'Effectiveness of a preventive coaching intervention for employees at risk for sickness absence due to psychosocial health complaints: results of a randomized controlled trial', *Journal of Occupational and Environmental Medicine*, Vol. 50, No 7, 2008, pp. 765–776.

in-person sessions are advised, in case of deployment or lack of availability of qualified specialists in a certain setting, video counselling sessions may be an alternative.

Duration	1 hour per session
Group size	Not applicable (individual session)
Frequency	Depending on need. After an incident has occurred, one or two
	sessions per week may be needed, after which the frequency may be
	reduced or the sessions may no longer be needed
Facilitator	Staff psychologist or external specialist

4.3. EDUCATIONAL SUPERVISION

Supervision in this context differs from the administrative supervision defined in Section 3.1 'Intervision'. Here, supervision by an external specialist relates to team or case supervision and provides team members with a platform for guided reflection and the opportunity to learn with and from one another in a systematic way. Evidence indicates (⁵²) that support in the form of supervision can be a buffer against anxiety, stress and high workloads. Therefore, team or case supervision can be seen as a good practice and form of support. The interplay between this informal pedagogical approach to learning in the form of supervision sessions and a more formal capacity-building intervention, such as training courses on vicarious trauma and stress management offered by a specialist, can further reinforce the support provided.

The supervisor. A supervisor has training in generic and specific supervision skills (group/ case supervision) and related techniques (e.g. reflection techniques and team dynamics, coaching, engaging with a diverse workforce and conflict management). An external specialist allows for more openness by team members during the exchange on relevant topics. The process of educational and reflective supervision (⁵³) is non-judgemental in nature.

Benefits of case supervision. Staff members are provided with a platform to debrief and discuss specific cases, including the emotional impact of specific cases on first-line workers, in a safe setting, which can strengthen resilience and reduce risks of stress. An external case supervisor provides room for guided reflection and feedback, which can thus reduce feelings of being overwhelmed or ineffective at work. Struggles with daily tasks can be addressed in a timely manner in a safe and confidential setting.



When it's going well, supervision is a holding environment, a place to feel secure enough to expose insecurities, mistakes, questions and differences (⁵³).

⁽⁵²⁾ EASO, Mapping report on staff welfare initiatives introduced by agencies working in the field of asylum in Europe, 2019, p. 20 (restricted document).

⁽⁵³⁾ For more information, see Shanock, R. S., Best Practice Guidelines for Reflective Supervision, The Pennsylvania Child Welfare Resource Center, Mechanicsburg, PA, 1992.

⁽⁵⁴⁾ Shanock, R. S., Best Practice Guidelines for Reflective Supervision, The Pennsylvania Child Welfare Resource Center, Mechanicsburg, PA, 1992.

Benefits of team supervision. Staff members are provided with a platform to debrief and discuss specific challenges they may face within their team in a guided way and are supported by a supervisor to ensure constructive discussion. The group setting enables members to reflect on their work and interactions to improve their capabilities to work both within the team and on an individual level.

Duration	1.5–2 hours per session		
Group size	Maximum of 10 people		
Frequency	Depending on need and type of supervision. Team supervision		
	can take place once a quarter, whereas case supervision might be		
	scheduled on a monthly basis		
Facilitator	Supervisor: external specialist		

4.4. MEDIATION

Mediation (⁵⁵) is a process to address a variety of interpersonal conflicts as a means of resolving a problem. Mediation can be seen, therefore, as a useful tool when tense and difficult situations, and even conflicts, within a work setting arise. Although mediation does not necessarily lead to an immediate solution to the tension or conflict per se, the conflicting parties are engaged in jointly discussing a situation with a neutral party. Mediation often ends with a kind of contract (⁵⁶) between the two conflicting parties, which both agree to comply with. Managers within an authority should have clear guidance on how to access and provide mediation to their teams.

ROLE OF THE MEDIATOR

Although the mediator is neutral, they facilitate the identification and development of options to address the conflict.

It is important to shift the focus from a destructive approach to a constructive approach to tackle the problem.

BENEFITS OF MEDIATION

- A neutral party is the mediator between two conflicting parties (⁵⁷).
- Both parties have a chance to share their opinion.

⁽⁵⁵⁾ Voluntary and compulsory conciliation/mediation is mentioned by the International Labour Organization as one form of addressing a dispute. See International Labour Organization, 'Labour legislation guidelines, chapter IV: substantive provisions of labour legislation: settlement of collective labour', 2008.

⁽⁵⁶⁾ For steps to take, see MindTools, 'Resolving workplace conflict through mediation – managing disputes informally'.

⁽⁵⁷⁾ This list of benefits is based on Camody, M., 'Mediation in the workplace', Legal Island, 2016.

- Both parties are actively involved in finding a solution.
- A contract agreed upon by both parties is formulated.

LIMITATIONS

Cases of misconduct and breaches of the code of conduct (e.g. sexual harassment or bullying) are addressed through different channels, since otherwise their severity might be downplayed.

Duration	Approximately 2 hours per session
Group size	Mediator and the conflicting parties/individuals
Frequency	Normally a one-time intervention resulting in a contract between two
	parties
Facilitator	Mediator: external specialist
Facilitator	Mediator: external specialist



5. SELF-CARE

TOPICS COVERED IN THIS SECTION

✓ <u>5.1. How to develop a self-care plan</u>
✓ <u>5.2. How to set healthy boundaries</u>

Tools to be used by all staff.



The two activities proposed in this section are **relevant for all staff members**: managers, team leaders and first-line officers alike. Although the employer has a responsibility to ensure staff well-being, employees are obliged to proactively ensure their own self-care. The impact of self-care is visible only after some time, and it should be seen not as a one-time intervention but, rather, as an ongoing effort. Although staff welfare is a core commitment of the employer, the practice of self-care by employees can be a powerful way of maintaining work–life balance and healthy motivation for and effectiveness at work (⁵⁸). Self-care activities are numerous and also very personal. Some self-care activities may be linked to the health system available in the EU+ country in question (e.g. making use of yearly preventative health check-ups such as dental hygiene visits, mammograms and blood tests), whereas others relate to everyday life. Self-care can be understood as just about anything you can do to make yourself feel good and healthy.

An individual can ensure that they take care of themselves by engaging in the staff welfare provisions introduced by authorities and practising regular self-care activities. Self-care is a personal responsibility and can support authorities to meet the following standard.



SW4 prevention

66

In reception facilities, staff are often part of the community they serve. Staff often have the same fears and emotions as the residents. They also are eager to support and help the residents. But how can they take care of their own needs? If they do not take care of themselves, how can they be strong for others? (⁶⁰)

WHICH SELF-CARE STRATEGIES SHOULD BE EMPLOYED?

Self-care (⁵⁹) can involve the following.

- Maintaining healthy daily routines. This includes having enough sleep, maintaining a healthy diet, eating regular meals, taking breaks during the day, exercising regularly, taking holidays, etc.
- Seeking emotional satisfaction. This includes making one's workspace as comfortable as possible, interacting and chatting with colleagues, identifying exciting and rewarding tasks, reminders of work achievements whether big or small, practising a hobby, etc.
- Keeping healthy boundaries between work and personal life. This includes avoiding bringing work home, allowing for quality time with children and partner, spending time with friends, paying attention to social relationships that bring positive energy, etc.
- Having trust and positive dynamics with peers. Sharing difficult experiences and seeking consultation with peers are effective means to cope with stressful situations and events.
- Maintaining strong social networks. This includes maintaining active, lively and nurturing relationships with family, friends and colleagues, which is an important resilience factor for asylum and reception professionals working on deployment or in stressful settings.

The development of a personal self-care plan is a first step in the right direction. However, there is no one-size-fits-all plan. What works for one person may not necessarily work for another in the same way. Therefore, it is important to create an individualised self-care plan.

⁽⁵⁹⁾ Refer also to the Headington Institute, 'Self care and lifestyle balance inventory'.

⁶⁰ Comment by a first-line officer working in a reception facility.

5.1. HOW TO DEVELOP A SELF-CARE PLAN

This section aims to support managers and first-line officers in authorities to develop their own self-care plan. There are many ways to take care of yourself. It is important, however, to personalise the various tools that are available, including those that are available online.

Step 1. Self-reflection

A personal reflection on your own way of coping with stressful situations is important (⁶¹). This includes analysing your behaviour and the reactions you might have when exposed to stressful situations at work or when engaging with applicants with severely traumatic experiences. Creating a basic table in which you list the positive and negative coping mechanisms identified can facilitate this process. It is recommended that you list five positive and five negative coping strategies.

TABLE 2. Examples of positive and negative strategies for coping with stress

COPING WITH STRESS		
Positive	Negative	
Going for a walk / playing sports	Yelling and increased aggressiveness	
Taking regular leave	Overeating	
Meditation/yoga	Skipping meals	
Reading a book	Drinking more alcohol / smoking more than usual	
Calling a friend / family member	Being addicted to using your phone	

NB: A template can be found in Annex 13 'Self-care plan'.

Step 2. Reflecting on personal and professional needs

The next step is to consider how to replace some of the negative ways of coping with stress with positive ones.

Step 3. Put reflections into writing and develop a self-care plan

A template such as the one below can facilitate the drafting of a personal self-care plan.

⁽⁶¹⁾ This can be done by completing a self-care assessment worksheet. An example can be found at National Coalition of STD Directors, 'Self-care assessment worksheet', in Saakvitne, K. W. and Pearlman, L. A, *Transforming the Pain: A workbook on vicarious traumatization*, TSI/CAAP, W. W. Norton & Company, New York, 1996.

TABLE 3. Examples of activities for inclusion in a self-care plan

TYPE OF ACTIVITY	FREQUENCY
Physical	
I check if any annual check-ups are due and, if so, make an appointment (e.g. dentist, gynaecologist, dermatologist) I go for a minimum of three short walks a week	
Emotional/spiritual/mental	
I consciously use positive self-affirmations I accept that not everything can be controlled	
Personal/social/financial	
I make an effort to meet and engage with friends/family on a regular basis (dinner/coffee/walks) (e.g. at least once a week) Occasionally I treat myself to something (e.g. new running shoes, a massage)	
Professional	
After 6 p.m., I do not take any work-related calls I say no to extra responsibilities sometimes I engage in new work-related areas that seem interesting to me I allow myself to receive advice/ knowledge/opinions/support from colleagues	

In the frequency column (options: frequently (4), occasionally (3), rarely (2), never (1)), you can indicate progress made on the various activities in the personalised self-care plan, which facilitates monitoring of where you have made improvements and areas to continue focusing on.

This type of self-care plan is to be used for a while (2–3 months) and can be updated and adjusted as necessary, with the aim of making improvements to the way you feel.

5.2. HOW TO SET HEALTHY BOUNDARIES

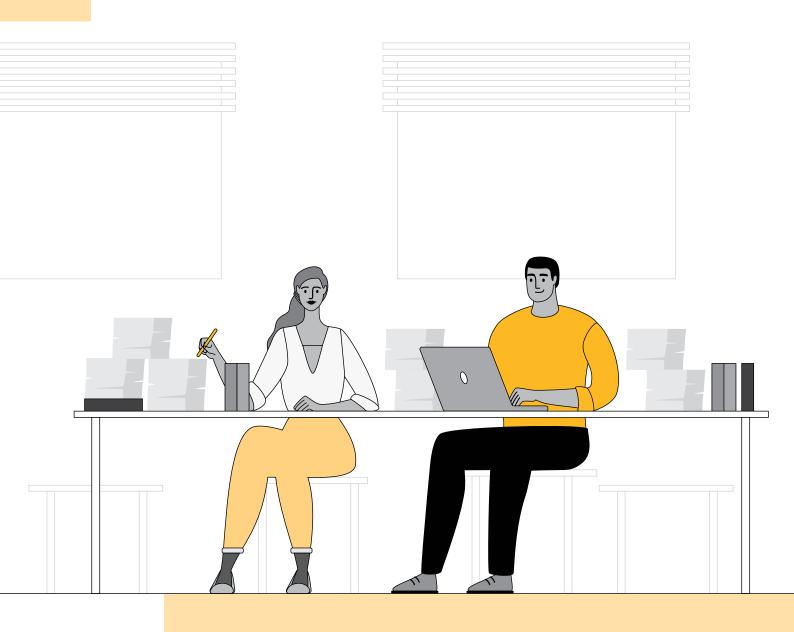
Setting healthy boundaries (⁶²) is an important part of a successful self-care plan. Healthy boundaries are part of the effective setting of boundaries within the daily work setting in particular, but also in individuals' private lives. Setting healthy boundaries will reduce the risk of stress and, in the worst-case scenario, burnout. In times of increased remote working arrangements, having a clear schedule and times to disconnect are even more important.

What is boundary setting? A boundary is a limit, a stopping point. Setting boundaries can be helpful, provides room to breathe and, at best, can provide feelings of privacy, security and certainty. Boundaries can be grouped into physical and emotional categories. Physical boundaries include one's body, sense of personal space and privacy in general, whereas emotional boundaries are those protecting a sense of self-esteem and ability to separate your own feelings from those of others. These can include beliefs, behaviours, choices, sense of responsibility and similar.

Setting boundaries can help you to:

- acknowledge personal limitations;
- take care of yourself, colleagues and applicants entrusted to the authority;
- provide clarity on tasks to achieve during a certain time frame;
- avoid confusion and misunderstanding;
- ensure work is effective, efficient and impactful;
- prevent situations in which individual managers and first-line officers might abuse their position of power.

Setting interpersonal boundaries can sometimes be challenging. Some of the challenges in setting boundaries include worrying about hurting or annoying a colleague or line manager by saying 'no' or worrying about creating a feeling of disharmony or dislike between team members or between yourself and line management.



6. CAPACITY-BUILDING INTERVENTIONS

6. CAPACITY-BUILDING INTERVENTIONS

The findings of the initial EASO mapping exercise on staff welfare in EU+ countries conducted in 2019 indicate that the majority of professionals working in asylum and reception have entered the field **out of choice**. Although they consider work with applicants for international protection demanding, they also consider it rewarding. The analysis of responses of first-line professionals in the mapping exercise points to three main factors that appear to be instrumental in promoting staff welfare.

- Constructive and trusting team dynamics allowing space for peer, professional and personal exchange.
- Effective and empathic leadership at all levels to guarantee ongoing access of staff to line managers who have the skills and time to support their team. Clear working instructions and clearly defined roles and responsibilities, as well as standards on how to fulfil duties, strengthen employees' sense of security and ensure comfort in the workplace.
- Transparent, clear and straightforward staff welfare processes that enhance employees' sense of safety and security.

Besides the interventions introduced in the previous sections, the design and conduct of dedicated occupational training programmes for management and staff in asylum and reception can serve as a further tool to promote well-being. These programmes can also prevent, and, where needed, address, potential **work setting**- and **work context**-related stressors.

By offering managers and first-line officers welfare-centred capacity building, authorities will be able to meet the following standard.

SWS 6 capacity building

Training courses to develop the knowledge, skills and abilities of first-line officers and managers can serve as a powerful tool for the promotion of staff welfare. The opportunity to develop and grow professionally contributes to motivation and satisfaction in the workplace, both of which are important components of well-being (⁶⁴). Ensuring that staff are equipped with the skills they need is important for any organisation.

The introduction and implementation of a coherent staff welfare-oriented training programme is to be regarded as a key element in the staff welfare strategy of any asylum and reception authority. A training approach directed at promoting staff knowledge and skills regarding both professional expertise and staff welfare awareness is instrumental in achieving all of the proposed standards. A well-designed induction training programme will provide staff with orientation regarding the organisational structures and systems in place,

55

46 % [of survey respondents] stated that their employers provided training courses on stress management, self-care and other related policies (⁶¹).

⁽⁶³⁾ EASO, Mapping report on staff welfare initiatives introduced by agencies working in the field of asylum in Europe, 2019, p. 11 (restricted document).

⁽⁶⁴⁾ Siddiqui, M. N., 'Success of an organisation is a result of employees performance', Advances in Social Sciences Research, Vol. 1, No 4, 2014, pp. 179–201.

including approaches and procedures in the sphere of staff welfare and safety and security. The implementation of training sessions on communication; , stress management and prevention, self-care, management and leadership, team building, and cultural orientation will help to prevent burnout, miscommunication and work overload, promoting both the physical and the mental well-being of staff. These aspects, combined with dedicated training sessions on critical incident management, will equip staff with the necessary information about the procedures in place and the skills needed to act and cooperate in such situations in the best interests of applicants for international protection and first-line officers.

6.1. THE BENEFITS OF INVESTMENT IN THE CAPACITY OF STAFF

Knowledge and skills are crucial to every organisation, including asylum and reception authorities. Investment in personnel joining the team as well as ongoing investment in existing personnel ensures higher levels of employee satisfaction and increases the chances for authorities to achieve set targets.

Asylum and reception staff should be engaged in training throughout their employment trajectory to ensure they meet the demands of a job that often requires flexibility owing to the changing legal framework and asylum trends. If first-line officers are not supported in their already challenging work setting, they tend to feel overwhelmed and ill equipped to complete daily tasks, and they may develop stress-related symptoms. Although training informs employees and increases their knowledge, the development of skills also prevents feelings of not being able to fulfil daily demands. Providing the required information and the opportunity for skills development in a structured and timely manner to employees will ensure that their self-confidence and motivation increase. Employees will feel cared for, since they will see the willingness of management to support staff members. Training sessions are often conducted in groups, thereby supporting team-building efforts.

Well-trained first-line officers will be both more efficient and more resilient in the demanding asylum and reception settings, thereby ensuring that managers need to supervise less without jeopardising professionalism. Investment in employees in many cases also reduces the risk of high staff turnover.

6.2. STAFF WELFARE-CENTRED CAPACITY BUILDING

This guide proposes a sample training programme to ensure the promotion of staff welfare in an asylum authority or reception. It can be used as a framework orientation in conceptualising training approaches. It is suggested that the training programme centres on the following principles.

6. CAPACITY-BUILDING INTERVENTIONS

- The design is based on a needs assessment conducted for staff and managers.
- The programme employs an interactive and participatory learning approach with a strong peer-learning element.
- The programme involves soft-skills training sessions helping staff build resilience towards the main job-related stressors.
- The programme addresses training needs relevant to the employment trajectory of staff (onboarding, employment, end of employment).
- The programme involves training modules customised for first-line officers and managers to ensure each staff category contributes, according to their roles and responsibilities, to a work environment where staff welfare is a priority.
- The programme involves vocational training as a standard component. This ensures that staff are in possession of the knowledge, skills, responsibility and autonomy required for good-quality performance.
- The programme involves regular programme update based on monitoring of the achievement of training objectives and learning outcomes.
- A staff welfare training framework is designed to complement the wider training structures for asylum and reception personnel and ensure the implementation of high-quality SWSs.

Onboarding training sessions ensure that newcomers are informed about the organisational structure and systems in place. This training covers internal rules and regulations, communication procedures and technical systems, as well as safety and security instructions.

Vocational training could take the form of the professional training courses provided by the **EASO training curriculum**, which is designed mainly for case officers and other asylum and reception officials throughout the EU. The curriculum covers core aspects of the asylum procedure to ensure that trainees receive training in areas that are key for the performance of their daily tasks and specific roles. The EASO learning methodology involves online e-learning and face-to-face sessions, enabling both theoretical and practical approaches to training. The EASO training curriculum and modules are currently undergoing thorough review in accordance with the established European sectorial qualification framework for asylum and reception officials, which matches occupational standards (⁶⁵) with relevant educational standards (⁶⁶) / learning outcomes for various staff sectors in the asylum and reception field (⁶⁷).

Soft-skills training sessions should target the development of skills relating to stress management, prevention of burnout, response to trauma, communication with managers and staff and within teams, intercultural sensitivity and leadership.

⁽⁶⁵⁾ EASO, 'European sectoral qualifications framework for asylum and reception officials – occupational standards for asylum and reception officials', 2021.

⁽⁶⁶⁾ EASO, 'European sectoral qualifications framework for asylum and reception officials – educational standards for asylum and reception officials', 2021.

⁽⁶⁷⁾ EASO, Training and Learning Strategy, 2019; EASO, Annual Training Report, 2019; EASO, 'Training plan', 2020.

Needs assessments and evaluations. The staff welfare training programme of an authority is designed based on an assessment of needs of various categories of staff, including both newcomers and experienced professionals. It is to be operationalised through an annual training plan. The annual training plan, as well as the training programme, is to be updated regularly (annually or biannually) based on the monitoring and evaluation of implemented training sessions and the achievement of training objectives and learning outcomes. The authority implementing a training programme must develop the necessary needs assessment and monitoring tools.

The structure of Table 4 takes into account the stages of employment: onboarding, employment and end of employment. For every stage, there is a minimum recommended number of training sessions, focusing on induction, professional development and soft skills. The training sessions can be conducted internally depending on the focus, as well as with the support of external partners and specialists.

TABLE 4. List of training programme topics per work stage and staff category

STAGE OF EMPLOYMENT	TYPE OF TRAINING	GENERAL DESCRIPTION / TRAINING TOPICS	INITIALIS	SING/IMPI ACTOR	INITIALISING/IMPLEMENTING ACTOR	STAF T	STAFF CATEGORY TRAINED	ORY
			язраиам иімда\ян	тиэмтяачэо	INTERNAL/ EXTERNAL T2IJAIJЭ9Q2	REDANAM	ТАТ ЯН	ЭТАТ ВЭНТО
Onboarding/ pre-deployment	Induction 1: organisational structure and systems of workplace	Organisational culture (including hierarchy and communication channels)		~		7	>	7
		Overview of procedures, rules, regulation, laws		1		7	1	7
		Administrative procedures		1		1	1	7
		Anti-fraud and anti-corruption / anti-(sexual) harassment policy or similar		>				
		Code of conduct		~				
		Organisational structure and leadership team (hierarchy)		~		7	7	>
	Induction 2: technical systems and equipment	Use of relevant office equipment		>		>	>	>
		Use of organisation's internal communication platforms		~		>	>	>
		IT software relevant for asylum staff (e.g. Maris in Germany, Eurodac, COI Portal, EASO Information and Documentation System)		~		7	>	>
Onboarding/ pre-deplovment	Induction 3: safety/security and logistics/procurement	First aid training		~				
-	-	Briefing and security training sessions (including for deployments abroad)		~		7	>	>
		Fire protection instruction			7	>	>	>
		Safety at work, behaviour-based safety, safety culture and safety circle		~	~	>	>	>

STAGE OF EMPLOYMENT	TYPE OF TRAINING	RAINING	GENERAL DESCRIPTION / TRAINING TOPICS	INITIA	LISING/IMPI ACTOR	INITIALISING/IMPLEMENTING ACTOR	STAFF TI	STAFF CATEGORY TRAINED	JRY
				ЯЗ ВАИАМ	ИІМДА\ЯН ТИЭМТЯА9ЭД	INTERNAL/ EXTERNAL T2IJAIJЭ9Q2	ЯЗ РАИАМ	ЭЭАТ ЯН	ЭТНТ ЯЭНТО
Employment (ongoing	Professiona	Professional development	Recruitment, staff selection and staff performance appraisal		>		>		>
support)			Asylum-related professional development training modules: to be provided in accordance with the EASO training curriculum (as detailed in the <i>EASO Training Catalogue</i>) Learning paths for particular job profiles in asylum ⁽⁸⁾		>	7			
			Data protection		>				
	Soft skills	Communication	Types of communication	7		7	>		>
		and communication techniques	Setting boundaries	7		1	>		>
			How to deal with difficult colleagues	~		1	>		>
			How to communicate with vulnerable persons including applicants	7		7			>
			Negotiation techniques	7		1	7		>
			Managing conflicts	7		1	~		>
			De-escalation strategies	~		7	~		>
		Stress management	What is stress, burnout and vicarious trauma and how to identify them	7		7	>		>
			How to tackle stress and strengthen resilience	7		7	>		>
			Preventing stress and self-care tools	7		7	>		>
		Intercultural	Cultural diversity	7		7	~		>
		sensitisation	Safeguarding and anti-discrimination policies	7		7	>		>
				~		7			

Employment (ongoing support) Soft skills Management and leadership in the asylum Defining leadership and management bedership in the asylum Support) Soft skills Management and the context Expectations of managers Rupporti Dimensions of finangement and the context Dimensions of managers Rupporti Expectations of managers Leadership in daily management and the Management and the Dimensions of managers Rupporti Dimensions of managers Dimensions of managers Rupporti Dimanaging balance duving R	ERAL DESCRIPTION / TRAINING TOPICS	INITIALISIN	INITIALISING/IMPLEMENTING ACTOR	STAFF TI	STAFF CATEGORY TRAINED	ОКУ
Soft skills Management and Defin leadership in the asylum Dime context Mani Expe- Lead Mani Team building (⁶) How What team		яздаиам иімда/ян измеит	INTERNAL/ EXTERNAL T2IJAIJ392	A 3DANAM	ЭТАТ ЯН	 ятат <i>е</i> язнто
asylum Expe Lead Man Strat Decis Man How dyna team	and management	>	>	>		
Expe Lead Man: Strati Decis Man: Man: Man dyna dyna team team	rship	>	>			
Lead Man Strat, Man Man dyna dyna team team	agers	>	>			
Mana Stratı Decis Mana Mana Mana dyna dyna Team	ership in daily management and time management		>		·	
Strat. Decis Mana Mana How dyna dyna Team	Se		>			
Decis Mana Delee How dyna team Team	egic thinking and planning / contingency planning	>	>			
Mana Deleg Mana How dyna team Team			>			
Deleg Man dyna dyna team Team	aging balanced workloads (principles and benefits)		>			
Mana How dyna What team			>			
How dyna Whai team Team	aging balance between quality and efficiency		>			
What makes a team success teamwork? Team-building techniques a	a team is formed (stages in team building and team mics)	>	>	>		
Team-building techniques a	What makes a team successful and what can spoil teamwork?	>	>	>		
_	iques and activities	>	>	>		
Coaching			>	>		

⁽⁶⁹⁾ Team building is to be seen as an ongoing process involving activities related to the full trajectory of engagement of team members, including new staff member(s) joining the team, being part of the team during employment and leaving the team at the end of employment.

STAGE OF EMPLOYMENT	TYPE OF TRAINING	GENERAL DESCRIPTION / TRAINING TOPICS	INITIAL	ISING/IMPI ACTOR	INITIALISING/IMPLEMENTING ACTOR	STAFF TI	STAFF CATEGORY TRAINED	RY
			AJDANAM	ИІМДА/ЯН ТИЭМТЯАЧЭД	INTERNAL/ EXTERNAL T2IJAIJJAQ2	REDANAM	ЭЭАТ 2 ЯН	ТНАТ2 ЯЭНТО
Employment (ongoing support)	Soft skills Critical incident management	Strategies to handle a critical incident and strengthen resilience (on a personal level and from the viewpoint of a manager to support a team member)		>	7	>		>
		Trauma and vicarious trauma (signs and coping mechanisms)		7	7			
		Immediate, medium-term and long-term support to first- line officers and applicants		7	~			
End of employment	Preparation for exit	How to conduct constructive exit debriefs / gain feedback		>		>		
		Preparation of documents (references, performance statements, etc.)				~		

NB: COI, country of origin information.

6. CAPACITY-BUILDING INTERVENTIONS

In summary. Training provided in the asylum and reception setting should inform employees and provide them with skills to strengthen their performance and teamwork abilities, to practise assertive and empathic communication and to become more resilient to stress. Training programmes should be designed with the aim of **preventing** negative consequences that might affect staff experiencing a constantly high workload and a demanding and often-changing work setting. If a training programme is well conceptualised and regularly updated based on needs assessments, then staff turnover, sick leave, poor performance and interpersonal conflicts at work will be reduced.

Training can also serve to **empower** asylum and reception professionals. Well-trained employees are better equipped with the skills they need to fulfil their tasks and to respond to stressful situations (e.g. through critical incident management skills). Training does not eliminate the need for further staff welfare interventions, such as team meetings, educational supervision and collegial support, but it reduces the need for detailed and constant line management. In addition, training can **change** the way team members interact with one another. When employees feel cared for, they feel better connected and are more likely to invest in the organisation. It is human nature to want to work for someone who respects us and shows that respect.

ANNEXES

ANNEX 1. DEFINITIONS

This guide uses **staff welfare** (⁷⁰) as an umbrella term referring to policies and measures directed at the well-being of employees, understood in both the physical and emotional senses. Staff welfare relates to maintaining health and safety in every aspect related to work. To this end, employers evaluate the **risks** staff may be exposed to in the work environment and put in place preventative and protective measures, such as ensuring that each staff member has received the necessary health and safety **information** and **training.**

Well-being (⁷¹) at work is understood as physical health and moral and social fulfilment, not just absence of accidents or occupational illnesses. Positive aspects of well-being at work include self-acceptance, autonomy, enthusiasm, professional development, purpose, positive relationships with others and personal growth (⁷²).

Stress (⁷³) is defined in terms of dynamic interactions between the individual and their environment. It is often inferred by the existence of a problematic person–environment fit and the emotional reactions that underpin those interactions.

Work-related stress (⁷⁴) occurs when pressure due to work demands and other work-related stressors becomes excessive and prolonged in relation to one's perceived resources, capabilities and skills to cope.

There is a distinction between the concepts of **work-related stress** and **challenges at work** (⁷⁵). Experiencing challenges in one's work can energise a person psychologically and physically and encourage them to learn new skills. Feeling challenged by one's work is an important ingredient in developing and sustaining a psychologically healthy work environment. On the other hand, feeling stressed involves a negative psychological state with cognitive and emotional components that affect the health of both the individual and the organisation.

When stress reactions (cognitive, emotional, behavioural and psychological) persist over a prolonged period, this may result in more permanent, less reversible (health) outcomes.

⁽⁷⁰⁾ Your Europe, 'Health and safety at work', 2020.

⁽⁷¹⁾ EU-OSHA, 'Work-life balance – managing the interface between family and working life', OSHwiki, 2015. In the broader sense, wellbeing results from the fulfilment of one's important needs and the realisation of goals and plans set for one's life. Well-being involves peoples' positive evaluations of their lives, including positive emotion, engagement, satisfaction and meaning.

^{(72) &#}x27;Growth and transformation', In Practice: The EAWOP Practitioners E-Journal, No 12, 2020, p. 17. Although happiness and the feeling of well-being at work are, in part, linked to individual income, there are other contributing factors. At a certain point, level of happiness and life satisfaction no longer relate to income level.

⁽⁷³⁾ Cox, T., Griffiths, A. J. and Rial-Gonzalez, E., *Research on Work-related Stress*, Office for Official Publications of the European Communities, Luxembourg, 2000.

⁽⁷⁴⁾ Hassard, J. and Cox, T., 'Work-related stress: nature and management', OSHwiki, 2015.

⁽⁷⁵⁾ Cox, T., Griffiths, A. J., and Rial-Gonzalez, E., *Research on Work-related Stress*, Office for Official Publications of the European Communities, Luxembourg, 2000.

Examples include chronic fatigue, compassion fatigue, burnout, vicarious trauma, musculoskeletal problems and cardiovascular disease.

Compassion fatigue (⁷⁶) refers to a shift in a person's ability to feel empathy for the individuals they work with and/or colleagues as well as family members. A first-line officer might suffer from compassion fatigue as a result of years of exposure to the traumatic stories that applicants share, which can start sounding the same to the officer and no longer elicit a reaction.

Burnout (⁷⁷) describes an individual's psychological response to chronic stressors at work. Although it is not regarded as a medical condition, it can influence health status and potentially requires clinical attention. Burnout is also conceptualised as a crisis in the relationship with work in general.

Burnout at work manifests itself through symptoms of (emotional) exhaustion, cynicism (depersonalisation) and diminished professional efficacy.

- Exhaustion refers to feelings of overstrain, tiredness and fatigue, which result from long-term involvement in an overdemanding work situation.
- Cynicism reflects an indifferent and distant attitude towards work, disengagement and a lack of enthusiasm for work. It is a dysfunctional way of coping with exhausting situations, reducing the possibilities of finding creative solutions at work.
- Professional efficacy consists of feelings of competence, successful achievement and accomplishment in work, which diminish as burnout develops.

Burnout can have a negative influence on health, cognition and work ability, as well as on the perception of overall work performance.

Vicarious trauma (⁷⁸) can be summarised as the 'cost of caring'. Vicarious trauma can be described as an intense reaction and experiencing of trauma symptoms by persons who are exposed to someone else's traumatic experiences. This often affects officials working with applicants in the context of asylum. Vicarious trauma is cumulative, and a process that unfolds over time. It describes a shift in a person's world view. For individuals experiencing vicarious trauma, it becomes difficult to set boundaries with the applicants they work with. Leaving the office at the end of the day is difficult. It can also lead to a loss of meaning and hope.

⁽⁷⁶⁾ Vlack, T. V., 'Tools to reduce vicarious trauma / secondary trauma and compassion fatigue', Tend Academy, 2017.

⁽⁷⁷⁾ EU-OSHA, 'Understanding and preventing worker burnout', OSHwiki, 2013. The World Health Organization regards burnout as an occupational phenomenon: 'Burn-out is a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed', World Health Organization, 'Burn-out an "occupational phenomenon": International Classification of Diseases', 2019.

⁽⁷⁸⁾ See also information shared by the Headington Institute: Pearlman, L. A. and McKay, L., Vicarious trauma: what can managers do?, Headington Institute, Pasadena, CA, 2008.

ANNEXES

Psychological risks (⁷⁹) refer to the likelihood that work-related psychosocial hazards will have a negative impact on staff health and safety through their perceptions and experience. Psychosocial hazards concern aspects of the design and management of work, and its social and organisational contexts that have the potential for causing psychological or physical harm. Psychological risks have been identified as one of the major contemporary challenges for occupational health and safety. Psychological risks are linked to workplace problems, such as work-related stress and workplace violence and harassment (also referred to as bullying). Negative outcomes on an individual level include poor health and well-being, and problems with interpersonal relationships, both at the workplace and in the individual's private life.

Work–life balance (⁸⁰) involves satisfaction and good functionality at work, as well as at home, with minimal conflicts between an individual's roles. In the achievement of work–life balance, three core, interconnected components should be considered: (1) 'time balance', which refers to equal time being given to work and non-work roles, (2) 'involvement balance', which refers to equal levels of psychological involvement in work and family (non-work) roles, and (3) 'satisfaction balance', which refers to equal levels of satisfaction in work and family (non-work) roles.

For the purpose of this practical guide, EASO provides the following definitions of various staff categories in the field of asylum and reception.

A **first-line officer** is a staff member working directly with applicants for international protection within an asylum and/or reception setting.

First-line officers could be:

- reception officers the staff providing support in reception facilities;
- registration officers the staff in the national competent authorities who are involved in any stage of the registration and lodging of applications;
- case officers the officers involved in conducting personal interviews with applicants for international protection and/or making decisions on applications for international protection (also referred to as interviewers and decision-makers).

Managers (sometimes also referred to as supervisors, team leaders and line managers) are persons leading one or more first-line officers or other managers depending on seniority. For the purpose of this guide, the definition also includes persons other than line managers who take up a coordinating or supervising role, such as team leaders, supervisors and coordinators.

⁽⁷⁹⁾ EU-OSHA, 'Managing psychological risks: drivers and barriers', OSHwiki, 2017.

⁽⁸⁰⁾ EU-OSHA, 'Work-life balance - managing the interface between family and working life', OSHwiki, 2015.

ANNEX 2. RECRUITMENT INTERVIEW GRID TEMPLATE

Below are some examples of questions linked to stress management and self-care that could be inserted into an existing interview grid.

Role: insert position

Candidate:

Introduction

- Introductions of interview panel members.
- Thank candidate for their application. Outline the purpose of this stage of the selection process.
- Explain the interview will take approximately 1 hour and that there will be an opportunity for them to ask questions at the end.

INTERVIEW QUESTIONS	KEY INDICATORS	EVIDENCE SCORED AGAINST INDICATORS FROM CANDIDATE'S RESPONSE (INDICATE IF FULLY MET (10 POINTS), PARTLY MET (5 POINTS) OR NOT MET (0 POINTS))
Key area: motivation		
Can you tell us your motivation for applying for this job? What will make this role different to what you have done before, and how will you equip yourself for this change? What are your career plans for the next 5 years?	 Examples of indicators: Demonstrates a good understanding of the scope of the role and is able to identify the personal challenges that it represents Explains their motivation for the job Wants to work in the field of asylum/ migration Has experience of developing programmes Develops and encourages new and innovative solutions 	Comment: Final score:
•	on (related values: accountability, creativity and i and their ability to self-criticise and learn from expe	
Please share some examples of how you have demonstrated your work ethic and results-oriented behaviours. These examples should demonstrate the impact your work ethic and results-oriented behaviours have had on colleagues and/ or staff under your direct management	 Examples of indicators: Holds themselves accountable for achieving results Holds themselves accountable for delivering on their responsibilities, provides the necessary development support to improve performance and applies appropriate measures when results are not achieved Engages with and motivates others Understands the importance of team building Understands the importance of regular communication with team members as well as constructive individual feedback Values diversity; sees it as a source of competitive strength 	Comment: Final score:

INTERVIEW QUESTIONS KEY INDICATORS EVIDENCE SCORED AGAINST INDICATORS FROM CANDIDATE'S RESPONSE (INDICATE IF FULLY MET (10 POINTS), PARTLY MET (5 **POINTS) OR NOT MET (0 POINTS))** Key area: stress management and self-care Comment: For the role you are applying for, you Examples of indicators: will be required to deliver on time and Holds themselves, in addition to team Final score: to a high level of quality and accuracy. members, accountable for achieving results How do you feel about this and what is Carries out proper planning your experience of production targets Delegates and prioritises well with tight deadlines when potentially In case of lack of knowledge on a matter, simultaneously trying to handle requests additional development training competing priorities? Overtime possible where needed, but not on a regular basis (work-life balance) Please give us an example of when you Examples of indicators: Comment: Final score: had to work on a difficult assignment - Understands the importance of the team and/or deal with a rather uncooperative Would make a timely and appropriate colleague in your view and how you request for additional expertise solved this situation Takes a participatory approach to planning the task/assignment in question Would be able to provide clear instructions Would undertake early communication with staff members to avoid misunderstanding of tasks and timelines What do you normally do when you Examples of indicators: Comment: - Sets appropriate boundaries with colleagues Final score: feel under pressure or stress? Refer to areas you feel you manage well and Engages in realistic planning areas where you think you have room to - Has a healthy lifestyle (e.g. engaging in improve your approach regular physical activity) Ensures a good work–life balance Is not ashamed to ask for help Imagine you enter the reception facility Example responses: Comment: (for reception officers) or the interview - Generally, I would have familiarised myself Final score: room (for case workers) and an applicant with information on critical incident approaches you with a razor blade in management provided by my employer, the their hand saying that they will try to dos and don'ts, and I would be aware of the kill themselves if they receive a negative SOPs in place in these cases decision on their application. This is I would try to keep a calm voice a difficult scenario but please try to I would try not to panic and would talk suggest what you think you could/should calmly, ensuring that I keep a safe distance do to de-escalate the situation from the applicant I would try not to turn away from the applicant and to maintain eye contact - I would indicate that I can hear that they are very upset and afraid and that I would like to better understand. For that, we would need to sit down, take time and they need to put the razor blade away I would ask if they would like a sip of water. This could also provide an opportunity to ask for help Key area: code of conduct A staff member reports to you (reception Examples of indicators: Comment: centre manager) that they have - Recognises that this is a serious allegation Final score: a suspicion that another staff member and should be followed up immediately is potentially abusing a young person using internal/appropriate reporting as they were seen bringing the young channels person to their office regularly and Mentions a zero tolerance policy regarding closing the door. What action would you sexual abuse/harassment (which includes take and whom would you involve? beneficiaries of applicants for international

protection)

INTERVIEW QUESTIONS	KEY INDICATORS	EVIDENCE SCORED AGAINST INDICATORS FROM CANDIDATE'S RESPONSE (INDICATE IF FULLY MET (10 POINTS), PARTLY MET (5 POINTS) OR NOT MET (0 POINTS))
Overall score		

Closing

- Ask if the candidate has any questions.
- Explain the stages of the selection process and when the candidate should expect to hear the outcome.
- Confirm availability to start if offered the post.
- Verify details and suitability of referees that would need to be contacted prior to confirming an offer.
- Check whether there are any objections to a police record check.

Other key areas to be included depending on the job profile: technical expertise (knowledge, skills and experiences), collaboration (including with donors, local partner management), finances (budget cycle), monitoring and evaluation, etc.

ANNEX 3. SEMI-STRUCTURED CHECK-INS OR ONE-ON-ONE MEETINGS

Checklist 1. To be used by managers during their regular semi-structured one-on-one meetings with members of their team.

I. Organising the meeting	Status (tick for concluded)
1. Inform the participant well in advance of the time/place and the purpose of this meeting	
2. Inform yourself on the educational and professional background of the participant	
3. Prepare questions to cover topics of relevance	
4. Arrange an appropriate space/setting for this meeting, respecting confidentiality	
5. Consider other practicalities for this meeting (stationery, refreshments, etc.)	
II. Conducting the meeting	
1. Introduce the meeting	
2. Ensure that the participant has understood the purpose of the interview	
3. Inform the participant that the session is confidential	
4. Build rapport	
5. Use language that the participant can easily understand	
6. Use open-ended questions that allow for descriptive answers	
7. Ask follow-up questions when necessary	
8. Phrase questions in a constructive way	
9. Allow for questions and feedback	
10. Provide a section for your observations	
11. Close with a summary and inform on next steps	
III. Following the meeting	
1. Evaluate information and record observations in the relevant section	
2. Refer when appropriate (training courses, staff psychologists)	
3. Ensure that the information is passed to the HR department appropriately to be recorded in the file of the staff member	
4. Follow up on the outcome at the appraisal stage	

Possible questions (81) to have prepared for the first check-in meeting (82)

- Have you ever worked in a similar context?
- In what ways was it similar or different?
- What were the challenges that you faced there?
- How did those challenges affect you? How did they make you feel?
- How did you manage to cope with them? What was useful to you and what turned out maybe not to be so helpful?
- What do you expect to encounter in this professional context?
- What are your strengths? If I asked your previous colleagues the same question, what would they tell me? What would they tell me about your personal challenges?
- What motivates you in this field of work? What interests you?

⁽⁸¹⁾ These questions may differ slightly depending on the location of work and the tasks at hand.

⁽⁸²⁾ Panou, A. and Triantafyllou, D., *Greece Staff Support Policy Plan*, EASO. These questions are recommended for new, incoming staff members.

ANNEX 4. QUALITY OF (DE-)EMPLOYMENT SURVEY SAMPLES

Below are some questions that can be considered useful to get a general overview of the satisfaction of staff working in a particular setting. This sample questionnaire is followed by some targeted questions that authorities can pose to staff members who have been deployed to other EU+ countries.

A. FOR ONGOING SUPPORT AND EXIT INTERVIEWS

SURVEY SAMPLE					
1. Job and personal life					
1.1. How long have you worked in your present job for your current employer?	LESS THAN 6 MONTHS	6–12 MONTHS	1–3 YEARS	3–5 YEARS	MORE THAN 5 YEARS
1.2. In your main job, are you salaried, or paid by the hour, or is there any other payment method?	MONTHLY SALARY	PAID BY HOUR	OTHER (SPECIFY)		
1.3. Which of the following best describes your usual work schedule?	DAY SHIFT	AFTERNOON SHIFT	NIGHT SHIFT	ROTATING	ON CALL
1.4. How many days per month do you work extra hours beyond your usual schedule?		PLEASE S	PECIFY HOW MA	ANY DAYS:	
1.5. When you work extra hours on your main job, is it mandatory (required by your employer)?	YES	NO		OTHER (SPECIFY)
1.6. How hard is it to take time off during your work to take care of personal or family matters?	NOT AT ALL HARD	SLIGHTLY HARD	SOMEWHAT HARD	VERY HARD	
1.7. How often do the demands of your job interfere with your family life?	OFTEN	SOMETIMES	RARELY	NEVER	
1.8. How often do the demands of your family interfere with your work on the job?	OFTEN	SOMETIMES	RARELY	NEVER	
1.9. After an average workday, roughly how many hours do you have to relax or pursue activities that you enjoy?			PLEASE SPECIFY	:	
1.10. Do you have any jobs besides your main job or do any other work for pay?	YES	NO			
2. Workplace conditions					
2.1. My job requires that I keep learning new things	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY	DISAGREE
2.2. I have too much work to do everything well	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	
2.3. My skills are fully used in my job	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	
2.4. At the place where I work, I am treated with respect	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	
2.5. At the place where I work, I am at risk of physical injuries	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	
2.6. When I feel insecure because of the environment of my work, I can use my right to withdraw	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY	Ó DISAGREE

SURVEY SAMPLE				
2.7. There are no significant compromises or	STRONGLY	AGREE	DISAGREE	STRONGLY DISAGREE
shortcuts taken when worker safety is at stake	AGREE			
2.8. Where I work, employees and management work together to ensure the safest possible working conditions	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
2.9. The safety and health conditions where I work are good	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
2.10. Conditions in my job allow me to be about as productive as I could be	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
2.11. The place where I work is run in a smooth and effective manner	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3. Management at work				
3.1. The chances for promotion are good	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.2. The way work is organised and the office culture encourages team work	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.3. Participation in decisions affecting staff is promoted	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.4. Expectations in terms of tasks to deliver are clearly communicated	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.5. I have an opportunity to develop my own special abilities	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.6. I receive sufficient help, including resources (e.g. relevant equipment), to get the job done	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.7. I receive sufficient and relevant information to conduct good work	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.8. I am given a lot of freedom to decide how to organise my work – as long as it is professionally completed	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.9. My supervisor / line manager cares about the well-being of their team	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.10. My supervisor is supportive of me in getting the job done where possible	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.11. I trust the senior management at the place where I work	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.12. The safety of employees is a high priority for the authority I work for	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.13. Promotions are handled fairly and in a transparent manner	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.14. The people I work with can be relied on when I need help	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.15. Relations between managers and employees are good, respectful and professional where I work	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
3.16. You receive positive feedback from line manager(s) when the job has been completed well	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE

SURVEY SAMPLE				
4. Racism and discrimination				
4.1. Do you feel in any way discriminated against where you work because of your race or ethnic origin?	YES	NO		
4.2. Do you feel in any way discriminated against in your job because of your gender?	YES	NO		
4.3. Do you feel in any way discriminated against in your job because of your age?	YES	NO		
4.4. In the past 12 months, were you sexually harassed by another staff member while you were at work?	YES	NO		
4.5. In the past 12 months, were you threatened or harassed in any other way by anyone while you were at work (verbally/physically)?	YES	NO		
4.6. Have you reported the incident using the relevant reporting mechanisms?	YES	NO	THERE IS NO	REPORTING MECHANISM IN PLACE
5. Physical and emotional well-being	·			
5.1. Do you have access to stress management or stress reduction programmes at your current workplace?	YES	NO	NOT SURE	
5.2. During the past 12 months, how often did you have trouble going to sleep or staying asleep?		' SPEAKING, P WELL	SEVERAL WEEKS CON- SECUTIVELY / OFF AND ON	I SIMPLY CANNOT SLEEP PROPERLY
5.3. Do you think these disturbances regarding falling or staying asleep are linked to stress at work?	YES	NO		
5.4. In the past month, how many days did you feel sick?	NC	INE	1 OR 2	AT LEAST EVERY WEEK
5.5. Is the job security good where you work?	YES	NO		
5.6. How many times during the past month would you consider your mental state was rather bad or you felt down/sad/angry?	τοο (DFTEN		NORMAL
5.7. The moments where I felt bad last month were mainly work related	YES	NO		
5.8. During the past month, my poor physical or mental health kept me from doing my usual activities, such as self-care, work and recreation?	YES	NO		
5.9. I often find my job stressful	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
5.10. I often feel exhausted at the end of the working day	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
5.11. In the past month, I had headaches every day for a week or more	YES	NO		
		1	1	

SURVEY SAMPLE				
5.12. In the past month, I had backpain every day for a week or more	YES	NO		
5.13. In the past month, I had stomach ache every day for a week or more	YES	NO		
5.14. In the past month, I injured myself during working hours	YES	NO		
6. General items				
6.1. All in all, how satisfied are you with your job?	VERY SATISFIED	SOMEWHAT SATISFIED	NOT TOO SATISFIED	NOT AT ALL SATISFIED
6.2. All in all, how satisfied you are you with the general working atmosphere within your organisation?	VERY SATISFIED	SOMEWHAT SATISFIED	NOT TOO SATISFIED	NOT AT ALL SATISFIED
6.3. All in all, how satisfied are you with the general leadership style within your organisation?	VERY SATISFIED	SOMEWHAT SATISFIED	NOT TOO SATISFIED	NOT AT ALL SATISFIED

During analysis, the areas highlighted orange are to be given particular attention as a first step. Although one or two responses in the boxes highlighted orange might not necessarily indicate a major concern, it is advisable to stay alert, since they could indicate need on the part of the staff member. It is important to look at all the answers provided holistically. Only by taking a holistic approach is it possible to identify items that will need urgent attention rather than items that could be addressed at a later stage. A staff- and needs-centred approach is recommended. Where the staff member **answers in the affirmative to questions related to discrimination, sexual abuse and harassment, or personal safety**, this will require **immediate follow-up in consultation with the staff member**. Confidentiality should be observed at all times when using these surveys.

your colleagues?

B. POST-DEPLOYMENT SAMPLE QUESTIONS

If an expert has signed up for deployment to another EU+ country to provide support in the field of asylum or reception, it is advised that, after their return, feedback on the following areas is requested to improve organisational support in the future.

Preparation phase	
Would you rate the information received pre-departure on tasks to fulfil (expecta	tions by receiving counterpart) sufficient? YES/NO
Suggestions for improvement:	
Would you rate the information received pre-departure on general working envir	onment sufficient? YES/NO
Suggestions for improvement:	
Would you rate the information received pre-departure on contact person to liais NO	e with at the location of deployment sufficient? YES,
Suggestions for improvement:	
Was the information you received pre-departure about how to request support ir in your view sufficient? YES/NO	a case of an emergency (health, safety and security)
Suggestions for improvement:	
Have you been provided with information and an option to engage with a staff co	unsellor / stress team in case needed? YES/NO
Deployment phase	
Would you rate the support provided by your own team during your assignment t	o enable you to fulfil daily tasks sufficient? YES/NO
Suggestions for improvement:	
Would you rate the support provided by your counterpart in the other country ef	fective and sufficient to fulfil your daily tasks? YES/N
Suggestions for improvement:	
Were the reporting channels in general made clear, including in cases of an emer YES/NO	gency (health, safety and security) upon your arrival
Optional: Have you taken advantage of the offer to reach out to a staff counsellor	during your deployment? YES / NO / there was not
such an option	
Post-deployment phase	
Have you been given the opportunity to debrief on your deployment with your lir (e.g. support teams, counsellor)? YES/NO	e manager and/or any other person of your choosir
Suggestions for improvement:	
Considering your overall experience supporting another country, how likely are you way collocations?	ou to recommend such a deployment opportunity to

ANNEX 5. SELF-ASSESSMENT: BURNOUT TEST

There are many self-assessments available online that provide an idea of how close you might be to actual burnout. The sample presented below is from an online source (available at mindtools.com).

15 STATEMENTS TO ANSWER	NOT AT ALL (1 point)	RARELY (2 points)	SOMETIMES (3 points)	OFTEN (4 points)	VERY OFTEN (5 points)
1. I feel run down and drained of physical or emotional energy					
2. I have negative thoughts about my job					
3. I am harder and less sympathetic with people than perhaps they deserve					
4. I am easily irritated by small problems, or by my co-workers and team					
5. I feel misunderstood or unappreciated by my co-workers					
6. I feel that I have no one to talk to					
7. I feel that I am achieving less than I should					
8. I feel under an unpleasant level of pressure to succeed					
9. I feel that I am not getting what I want out of my job					
10. I feel that I am in the wrong organisation or the wrong profession					
11. I am frustrated with parts of my job					
12. I feel that organisational politics or bureaucracy frustrate my ability to do a good job					
13. I feel that there is more work to do than I practically can do					
14. I feel that I do not have time to do many of the things that are important to doing a good-quality job					
15. I find that I do not have time to plan as much as I would like to					
Final score					

Burnout test sample (⁸³)

Calculate how often you have answered with not at all, rarely, sometimes, often, very often as to calculate your overall score.

SCORECOMMENT15–18No sign of burnout here19–32Little sign of burnout here, unless some factors are particularly severe33–49Be careful – you may be at risk of burnout, particularly if several scores are high50–59You are at severe risk of burnout – do something about this urgently60–75You are at very severe risk of burnout – do something about this urgently

In terms of scoring, MindTools (⁸⁴) suggests the following rating system.

ANNEX 6. METHODS OF INTERVISION

A. THE 10-STEP METHOD

The goal is to help the case provider deal with a real issue or a sudden development in a work situation. In 10 clear steps (and one preparation step), the case provider is guided through a process from a description of the situation to formulating specific action. The central questions are always how does the case provider relate to both the case and the other players in that case; what are the underlying thoughts and assumptions behind their behaviour; how aware is the case provider of these hidden drivers; and how 'right' are they?

The structure of the method ensures that the other participants do not project their own analyses and issues onto the case provider's case. The method lets the case provider exercise control over how the group deals with the case because they determine how far they want to go into it. The steps suggested give the case provider time for reflection during the process.

In addition, participants have ample opportunity to pay extra attention to questions asked by others in the group and how the case provider feels about and responds to them, which stimulates their own learning process. The structure also creates a sense of calm for the case provider. The participants do not elbow each other out of the way to ask questions. The steps give a lot of support to the role of the facilitator.

BENEFITS OF THIS METHOD

- Because of its structure, the 10-step method ends naturally with a clear course of actions. The method makes an express call on the need for concrete action, based on the newly gained insights.
- The method is suitable for inexperienced intervision groups because it is easy to learn.
- The structure gives the case provider a sense of security and peace, and a sense of direction.
- The participants actively learn from each other's questions through feedback from the case provider.
- The quiet steps give the case provider the space and time to reflect on both the process and what they are going through.

DISADVANTAGES

- Participants may find the fixed structure restrictive, even after using the method only
 a few times, which runs the added risk that participants will become less careful in the
 execution.
- Going through all 10 steps can make the method feel as if it takes a lot of time.

 The method is less suitable for obtaining insight into the underlying values and norms presented by the case provider.

PITFALLS

- The method consists of two phases. The first phase is researching and specifying the issue. The second phase is exploring the alternative approach. In practice, people tend to focus more on the first phase. When this happens, the method is less effective. Keeping a balance is therefore important.
- When the emphasis is more on the second phase, the participants tend to take on an advisory role and do not help the case provider obtain their own insights.
- Discipline is required to be able to stick to the steps. Losing the structure eventually leads to loss of focus and a lack of commitment.

CONDITIONS/LOGISTICS FOR USE	
Duration	2–2.5 hours
Group size	Five to eight people
Items required	Flip chart and marker pens

THE 10 STEPS OF INTERVISION

PREPARATION

The facilitator and case provider discuss the case, the case question and choice of method beforehand. The case provider introduces the case in a few sentences and ends with 'My question is ...' The case provider communicates the case description and chosen intervision method to the participants and facilitator beforehand.

Step 1. Description of the case

The case provider gives brief information about the situation, and talks about impressions, reflections and the judgements they have made about the people involved in the case. This is the case provider's moment to provide factual observation and their conscious experience of the case. They share the way they behaved and the activities they have carried out up to now in that specific situation. They formulate the issue, while the participants listen closely without asking questions. The participants try to get the clearest view possible of the situation.

Step 2. Participants formulate questions

The participants ask the case provider clarifying questions to complete their view of the situation. Every participant formulates three questions that may clarify some aspects of the relationship between the case provider and the case. The participants ask openended questions and refrain from making suggestions or giving suggestions posed as questions. The questions are written down on a flip chart. The case provider listens closely and registers the question (⁸⁵). They do not answer. The facilitator tries to create a calm atmosphere in the group that does justice to each question so that the case provider can process questions.

Step 3. Assessment of the questions by the case provider

The case provider takes the time to assess questions one at a time, rating each one as + (warm), 0 (neutral) or – (cold). Warm means that the question is relevant to the case question posed by the case provider. Cold means that the question is not relevant to the case in their view. Neutral means that the question could be interesting, but it is not clear whether it has anything to do with the case. Should a question be unclear, the case provider can ask for clarification. The participants do not respond to the case provider's assessment. They can, however, pay attention to any hesitations and body language. There is no discussion.

Step 4. Case provider answers the questions

The case provider answers the questions marked as + (warm) briefly and to the point. They decide whether they are going to answer neutral and/or cold questions. Meanwhile, the participants do not comment and do not start discussions, even if the substance of the answer, according to them, does not correspond to the assessment as given in step 3.

Step 5. Last round of questions (or optional chit-chat round)

The participants get the opportunity to ask questions about the case provider's issue. This continues until there are no more questions. The case provider answers as concisely as possible. Once again, there is no discussion. Attention is paid to the answers to + (warm) questions, seeking doubts and dilemmas. The facilitator makes sure that the case provider has the time to listen to the questions and to answer them properly.

OPTIONAL

This step can be replaced by a 'chit-chat round'. Instead of asking questions, participants talk about what they have heard up to now and what impression it made on them. The case provider is present during this chit-chat round but sits with their back to the group. The case provider is not involved or spoken to. They take notes of what they hear. After this, the case provider is asked what they noticed.

Step 6. Formulating the core of the case

The participants write down the core of the case provider's issue. The participants put themselves in the place of the case provider and write 'My issue is ...' The case provider also writes down how they feel about their issue after the first five steps. The issue should be identified in terms of 'acting' and the 'role' played. The case provider's characteristic style or dominant view can also be mentioned. All formulations, except those of the case provider, get written down on the flip chart.

Step 7. Case provider assesses the core formulations

On the flip chart, the case provider rates the formulations in terms of + (warm), 0 (neutral) or - (cold) (see step 3). There is no discussion.

Step 8. Case provider chooses

The case provider writes down the issue as formulated on the flip chart, talks about what they like about the participants' formulations (step 7) and explains why something is considered + (warm), - (cold) or 0 (neutral). Then they indicate per formulation what they want to use in their own core formulation.

The other participants explain the motives behind their own formulations. Then clarifying questions can be asked, aimed at the behaviour, view or style of the case provider. The case provider ends this step by reformulating their issue and they write this on the flip chart. They formulate it in terms of, for instance, the tension between the desired and actual action or, for example, between professional goals and expectations arising in the situation.

Step 9. What forces keep the case 'going'?

The participants look at the forces that prevent the case provider from changing their behaviour. The case provider indicates how they could deal with the issue to change their professional behaviour. They point out the constructive and obstructive elements.

Possible questions

- What do I want to change?
- What changes am I facing?
- Which elements are causing the dilemma?
- Which opposite poles are causing the hesitation?
- What benefits and objections do I see?
- What consequences do I see?
- What do I need to consider?
- How can I introduce this?
- What steps do I want to take?
- What do I want to learn?
- From now on, what do I want to look out for?
- What did I want to discover about myself?
- What are the results of this insight; what will I do with them?
- What do I want to achieve in a week, a month or a quarter from now?
- Does this say anything about the way I 'learn'?

Step 10. Insights of participants and reflection on intervision

Each participant writes down their own insights. What did I learn from this case? It could be something to do with the preferred ways of thinking and asking questions, what made a question constructive or not, or what they learnt from other participants' questions, etc.

The facilitator reflects on the intervision session with the case provider and the participants. This reflection is aimed at:

- results of the case discussion;
- the case as a learning tool and the success of the applied method.

B. THE HELPFUL QUESTIONS METHOD

Throughout the day, we ask ourselves and other people lots of questions with the intention of gathering useful information. Intervision is about helping the case provider by asking them the right questions. Good questions are questions that help.

With the helpful questions method, people gain insight into what makes an effective question for intervision. This insight is twofold.

- The method provides insight into the motives of whoever is asking the question and the impact the question has.
- Helpful questions is also a learning method. It enhances the quality of the questions asked by the intervision group as well as in other (work) situations.

With this method, the case provider should come to realise what a question means to them and if it helps them get insight into their case. Many questions from participants concern the participant's desire to receive information about the context of the case. The case provider already knows these details, so any questions about the context have no added value. For example, how big is the company? How long has this project been running? What kind of leadership style does the person in charge have? For the sake of convenience, these are referred to as 'curiosity questions'. These types of question from participants are not aimed at helping the case provider.

It is a familiar scenario to be interrupted by a colleague while in discussion with an applicant, thereby interrupting your train of thought on the questions that you need to ask. A colleague may have a different set of questions. Furthermore, having a list of questions in your mind may distract you from listening to the answers as instead your focus is on the remaining questions to be asked.

The helpful questions method requires you to keep your mind on the case provider, and to respond to their answers and non-verbal behaviour so that you can support their (not your own) train of thought.

The method leads an intervision group to drastically improve the quality of their questions. As the case provider is in charge, they can enhance their own opportunity for successful intervision. It is up to the case provider to indicate if they think a question is helpful or not to their case. Unhelpful questions get no attention and indeed will not get answered. This is direct feedback on the participants' questions and their thinking.

Benefits. This method enables an insight into the diversity of questions and their effect on the case provider. There are many ways of asking questions. Experiencing variation in questions can be enriching and this is how you can enlarge your own repertoire of questions. Case providers learn that in day-to-day practice there is a natural tendency to answer any and all questions. Answering seems to be an automatic reaction. With helpful questions, they discover that it is better to think about whether the question is of any use to them and then give feedback to the person who asked the question.

- People learn from giving and receiving direct feedback to the questions asked. The participants can reword and ask their questions again, and experience what truly helps the case provider in this specific case.
- The method speeds up the intervision process. Since unhelpful questions are ignored, less time is spent answering irrelevant or ineffective questions.
- Helpful questions give insight into the impact of a question. Not only does the
 outcome benefit the case provider but participants also gain experience and practice
 with questions that really do contribute. The case provider helps participants learn
 whether questions are helpful by choosing which ones to answer. This is how
 participants obtain immediate feedback.
- The case provider accepts constructive questions quickly. Helpful questions are more effective and this increased speed and bigger impact make the intervision more effective.
- The method is also suitable for inexperienced groups and is a good exercise for an intervision group that wants to improve the quality of their questions.

DISADVANTAGES

- The method can bring the participants to a standstill at first. They will be pulled out of their comfort zone because some of their questions will not be helpful to the case provider and thus remain unanswered.
- The method can cause a group to grow silent if participants find it difficult to formulate helpful questions.

PITFALLS

- The case provider automatically answers questions that are not helpful.
- The facilitator should stay focused on the case provider who, after all, decides if a question is helpful or not.
- The case provider is not supposed to give socially desirable (or politically correct) answers but should express whether something is helpful or not.

- The method demands maintaining a constructive and open position with respect to the other person. We are inclined to think from our own point of view instead of from the case provider's.
- Sometimes someone cannot think of a helpful question and they may feel like a 'failure'. It is good to learn that the questions you ask can be helpful or not in a particular case.
- The participants should see this as an opportunity to learn; it should not become a competition on who asks the most or best questions.

CONDITIONS/LOGISTICS FOR USE			
Duration	1–1.5 hours		
Group size	Five to eight people		
Items required	None		

Possible questions

- What does this mean to you?
- What would it look like if ...?
- What are the alternatives to ...?
- What else could you do?
- What is in it for you?
- Can you tell me about a situation when things went differently for you?
- What did it do to you?
- What do you like about ...?
- What are your aims?
- What could happen if ...?
- What qualities did you have to contribute?

Preparation. The facilitator and case provider discuss the case, the case question and choice of method beforehand. The case provider prepares the case in a few sentences and ends with 'My question is ...' They send the case description and the chosen method to the participants and facilitator beforehand.

Step 1. Description of the case

The facilitator explains the method. The case provider should take the time to process every question and then indicate how it makes them feel/think and whether it is helpful or not to them. They should not answer unhelpful questions. The case provider explains their case in a few sentences, ending with the case question. It can be written on a flip chart.

Step 2. Formulating questions

The participants write down some questions they would like to ask that can help as a start. Once the questions are written down, each participant ranks the questions in the order they want to ask them.

Step 3. Asking questions

- One participant asks the first question. The case provider processes this question silently. Then they identify how they feel/think as a result of hearing this question and say whether it is helpful. Does the question encourage the case provider to think about their issue? They do not answer the question yet. Only when the case provider finds the question helpful do they give an actual answer. **Optional:** The participant explains why they asked this question. Subsequently, the group works out whether the effect of the question corresponds to the asker's intention.
- The next participant asks their first question and the same procedure is followed.
 When different participants have the same question(s), the facilitator may decide that this duplicate question will be asked as well. Sometimes minor differences can be helpful. If this is not the case, the next question in the order of ranking will be asked.
- The participants take turns asking questions. If necessary, they note down for themselves if a question was helpful or not and why. The facilitator regularly checks with the case provider to see if they need to adjust the issue of the case.

Step 4. (Optional) round of constructive chit-chat

If it becomes difficult to think of and ask helpful questions, the facilitator can decide to insert a round of constructive chit-chat. This can give the participants new insights that may give them ideas for new questions. What is important here is that the participants explore possible ways of finding helpful questions together. The next round can be directed at finding these ways. Contrary to ordinary chit-chat, where no questions are asked, you can choose to chit-chat by asking only helpful questions that are based on observations of hypotheses. The questions can broaden the view of the case provider.

Examples of questions

- How would you look at ...?
- What do you actually think about ...?
- What in this example makes you ...?
- What would your aims be ...?

The case provider indicates what affected them most and what they want to focus on in the next step.

Step 5. Second round of questions

This second round of questions is based on the case provider. The questions do not need to go in the order of participants. If someone is unable to think of a helpful question, they can just say what their intention is and ask the group to help them formulate the right question.

Step 6. The essence of the question

When all questions have been asked, each participant formulates the essence of the case in one constructive question. For example, if the participant thinks that the essence is the case provider's sense of responsibility in their job as an advisor, they might ask a question like 'How does being an advisor affect you?' or 'In your view, what makes a good advisor?'

If this is too difficult for the participants, the alternative is to formulate the constructive question as 'My issue is ...?' Answering this question allows every participant to put themselves in the shoes of the case provider.

Step 7. Case provider: insights and action plan

The case provider shares the insights they have gained, what they will change in their behaviour and the steps they will take to achieve this.

Step 8. Insights of participants

Each participant writes down their own insights. What did they learn from this case? It could be something to do with the preferred ways of thinking and asking questions, what made a question constructive or obstructive, what they learnt from other participants' questions, etc.

Step 9. Reflection on intervision

The facilitator reflects on the intervision sessions with the case provider and participants. This reflection is aimed at:

- the results of the case discussion;
- the case as a learning tool and the success of the applied method.

RULES AND GUIDELINES TO CONSIDER WITH ALL INTERVISION METHODS

Improving personal functioning through intervision requires openness and sincerity. Participants must be prepared to share their choices for a certain approach towards their work, personal issues and emotions in a group. Equivalence of participants is a prerequisite for a valuable intervision outcome. Reflecting openly on one's personal functioning also requires trust and confidentiality among the participants in intervision. It must be guaranteed that the information shared in intervision is treated as **confidential**.

IMPORTANCE OF TRANSPARENCY

Participants should know in advance what they can expect from intervision sessions. This is not only so they will be able to prepare themselves, but also to avoid confusion and

negative surprises. The following issues of an intervision session should be clarified and communicated in advance:

- the scope of intervision (personal functioning of staff and/or a case of an applicant),
- the maximum number of participants (e.g. in the case of a bigger team: not more than eight participants),
- the frequency of intervision sessions (e.g. once per month),
- the duration of the session (a maximum of 3 hours),
- the maximum number of cases to be discussed per session (e.g. two).

IMPORTANT BEHAVIOURAL RULES FOR PARTICIPANTS AND THE FACILITATOR INCLUDE THE FOLLOWING.

- Adopting a non-judgemental attitude. Judgemental or disapproving behaviour or statements from other participants will not result in positive changes and are to be avoided.
- No asking of 'why' questions where possible. The question 'why' often shows that you
 do not understand and therefore judge.
- Ask open questions for clarification and invite participants to state their arguments/ motives. For example, 'Can you tell me more about this?' Such questions will provide important information and contribute to a cooperative atmosphere.
- Do not patronise. Avoid offering advice or prescribing what to do or how to behave, including statements such as 'If I were you I would ...' Try to offer relevant information, tentative suggestions and discuss alternatives. Try to connect your input to the experience of the other person. One should be allowed to make one's own decision. This will be more appropriate and effective than copying someone else's view.
- Do not take over responsibility for your colleagues' problems. Try to motivate and support them in solving their own problems.
- Listen carefully. Do not talk too much and do not interpret, but make sure that you
 have understood correctly by summarising what you think someone has said and
 asking if this is what was intended.
- Stick, preferably, to the 'here and now'. What do people feel or think now, what do things/emotions mean to people now, what do they see as perspectives, etc. This generally gives more relevant information for changing behaviour than discussing what happened in the past.
- Pay attention to emotions. How and what do people feel, what is the impact of certain events on them, etc. This can give people insight into the reason for their behaviour.
- Show that you understand and care. Show interest by asking people how they are feeling and how things are going.
- Treat people with respect. Show appreciation for people's input, apologise in case of misunderstanding, etc.
- Do not play the therapist. Careful listening is important, but you should be careful not to pretend to be in the role of a therapist.

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Additional information and clarification on the various stages of team development and associated activities is provided below.

THE FIVE STAGES OF TEAM DEVELOPMENT

ADJOURNING / TRANSFORMING — Celebrate successes — Capture best practices and lessons learnt for future use — Capture best practices and lessons learnt for future use — Seek opportunities to attain closure — Say good bye and make arrangements to keep in touch
 PERFORMING - Function without oversight of a leader - Become independent - Become independent - Become independent - Make decisions and solve problems quickly and effectively - Work through issues and reach consensus without disrupting the project - Utilise team member's strengths - Concentrate more on task than the processes - Welcome differing opinions to inform creative decisions - Delegate and share leadership function - Monitor progress, celebrate milestones and build camaraderie
 NORMING Take responsibility for decision-making and problem-solving Define how team will progress Reach agreement on written and unwritten norms for working together Determine how information will be shared Agree on how conflicts will be resolved Decide what tools and processes will be used to get the job done Share data, explore solutions, and work towards a common goal Work collaboratively
 STORMING - Identify and address unproductive behaviors - Learn to listen and respect different ideas and perspectives - Embrace diversity of thinking and develop tolerance among team members - Allow trust and repect to emerge by working through difficulties - Workout interpersonal differences - Concentrate on problem- solving and goal clarifications
FORMING - Make introductions / share backgrounds - Create clear project goals and direction - Determine boundaries and acceptable behavior - Build relationships and approach the task - Assess each team member's knowledge, skills, and abilities - Concentrate more on team processes than on tasks - Work together to ensure that everyone is assigned roles/ responsibilities - Begin to establish team norms

Source: © Five stages of team development modelled on image from Mind Tools (mindtools.com).

Note. Inviting an external facilitator is not always necessary. The activities can also be led by the team manager or HR manager/specialist, for example. If a conflict of interest arises, however, an external facilitator who is neutral should be invited to avoid bias.

STAGE 1. FORMING

Introduction exercise: common and unique (⁸⁶)



20–30 minutes (maximum)

10–20 participants

Create groups of four or five people and let them discover what they have in common, along with interesting characteristics that are unique to people in the group.

GOAL

This exercise promotes unity, as it helps people to realise that they have more common ground with their peers than they first might realise. As people become aware of their own unique characteristics, they can also help others to feel empowered to offer the group something unique.

MATERIALS

Two sheets of paper and a pen for each group.

INSTRUCTIONS

Form groups of five to eight people and give them two sheets of paper and a pencil or pen. The first part of the activity is **commonalities**, where each subgroup compiles a list of the things they have in common. Listed items must apply to everyone in the subgroup. You want to avoid writing things that people can see (e.g. 'everyone has hair' or 'we are all wearing clothes'). Try to get them to dig deeper. After about 5 minutes, have a spokesperson from each subgroup read their list.

Then, depending on your goals for the session, you can have half of each subgroup rotate to another group for variety of characteristics or you can leave everyone in the same group. On the second sheet of paper, have them record uniquities, meaning that each item applies to only one person in the group. The group tries to find at least two uniquities for each person. After 5–7 minutes, you can have each person say one of their uniquities or have a person read them one by one, having others try to guess who it was. Again, you want to go beyond the superficial, avoiding those things that people can readily see.

Activity 1: setting goals (⁸⁷)

Team goals are statements that guide teams to meet their responsibilities and business needs. If goals are clear and doable, they serve not only as a team's blueprint for action, but also as its energy. Goals are important on many different levels.

- Goals set standards for improvement.
- Goals focus activity.
- Goals measure progress.
- Goals connect the team to the organisation.
- Goals motivate and energise.
- Goals are the basis for decision-making.
- Goals shape the 'truth' and purpose for a team.

The best goals are **SMART** goals. This means that they should be **s**pecific, **m**easurable, **a**chievable, **r**ealistic and **t**imely.

INSTRUCTIONS

Step 1. To motivate team members to begin thinking meaningfully about goal setting, have them answer two thought-provoking questions.

- Why does this team exist?
- What is the best-case scenario to describe what this team would accomplish our ideal future?

Step 2. Considering the reasons for the team's existence and the vision of its ideal future, individually **write out three things that you would personally like the team to accomplish** by the end of next year (adjust the time frame to fit your team's situation). In other words, what would you like to see as team goals?

Step 3. Have each individual share their desired team goals. List them on a whiteboard and then gather, group and prioritise them. Now, test your top goals against the SMART criteria. Are your goals specific, measurable, achievable, realistic and timely?

GOAL STATEMENTS	KEY PERSON	RESOURCES NEEDED	PEOPLE WHO CAN HELP	INDICATORS OF SUCCESS	TIMELINE
Goal 1					
Goal 2					
Goal 3					
etc.					

Step 4. Activate your selected goals by completing the goal chart below.

⁽⁸⁷⁾ Workshop Exercises, 'Focusing a team'.

Step 5. Follow-up discussion questions.

- What are some barriers that might make it difficult to reach each goal?
- How can those barriers be overcome?
- What are some things that you can do individually to help achieve the team goals?
- How should we recognise or celebrate when we reach a goal?
- How do we hold ourselves accountable for reaching each goal?
- How do we stay in touch with our goals? In other words, how do we keep the goals fresh in our minds so that we do not 'forget' them or not pay attention to them?
- How can we make reaching our goals more efficient? Enjoyable?

Capture the key items discussed under each question during step 5 on flip chart paper. This could happen by placing each question on one flip chart and having people walk and write their points directly onto the flip chart or, if the group is smaller, the facilitator will note down the comments from the group.

Clarifying team roles (88)



Team agreements about individual roles operate like contracts. They make things clear for team members and help focus energy. This is a two-part activity.

GOAL

Clarify team roles.

MATERIALS

Chart and pen for everyone.

INSTRUCTIONS

Part 1: job responsibilities

Each team member should think about their specific job and then **identify around seven key job responsibilities**. Place these responsibilities on the chart below and then complete the matrix as indicated.

YOUR JOB RESPONSIBILITIES	RANK IN TERMS OF IMPORTANCE TO YOUR JOB (1 = THE MOST IMPORTANT)	OVERALL, THE PERCENTAGE OF WORK TIME YOU ACTUALLY DEVOTE TO THIS RESPONSIBILITY	IDEALLY, THE PERCENTAGE OF TIME YOU FEEL YOU SHOULD BE DEVOTING TO THIS RESPONSIBILITY	A. DOES THE RESPONSIBILITY FIT YOUR SKILL SET? (1 = NO, 2 = SOMEWHAT, 3 = YES)	B. COMPARA- TIVELY, DO YOU LIKE HAVING THIS RESPONSIBILITY? (1 = NO, 2 = SOME- WHAT, 3 = YES)
1.					
2.					
3.					
4.					
5.					
6.					
7.					

Part 2: discussion

Share with the team your completed individual role chart and place this on a flip chart or similar for others to view. Then work to clarify and align team roles and responsibilities by discussing the questions listed below.

- Is there any responsibility that is skewing your ability to contribute to team tasks?
- As you review the role charts of other team members, do you see a responsibility that is 'short changed'? This means that a responsibility is given less appreciation than deserved.
- As you review the role charts of other team members, do you see a responsibility that is redundant or 'overloaded'?
- Are you doing something you do not feel comfortable with while someone else has indicated they like doing it better than you do?
- Are there places where responsibilities should be consolidated, exchanged or eliminated?
- Is there too much work being done that does not align or correlate with your identified team responsibilities?
- Are there areas of conflict?
- Are there ways to streamline effort?
- As you look at the information on all the charts, how would you restructure your job responsibilities in order to provide greater team support?

Notes are to be taken and visibly listed on flip chart paper. Taking notes can be rotated between volunteers in the group.

STAGE 2. STORMING

Giving and receiving feedback (89)



120–180 minutes

J 1−10 participants

GOAL

To allow participants to see **four distinct types of feedback applied** in the same situation. This activity should demonstrate that a lack of feedback or only positive feedback is not beneficial.

MATERIALS

One golf ball.

INSTRUCTIONS

Step 1. Ask for four volunteers from the group.

Step 2. Inform them that, one at a time, they will be called back into the room to search for a golf ball.

Step 3. Ask them to leave the room.

Step 4. Inform the remaining participants about their role in this activity.

- SILENT FEEDBACK. When volunteer number 1 enters the room, the participants are to remain completely silent and motionless.
- NEGATIVE FEEDBACK. When volunteer number 2 enters the room, all participants should give negative feedback, no matter how close or far away the searcher is from the ball.
- NOTE ON NEGATIVE FEEDBACK. Facilitator warning: this situation can become hurtful or awkward so know your group and step in if needed.

Be sensitive to the group dynamics but encourage participants to use this strategy in order to learn about feedback. Instruct them to give the kind of negative feedback, whether through words or body language, that they might hear in the workplace when someone is dissatisfied. Participants should **not** respond to any requests for direction or assistance (except with derision).

- POSITIVE FEEDBACK. When volunteer number 3 enters the room, all participants should give positive but non-specific feedback (e.g. 'way to go', 'I really like the

way you go for it') no matter how close or far away the searcher is from the ball. Participants should not respond to any requests for direction or assistance (except with further exclamations of 'you can do it' or 'we have faith in you').

 SPECIFIC FEEDBACK. When volunteer number 4 enters the room, participants should provide specific hints and suggestions for finding the ball, without giving its location away. They should respond to yes/no questions.

Step 5. Hide the golf ball. Invite the four volunteers in one at a time. Each volunteer receives the prescribed feedback noted above.

- Silent. For volunteer number 1, hide the golf ball in a not-too-difficult location within the room. Allow 2–3 minutes for the search.
- Negative. For volunteer number 2, choose a more difficult spot. Allow 2–3 minutes for the search.
- **Positive but general.** For volunteer number 3, choose an even more difficult spot. Allow 2–3 minutes for the search.
- **Specific.** For volunteer number 4, choose an even more difficult spot. Allow 2–3 minutes for the search.

Step 6. Bring the volunteers back, debrief and discuss the following questions.

- How did you feel while looking for the ball?
- What did you think/feel as a result of the feedback you received?
- How did the feedback you received affect your performance?
- How did the feedback you received affect how you felt about the individuals giving the feedback?
- If this was the type of feedback you received every day, how would you feel?
- Work on workplace experiences what type of feedback have you experienced at work?

Conflict activity – four words (⁹⁰)

Note. This activity should be led by a neutral person who is not part of the team and/or the conflict.





GOAL

To get team members to work through conflicts, differing opinions and how different team members handle conflict.

96

MATERIALS

One sheet of paper and a pen for everyone.

INSTRUCTIONS

Step 1. Ask each team member to write down four words that they associate with the word 'conflict'.

Step 2. Ask them to pair up and as a pair they must decide on the best four words out of the eight they have written down between them. The pair will have four words at the end.

Step 3. Each pair will join another pair and the process continues. Repeat this until you have half of the team negotiating with the other half of the team to produce, between them, the four best words that they associate with the word 'conflict'.

Step 4. Debrief. Ask the group the following questions.

- How did you feel during the exercise?
- Did anyone feel uncomfortable? Why?
- Did anyone take control and take over?
- Was there any conflict?
- Would you do anything differently?
- What techniques did you use to come up with the four words?
- What did you learn during this exercise?

STAGE 3. NORMING

Marshmallow spaghetti tower (91)



GOAL

To get team members to work collaboratively and gain insight in their own team role.

MATERIALS

A marshmallow challenge kit for each team, with each kit containing the following items.

- 20 sticks of spaghetti. Ensure that you use uncooked spaghetti.

⁽⁹¹⁾ Wicked Problem Solving, 'Running a marshmallow challenge is easy!'; Ruth, A., 'Five team-building exercises that increase collaboration', Forbes, 2016.

- A metre of masking tape. Get standard masking tape. Put the tape on the side of the table, the back of a chair or a nearby wall. Rolling it in the bag tangles the tape.
- A metre of string. Include string that can easily be broken by hand. If the string is thick, include scissors in your kit.
- One marshmallow. Use a named brand or generic brand of marshmallows that are roughly the 'standard' size, which is about 1.5 inches wide and thick. Avoid mini or jumbo marshmallows, and preferably choose soft marshmallows that are not stale.
- Paper lunch bags. Standard-size lunch bags work well, as do letter-size Manila envelopes.

The items should be placed in the paper lunch bag, which simplifies distribution and hides the contents, maximising the element of surprise.

ENSURE THAT YOU HAVE THE FOLLOWING TOOLS TO RUN THE CHALLENGE.

- Measuring tape. Have a retractable measuring tape available after the challenge is finished so you can measure the height of the structures.
- Count-down app or stopwatch. The actual marshmallow challenge takes 18 minutes.
 20 minutes is too long and 15 minutes is too short. You can use a stopwatch, but it is better to use a video projector and display the countdown time.
- A sound system for music during the challenge. Use a playlist with exactly 18 minutes of music. The challenge should end at the conclusion of the last song.

INSTRUCTIONS

Step 1. Deliver clear instructions.

- Build the tallest freestanding structure. The winning team is the one that has the tallest structure, measured from the tabletop surface to the top of the marshmallow. That means the structure cannot be suspended from a higher structure, such as a chair or ceiling.
- The entire marshmallow must be on the top of the structure. Cutting or eating part of the marshmallow disqualifies the team.
- Use as much or as little of the kit as desired. The team can use as many or as few of the 20 spaghetti sticks, and as much or as little of the string or tape as desired. The team cannot use the paper bag as part of their structure.
- Break up the spaghetti, string or tape. Teams are free to break the spaghetti and cut up the tape and string to create new structures.
- The challenge lasts 18 minutes. Teams cannot hold on to the structure when the time runs out. Those touching or supporting the structure at the end of the exercise will be disqualified.
- Ensure everyone understands the rules. Do not worry about repeating the rules too many times. Repeat them at least three times. Ask if anyone has any questions before starting.

Step 2. Start the challenge.

Start the countdown clock and the music to signify the start of the challenge.

- Walk around the room. It is amazing to see the development of the structures as well as notice the patterns of innovation most teams follow.
- Remind the teams of the time. Count down the time, for example at 12 minutes,
 9 minutes (halfway through), 7 minutes, 5 minutes, 3 minutes, 2 minutes, 1 minute and 30 seconds, and a 10-second countdown.
- Call out how the teams are doing. Let the entire group know how teams are progressing. Call out each time a team builds a standing structure. Build a friendly rivalry. Encourage people to look around. Do not be afraid to raise the energy and the stakes.
- Remind the teams that those holding up the structure will be disqualified. Several teams will have the powerful desire to hold on to their structure at the end, usually because the marshmallow, which they just placed onto their structure moments before, is causing the structure to buckle. The winning structure needs to be stable.

Step 3. Finish the challenge.

After the time runs out, ask everyone in the room to sit down so everyone can see the structures. It is likely that just over half the teams will have standing structures.

- Measure the structures. From the shortest standing structure to the tallest, measure and call out the heights. If you are documenting the challenge, have someone record the heights.
- Identify the winning team. Ensure they get a standing ovation and a prize (if one has been offered).

Step 4. Evaluation.

Discuss the exercise and strategy and ask follow-up questions, such as the following.

- Who was the leader?
- Could you have accomplished the task without a leader?
- Were team members helpful?
- Were everyone's ideas well received?
- How did the time limit impact the team?
- What could you have done differently?
- Did your team celebrate small wins?

STAGE 4. PERFORMING

Successful brainstorming session (92)



GOAL

Generate many creative ideas to achieve a specific goal.

INSTRUCTIONS

Step 1. Pick the right venue.

Whether alone or in a group, conducting a brainstorming session at the person's usual desk / teams' usual office is not the best idea. Have the brainstorming session take place in a different room, where new patterns of thought are more likely to emerge.

Step 2. Create the right environment.

Try to create an informal environment for the team. Consider bringing in snacks and turning on some music. Make sure that the room is well lit. Include all the resources or tools you need at hand. Remember refreshments to avoid people getting distracted by going to the kitchen.

Step 3. Think about brainstorming strategies.

You can create the perfect environment, but sometimes you need a bit of structure to prompt some new thoughts. For example, try and think about the opposite of what you are trying to achieve. Or imagine there are no constraints in terms of budget or resources. Or come up with as many questions about your topic as you can and then set about answering them (mind mapping).

Step 4. Prepare your group.

Prepare the information for your team. Include just enough information to inspire them, but not too much. If you pick team members who are like-minded, you are not going to get many creative ideas. Aim at building a diverse group of people from various departments or disciplines. A diverse group is bound to have various thinking styles.

(92) Leadership Girl, 'No ideas? 11 steps to organizing a successful brainstorming session', 2017.

Step 5. Establish ground rules.

For the discussion to proceed smoothly, you should establish some ground rules at the beginning and stick to them throughout your brainstorming session. Remind your team that the session is not about competing for ideas, but about coming up with a solution to a problem. Let them know whether they should raise their hand before they speak or interrupt someone to ensure smooth communication.

Step 6. Guide the discussion.

When all the team members have shared their ideas, start a group discussion. This is how you allow your team to develop the ideas of other people and come up with new solutions. Encourage everyone to contribute to the discussion. Make sure to discourage any forms of criticism – the idea behind brainstorming is to boost creativity, and criticism does not help to do that. Remember that your role is to support the team, so do not share your ideas all the time. Guide the discussion by sticking to one idea at a time and refocusing your team when they become side tracked. Arrange breaks to help your team concentrate as well.

Step 7. Give time.

Although having an open-ended brainstorming session can be counterproductive, avoid putting yourself under too much time pressure when it comes to creative thinking. Not only do you want to remove the stress a time constraint can create, but you also want to allow time for the brain to wander.

Step 8. Collect the ideas before your session. Plan how you intend to collect the ideas you come up with.

Step 9. Plan the follow-up.

A brainstorming session is useful only if there is a way of putting the ideas into action. Decide on the objectives before the start, and ensure they are completed before the session is finished. Make sure you communicate how to proceed. This could be further research into a selection of your ideas, implementation of one of them or plans for further brainstorming.

STAGE 5: ADJOURNING/TRANSFORMING

Potluck party



GOAL

Celebrate team successes.

MATERIALS

Potluck sign-up sheet.

Thank you cards or a gift for each team member.

INSTRUCTIONS

Step 1. Schedule a date and a time for the potluck.

Step 2. Send an invitation together with the sign-up sheet.

Make use of the following instructions.

- Bring food that travels easily.
- Plan on smaller portions.
- Pack food in ready-to-serve containers.
- Bring the utensils.
- Bring a ready-to-serve dish if you can.
- Be aware of dietary restrictions.
- Make sure to label your food.

Step 4. Make an inventory of people who are able and willing to help with the preparations.

Step 5. Enjoy the potluck.

Step 6. Take a moment to thank your team by using the AIR (action, impact and reward) acronym.

Action

Start by outlining the team's action. It could be something finite and specific, such as getting a report done, or it could be an ongoing behaviour that makes a difference in the long run. Give details to really show their work has been noticed.

Impact

Next, describe the impact of the action. This makes the team feel empowered and deserving.

Reward

Finally, end on a reward note. This can be a card with a personal note for each team member or you could give other gestures of thanks.

EXAMPLE OF A POTLUCK SIGN-UP SHEET

POTL	POTLUCK SIGN-UP SHEET			
#	Name	Dish/item	Notes	
		Appetisers/sides (e.g. finger food, dips, wings, roll- ups)		
		Entrees (e.g. salads, one-pan meals)		
		Beverages/ice (e.g. hot/cold non-alcoholic drinks)		
		Desserts (e.g. local specialities)		
		Other items (e.g. plates, cups, utensils, decorations, tablecloths, napkins)		

Examples of what to say as 'thank you' messages for your team (93)

- 'Congratulations to you for all the hard work and positive thinking. You took the meaning of teamwork to a whole new level. Thank you all!'
- 'Thank you for handling the clients on behalf of the team! I knew I wasn't wrong putting all my trust in you! It feels good to have you as part of my team!'
- 'My words can never be enough to praise your actions because your work always meets my expectations. Thank you to all my team members.'
- 'We are the best at what we do because we have the best employees. Thank you for your dedication and hard work.'
- 'You deserve all the appreciation in the world for a job well done. Congratulations on your fantastic achievement. We are proud of you.'

ANNEX 8. CRITICAL INCIDENT CHECKLIST

Quality benchmarks. Authorities, particularly managers and team leaders, can use the proposed quality benchmarks to see how well their programmes are able to respond to critical incidents whenever they might occur. Having this mechanism, as detailed below, in place will allow for an informed and timely follow-up when an incident occurs.

1. PREPARATORY ACTIVITIES				
Action	Explanation	Status (tick)		
Authorities define the role of internal and external support services in case of a critical incident, the scope of situations where internal/external support can (and cannot) apply and inform all relevant stakeholders (managers, staff)	This action will cover the kind/purpose/role of internal/ external support and staff categories (⁹⁴)	Not started In progress Completed		
Authorities decide if the internal support person(s) also has an advisory role (advisor)	Internal support can give recommendations to line management regarding the management of critical incidents and how to avoid further incidents (support in assessments, monitoring, evaluating situations)	Not started In progress Completed		
Authority defines if the internal support is a task done by one staff member or if the internal support is distributed among a pool of several colleagues	This action depends on the size of the team and other factors in the organisation. If there is a team of several colleagues, there should be a coordinator to organise who is in charge of which affected person	Not started In progress Completed		
Advantages of internal support compared with external support are explored and evaluated	For many critical incidents, internal support, when timely, may be enough and external referrals may not be needed. This also depends to an extent on the type of incident. If medical follow-up is needed, a referral always needs to take place. Staff can immediately respond and do not need much explanation on the surrounding factors, which are not always clear and easy to explain to external professionals. Internal support can respond following the principles of first-line help	Not started In progress Completed		
2. INFORMATION				
Action	Explanation	Status (tick)		
Protocols (e.g. SOPs) are established and communicated to the relevant staff to manage critical incidents	SOPs should be available to both senior management and employees. Steps to be taken in case of critical incidents should be clearly formulated. The responsibilities of each supporting entity (line manager, safety/security, HR department and affected employee) should be clearly laid out to ensure accountability. The SOPs should include a straightforward reporting mechanism and also provide information on how to adapt the process to local procedures in case of deployment. Relevant, already established procedures should be considered and, where possible, coordinated with one another	Not started In progress Completed		

⁽⁹⁴⁾ Acknowledge the emotional impact of incidents and offer first-line psychosocial aid. Listen, recognise their feelings and give psychosocial information (normal reactions to an abnormal event). This offer of support is systematic/organised. Follow up with the affected person to evaluate and discuss changes in signs of stress in the days and weeks after a critical incident. Offer to refer them to external/professional support if necessary and recognise the limits of the first-line psychosocial aid that can be provided internally. Scope: determine to which situations and which persons concerned (including volunteers, subcontractors, trainees) the internal/external support applies, and to which situations it does not apply.

person

additional support

coordination/referral system in place (including contact number) to provide

a comprehensive response to the affected

The affected employee should be given

a choice where possible on who provides

All personnel are informed of the protocols in place (critical incidents and other security and safety measures)	The support mechanisms in place and SOPs should be applicable to all persons in need. In situations where authorities work with external experts and/or seconded staff, staff should be made aware of the joint aspects in terms of protocol and understand the differences in such protocols	Not started In progress Completed
Regular information and updates on the support services available (critical and other safety/security incidents) are provided	Authorities are encouraged to provide updates on support mechanisms in place: — by email communication — in information sessions — during personal meetings — through other relevant channels at least once a year	Not started In progress Completed
Senior management/managers are enabled to use the protocols put in place, including knowledge on procedures around COVID-19 and for evacuations	Checklists on management of critical incidents, evacuation plans, etc., should be jointly developed where possible by safety and security experts assigned to field operations to ensure practicality and integration of local specificities	Not started In progress Completed
3. COORDINATION		
Action	Explanation	Status (tick)
Authority defines who is in charge of the practical help and coordination with other persons charged with the follow-up of an incident	The practical help and coordination aspect and the psychosocial help can be done by the same person or by different persons (95)	Not started In progress Completed
The authorities select a relevant focal person(s) (⁹⁶) to follow up on the staff member who experienced a critical incident	The line manager, if not the person in charge, should select a relevant staff member to follow up on the affected employee. After a critical incident, a staff member is at risk of retraumatisation by being approached by various colleagues from various departments (health staff, HR staff, line managers, security officers, etc.) to share details of the incident for processing purposes A coordinated response through one person or a maximum of two selected persons, taking gender and expertise into consideration, is therefore recommended	Not started In progress Completed
The selected response person has knowledge of the relevant protocol(s) regarding critical incidents and liaises with other relevant staff members to ensure timely medical/ psychological support (or other support)	The focal person will support the affected staff member with filling out necessary information, referrals to psychological/ medical support or police, and may be required to contact the emergency contact provided by the employee	Not started In progress Completed
Relevant stakeholders (medical services, staff welfare and security) have an established	Clear coordination reduces the risk of delays or overlaps in service provision and retraumatisation	Not started In progress

This option is particularly relevant where the critical incident

concerns sexual violence and the focal person in charge is of

the gender of the perpetrator and/or the staff welfare focal

person has committed the violation

Completed

Not started

In progress

Completed

⁽⁹⁵⁾ Practical help covers numerous aspects. These include helping with the preparation of the narrative of events; giving a coordinated response to various services; filling out forms with the necessary information; referrals to psychological/medical support / police; and organising contacting the emergency contact. The manager might be in charge for some of these aspects. The workflow and responsibilities should be clearly defined and coordinated.

⁽⁹⁶⁾ This can be internal support provided by an individual (e.g. staff counsellor) or by an established team. Refer to Section 3.3.2. 'Collegial support after a critical incident' and 3.3.3. (Integrated incident team'. Refer to Annex 9. (Internal support provision regarding critical incidents' for examples of a stress team and collegial support initiatives. External support might be an additional option.

4. DOCUMENTATION		
Action	Explanation	Status (tick)
A standardised reporting format for critical incidents is available and part of the SOPs	The form attached to the SOPs to support documentation should be consistent throughout countries of operations to enable senior management to identify trends and provide consistent but also tailored support to first-line officers	Not started In progress Completed
A critical information report is produced and shared with relevant actors including the police where applicable (taking into account confidentiality of the victim)	The affected employee needs to be helped to prepare a narrative of events by support staff (e.g. counsellor/ psychologist/doctor), to be shared with management for further processing	Not started In progress Completed
Depending on the circumstances, additional information on the critical incident is collected – for example, if more people are involved in such an incident (another colleague / an applicant) and attached to the incident report for further processing	In cases where a second and/or third person is involved. For example, where an applicant is threating to harm others or attempting suicide. After being medically/physically cared for and assessed where needed, the applicant should be given an opportunity, once stable, to share their view on the incident	Not started In progress Completed
5. DIRECT SUPPORT		
Action	Explanation	Status (tick)
Authorities / other relevant offices ensure availability of post-exposure prophylaxis kits in their field offices and have a relevant referral contact available for cases of sexual violence to be accessed	Post-exposure prophylaxis kits are to be available within office premises where no medical facilities that can provide such a service are in close proximity (e.g. in the Greek islands)	Not started In progress Completed
In the event of sexual violence (e.g. rape) against a member of staff, an immediate referral of the affected person to medical services is to be organised for a post-exposure prophylaxis kit to be administered	The post-exposure prophylaxis kit is to be administered within 72 hours of the incident. Other relevant medication (e.g. emergency contraceptive pill) is to be made available	Not started In progress Completed
Immediate psychological support is offered to the affected person	 This support is available not only to survivors of sexual violence; it covers all critical incidents experienced by first-line officers These psychological services are provided locally where possible and take place in person or through online sessions. Having a pool of professionals (in the form of a contact list) for affected staff to choose from is advised. When a list of professionals is compiled, attention should be paid to: the availability of various EU languages services provided by professionals experienced in critical incident support a range of genders/ages among service providers diversity of cultural/religious backgrounds among service providers There is a memorandum of understanding with the professionals listed that services will not have to be paid for by the affected individual but by their health insurance / authority / other (⁹⁷) 	Not started In progress Completed

⁽⁹⁷⁾ Internal support includes several aspects. It is not always necessary to refer affected staff members to an external professional if internal support is available (e.g. stress team providing collegial support, incident team, focal person, peer support, psychologist). It is necessary, however, if the person cannot cope with the impact of the incident. Sometimes, affected staff feel safer with a colleague initially since they know the circumstances and work environment and not much explanation will be needed. External support is offered by a professional (psychologist, psychotherapist). It can also be proposed if the affected person prefers not to have the support given by a colleague. It is important to refer to a professional if the affected person still presents signs of psychological impact several weeks (4 weeks is recommended) after the incident, which could indicate post-traumatic stress disorder. This can be assessed by a medical professional / psychologist or by a member of internal support.

Immediate medical support is offered to the	This support is available not only to survivors of sexual	Not started
affected employee	violence; it covers all critical incidents experienced by first- line officers. There is a memorandum of understanding with	In progress
	the professionals listed stating that services are to be paid for not by the affected individual but by their health insurance / authority / other	Completed
The affected individual is made aware of	Confidentiality of information shared by the affected	Not started
their rights, particularly when it comes to the sharing of sensitive information	employee is important to consider. Some may not want colleagues to be aware of what they have experienced or	In progress
5	what services they receive	Completed
Long-term psychological counselling support	Depending on the incident, longer-term follow-up may be	Not started
for affected staff and compassionate leave are options available where applicable and	advisable to ensure that the employee is coping with a critical incident in a healthy manner	In progress
deemed necessary by professionals	,	Completed
Resuming duties after a critical incident may,	Sometimes it may be the case that affected individuals do	Not started
in some cases, be recommended only when a statement by a professional (medical/	not see the importance of a longer-term break or change in location as a result of trauma after a critical incident. Having	In progress
psychologist) is available	a specialist involved who supports the decision-making process as to whether the staff member is fit to resume their duties may therefore be advisable. The participation of the affected person in the decision-making process is good practice to ensure transparency and to demonstrate the importance given to the best interests of the affected person	Completed
f an additional person is affected during	Depending on the outcome of an assessment, further follow-	Not started
a critical incident (e.g. a witness to the incident or an applicant who is at the centre of the incident, for example who has made a suicide attempt), the focal person in charge ensures that medical and/or psychological care is provided (to staff members and applicants)	up action may be required in relation to medical/psychological assessments, change in location/accommodation, etc.	In progress Completed
Collegial/peer support sessions / educational	During these quarterly sessions, managers are given	Not started
supervision focusing on managers are provided	a platform to discuss their response to critical incidents or the management of them under their responsibility, learn from	In progress
	each other in the form of an exchange of challenges and share good practices	Completed
6. CAPACITY BUILDING	0	
Action	Explanation	Status (tick)
Authorities/EASO provide basic training on	These training sessions can be conducted in coordination	Not started
SOPs and reporting mechanisms in place to all	with:	In progress
managers/coordinators and first-line officers as well as deployed/seconded staff	— the HR department	Completed
אינוו מז מבאוסאבמלאבנטוומבת Stall	 staff counsellors or similar safety and security officers where applicable 	completed
Training to managers and other relevant staff	 — safety and security officers where applicable All line managers are given the opportunity to be sensitised to 	Not started
Training to managers and other relevant staff in basic trauma management is provided	 safety and security officers where applicable All line managers are given the opportunity to be sensitised to the impact of trauma on staff. This is important for enabling 	
Training to managers and other relevant staff n basic trauma management is provided	 — safety and security officers where applicable All line managers are given the opportunity to be sensitised to 	Not started
Training to managers and other relevant staff n basic trauma management is provided regularly Authorities provide a training course for the	 — safety and security officers where applicable All line managers are given the opportunity to be sensitised to the impact of trauma on staff. This is important for enabling a relevant, timely and empathic response Recommended length: 3 days 	Not started In progress
Training to managers and other relevant staff n basic trauma management is provided regularly Authorities provide a training course for the	 — safety and security officers where applicable All line managers are given the opportunity to be sensitised to the impact of trauma on staff. This is important for enabling a relevant, timely and empathic response Recommended length: 3 days Option. Additional, periodic (internal) refresher courses to 	Not started In progress Completed
Training to managers and other relevant staff in basic trauma management is provided regularly Authorities provide a training course for the staff charged with internal support (⁹⁸)	 — safety and security officers where applicable All line managers are given the opportunity to be sensitised to the impact of trauma on staff. This is important for enabling a relevant, timely and empathic response Recommended length: 3 days 	Not started In progress Completed Not started

⁽⁹⁸⁾ See Chapter 6 'Capacity-building interventions'. The recommended length of training is 3 days, and training should cover components of psychological first aid. In addition, periodical (internal) refresher courses to maintain knowledge and skills should take place. The trainer should have expertise in peer-to-peer/internal support and the effects of critical incidents.

Where possible and depending on the location of deployment, simulation exercises are provided by security experts / staff counsellors	Staff to be deployed feel better prepared to act in a situation of real threat when having had the chance to experience practical exercises related to safety and security concerns (e.g. what to do when an applicant threatens an officer and what to do when a colleague shares that they have been raped)	Not started In progress Completed
Authorities are to provide regular coaching sessions for managers to improve their leadership and communications skills with their teams (including teams in the field)	There is sometimes a lack of clear, regular and meaningful communication between managers and first-line officers / deployed experts. Therefore, understanding by and reminders to managers of the needs of first-line officers (case officers, reception officers, etc.), particularly those in hotspot settings, is important for good-quality leadership Regular and respectful communication (through check-in meetings, individually and in teams) between line managers and their staff members is crucial to create a fruitful working atmosphere	Not started In progress Completed

IN SUMMARY: RESPONSE FLOW

Action to be taken by a manager and/or an external/internal support person.

A. Immediate response

- Arrive on the site of the incident as soon as possible if not already there.
- Assess the situation and additional risks.
- De-escalate the situation (potentially with support from security/police depending on the incident).
- Propose to the person concerned that they go home if they want, if the emotional impact is high, but ensure that the person will not be alone at home and does not go home alone.
- If requested, give the person the opportunity to talk if they want to in the moment.
- Ask the person how they feel and if they have any immediate needs.
- Assess if the person understands your questions.
- If others have been affected, find someone to support them and provide structured information to the other affected persons during a debriefing shortly after the incident to ensure transparency.
- Let the person concerned notify their family if possible and if they want to, or provide the emergency contact details to the focal person if the person concerned would rather not do it themselves.
- In case of injury and immediate need for medical/psychological support, provide quick administrative assistance (filling out insurance forms, referral for physical care, etc.) and comfort the person, letting them know that other aspects can be dealt with at a later stage.
- Ensure that the person is relocated, for example if they want to be at home after an accident.

B. Follow-up action

- Evaluate the impact of the incident after several days.
- Take the time to talk about it with the persons concerned and with the team.
- Take the time to evaluate how the incident was dealt with by the responsible person and draw on the lessons learnt (operational debriefing with the persons concerned if possible) to improve the system in place.
- Pay attention to unusual reactions by the affected person and propose professional help if necessary.
- Continue to give information related to the incident and related developments/ consequences to team members.

ANNEX 9. INTERNAL SUPPORT PROVISION REGARDING CRITICAL INCIDENTS

A. THE CASE OF BELGIUM

The below is adapted from information shared by the Federal Agency for the Reception of Asylum Seekers (Fedasil) and can be considered good practice. This section describes the organisation of support provided by Fedasil's stress team and other bodies, and clarifies the respective responsibilities in the follow-up of an incident through collegial support.

STRESS TEAM

After a serious incident, each reception centre and other workplaces are expected to offer staff support.

This can be done in two ways:

- individual interviews with colleagues trained in this role (i.e. the stress teams),
- group debriefing with Red Cross.

In both cases, there is the possibility of referring the person for external professional help.

Vision of the stress team

The staff of the centres are regularly confronted with incidents related to residents. These can have a psychological impact. The person affected by such incidents can present symptoms of stress at emotional and physiological levels. These consequences are normal. Knowing and accepting that can promote recovery. Fedasil suggests that the support of those around an affected staff member can help the person cope with the event. This is why stress teams have been introduced. Fedasil also recognises the importance of referring some staff members to specialist support where deemed to be in their best interests.

In the Fedasil model, stress team members have the role of front-line support in reception. Stress teams were put in place in 2008 to provide collegial support to personnel affected by a critical incident. The aim is, first, to reduce the initial stress caused by incidents and, second, to encourage normal coping mechanisms. Stress team members are volunteer staff members who are selected and who have acquired additional expertise through specific training. This training is given by external trainers specialised in the field of collegial support. They also lead educational supervision sessions between the stress team members three times a year.

The list below provides additional information about the Fedasil approach relating to stress teams and collegial support.

- Incident during the night (8 p.m. to 8 a.m.). In theory, there is no intervention unless a stress team member is on site and not involved in the incident. Management staff are informed and come to the site or make contact by telephone. Management staff inform the stress team the next morning.
- Incident in the evening or on weekends. Intervention of the stress team depends on the availability of members. If unavailable for an interview, if possible, a call is made for first contact and to make an appointment during the week.
- Stress team member is on leave or ill. No intervention; another stress team member will be assigned to follow up. If a follow-up is in progress, it is important to have contact between stress team members to pass the baton.
- Stress team in recovery (permanent, educator). Possible intervention.
- Direct call by affected colleagues. An intervention is to take place during daytime unless explicitly agreed between the stress team member and the colleague.
- Absence of the affected colleague. It is imperative that support is offered, whatever the reason for the absence (leave, sickness, recovery). The intervention is done either by telephone or by going to their house with their consent. If the affected colleague returns to the reception facility, they will have a stress team interview.

THE 11 STEPS TO SET UP COLLEGIAL SUPPORT IN A CRITICAL INCIDENT

Step 1. To set up collegial support, a group of experts within the authority is selected (as volunteers) from different but relevant services/departments to implement the collegial support scheme. In the next step, the interventions of this group are defined and briefly described in a document. The topics covered by this group can be broader, including registration of critical incidents, how to manage crises triggered by incidents, training sessions to cope with aggressive behaviour and code of conduct during such incidents.

The working group will need to agree on the following.

- Where to operate (assigned to work in one or more locations).
- Whether it will provide support to direct colleagues or people under line managers (to ensure a neutral approach as much as possible).
- Number of persons available for this support (five persons is recommended).
- Easily accessible team support. The telephone numbers of the members should be known to the staff. Clear agreements must be made within the team, under the responsibility of the team coordinator (if applicable).
- Timing. Members will have to do their best to initiate the support as soon as possible and within 24 hours of an incident. This cannot be guaranteed, and initial quick contact can be made to arrange a later meeting.
- Involvement of team members. When a member of the collegial support team is themselves involved in a critical incident, they are not considered 'active' to provide support.

- Compensation. The interventions are considered work time and are compensated if necessary (overtime).
- Expenses. Expenses incurred (travel and telephone calls) are reimbursed in accordance with existing agreements.

Step 2. It is clear to all colleagues what the scope of collegial support is (a critical incident) and what it is not (e.g. exploring the private problems of a staff member).

Step 3. Agreement on who can take advantage of collegial support (all employees, volunteers, subcontractors, trainees, etc.).

Step 4. Agreement on when collegial support takes place (not later than a maximum of 48 hours after the incident occurred).

Step 5. The focal person must communicate the event to management.

Step 6. They give concrete and direct care. They go on site or call the staff concerned; gather information on the incident and the condition of the people affected; ask about their needs and find out how they can be met; communicate relevant information concerning the incident to the victim; and suggest follow-up actions.

Step 7. Give advice about coping with critical incidents and potentially traumatic events and help the person to find personal resources to cope with the event.

Step 8. Give attention to the potential broader consequences of the incident (e.g. absence of the affected staff member and impact on their work, impact on the team (and potentially residents involved)).

Step 9. Refer for professional help if needed and recognise the limits of the first-line support.

Step 10. Support can be activated by the collegial support team, the affected person or other staff members.

Step 11. Support is provided a minimum of three times. The first is a conversation within 48 hours, the second is a conversation within 2 weeks and the third is a conversation within 4–6 weeks. This timeline is flexible depending on emotional reactions.

Confidentially considerations

At most, management is informed that an intervention is in progress. The exception is if a criminal offence has been reported, in which case one of the members of the collegial support team will pass on a summary of important information to the manager.

Individual support / collective support

Support can be proposed on a group level for several colleagues who were involved in a critical incident. This concerns an emotional and collective debriefing to be run by external persons trained for this sort of meeting.

ANNEXES

Recruiting new members

The role is open to staff of all functions and qualifications, except the function of coordination or management (e.g. of a reception facility). Experience in the field of asylum and particularly with applicants for international protection is recommended.

Profile

A young, new employee who is not yet familiar with the tricks of the trade will have great difficulty gaining the confidence of colleagues. Social skills such as listening with empathy and compassion, tact, attention to the signs of stress and being authentic are important. Other important criteria include being proactive in proposing emotional support to emotionally affected colleagues, being able to rephrase their words clearly, being able to give advice and being able to handle confidential information discreetly. Loyalty and a collaborative spirit when working with other stress team members and management are also important, as are being accepted and considered trustworthy by other colleagues. If a member needs to cope with their own personal difficulties, resulting in acute or chronic stress, it is advised that they speak about this with the director and/or coordinator of the collegial support, and to temporarily retire from this role (⁹⁹).

STRESS TEAM CODE OF ETHICS

The sample below is adjusted from the stress team code of ethics used by Fedasil. The points indicated below are to be signed by the relevant staff for accountability purposes.

For my activities carried out on a voluntary basis as a stress team employee, I declare that I agree with the following.

- I respect the confidentiality of information entrusted to me as part of my assignment.
 I offer my support in a discreet, courteous and sensitive manner.
- I always stick strictly to the mission entrusted to me.
- If someone asks me for information or informs me of a problem that is not directly related to my mission and capacity, I will refer the case to a competent person.
- For any contacts with the media, I refer to the responsible person within my authority (e.g. centre management, communication department at head office).
- I always take a neutral point of view, do not discriminate and do not judge.
- I will use a gender-sensitive approach, use appropriate language and safeguard colleagues I am asked to support.

Date/signature:_____

⁽⁹⁹⁾ The selection has three steps. (1) For a new centre, information is provided to staff about the process and the role, preferably during a meeting. (2) Publicly sharing information about the search for candidates and the director/coordinator can encourage potential colleagues who have the skills for this role. (3) An interview is held to evaluate the basic skills and motivation, conducted by the director of the centre and the coordinator of the collegial support.

B. THE CASE OF THE NETHERLANDS

SETTING UP AN INTEGRATED INCIDENT TEAM IN RESPONSE TO CRITICAL INCIDENTS

The below is the process that was followed (and original text shared) by the COA when setting up its organisation-wide incident team (*ketenbreed calamiteitenteam* (KCT)).

Integrated incident team process protocol (KCT) – revised version dated 16 January 2018.

Introduction. In the immigration chain, there has been attention for some time on incidents, such as those as a result of psychological problems, serious disturbances of public order and peace and security, hunger and thirst strikes, suicide, suicide attempts and threat of suicide by foreign nationals.

On 22 October 2012, the memorandum regarding the establishment of a KCT was approved. It was agreed that the chain partners, namely the Central Agency for the Reception of Asylum Seekers (COA), the Immigration and Naturalisation Service (Immigratie- en Naturalisatiedienst (IND)), the Repatriation and Departure Service (Dienst Terugkeer en Vertrek (DT & V)) and the Custodial Institutions Agency (Dienst Justitiële Inrichtingen (DJI)), should inform the KCT directly about incidents, irrespective of the intensity level, so that no action is hindered by a lack of proper information transfer.

This protocol contains chain-wide agreements on how the partners in the immigration chain inform each other about incidents and, where necessary, cooperate with each other.

Immigration chain. The small immigration chain consists of the IND, COA and DT & V. Each organisation has its own responsibilities and powers in the implementation of the policy for foreign nationals under the responsibility of the Secretary of State for Justice and Security. Each organisation fulfils its role independently but in consultation with and relying on the chain partners. The DJI fulfils a special role in the whole process. The KCT cooperates with the DJI if a foreign national stays in a detention centre or is admitted to the Judicial Centre for Somatic Care (Justitieel Centrum voor Somatische Zorg (JCvSZ)) in Scheveningen.

The KCT is accountable to the client, the Directorate General for Foreign Affairs, through the chairman of the Sub-Council on Asylum.

COORDINATION OF INCIDENTS WITHIN THE CHAIN

The concept of incidents

Every organisation within the immigration chain may have to deal with incidents. The term 'incident' is taken to mean any situation in which an act of a foreign national, or the threat thereof, creates or may create a danger to themselves and/or others.

Given the many forms this could take, it is not possible to define what exactly should be regarded as an incident in this context. The implementation of the policy for foreign nationals, an integral part of which is the rejection of applications for international protection and forced return, can provoke a negative reaction from a foreign national.

Given the importance of efficient information transfer and uniform application of the protocol, it has been agreed that the KCT will be informed if an employee of the IND, COA or DT & V considers it appropriate. Making a report is a responsibility, but is also at the discretion of the professional employee. An exception to this rule has been made for the incidents taking place in a DJI location or in the JCvSZ. Incidents in these centres must be communicated, recorded and handled by the DJI. The employee of the DT & V (connected to a DJI location) determines whether and when the incident should be reported to the KCT. It may also be the case that the JCvSZ's medical service reports to the KCT. In such a situation, the KCT will always contact the supervisor in charge of the case of the person concerned.

Owing to its multiplicity and divergent nature, it is not necessary for the KCT to act on all reports. The chain partners also have their own internal agreements on how to intervene in case of incidents. The KCT focuses primarily on the reports regarding the foreign nationals staying in an asylum seekers' centre or a detention centre. In the event of imminent incidents involving foreign nationals, including those foreign nationals without a right of residence who have received shelter in a municipality or a specific facility, the Dutch Association of Mental Health and Addiction Care, police or emergency service should be contacted.

The following four intensity levels are distinguished:

- 1. a foreign national is giving off signals, for example through body language, that indicate the risk of an incident taking place;
- 2. a verbal or written communication from a foreign national or their authorised representative indicates the risk of an incident;
- 3. a foreign national has performed certain actions that indicate a serious risk of an incident;
- 4. a foreign national has performed certain actions that have caused an incident, for example a suicide attempt, that requires immediate action.

If an employee of one of the chain partners has established that there is one of the abovementioned situations, it can be reported to the KCT. This report is made within their own organisation and sent to the safety bureau of the COA. The KCT employee will assess the intensity level of the report and, if necessary, take immediate action.

Making a report – intensity levels 1 and 2

In principle, for reports that fall under the intensity levels 1 and 2, no intervention by the KCT will take place. For the purpose of preventing incidents and escalation, the KCT determines which chain partners get informed about a report. In addition, an assessment will be made of whether a deployment of the KCT is required despite a low intensity level.

The safety bureau of the COA carries out the registration and administration of the reports of the three organisations. This information is immediately available for all chain partners.

Making a report – intensity levels 3 and 4

In case of reports of the intensity levels 3 and 4, action that has been mandated for this purpose can be taken by the KCT. This action is primarily aimed at stabilising the resulting incident so that the organisation concerned can proceed with carrying out its regular tasks. The KCT can advise, ask questions, request to monitor the foreign national and, eventually, speak with the foreign national.

The person responsible for the case/supervisor from the primary process remains responsible for the assessment and handling of the procedure. The KCT does not assume responsibility for the involved organisations. The location manager remains responsible for the quality of life and safety at the COA locations. This also applies to the director at the DJI locations.

The assessment of the reports is based on the presumed expertise of the individual employee working with foreign nationals on a daily basis. Each organisation is responsible for organising an internal process that ensures the KCT is informed when an incident occurs.

The staff member is responsible at all times for the foreign nationals in their caseload. Every report is placed in the personal file of the foreign national in the IND systems and sent during the night processing to the DT & V. It is up to the staff member in the chain to draw attention to a foreign national known to the KCT during a meeting where each organisation is present. If desired, questions can be put to the KCT and advice can be sought from the KCT.

KCT PROCEDURE IN CASE OF INCIDENTS

Step 1. Report to the KCT

If an incident occurs, a report is sent to the KCT mailbox.

The mailbox is monitored 7 days a week.

Step 2. First-line action of the KCT

If necessary, the KCT contacts the notifier and collects, among other things, the following information.

- Where is the incident taking place?
- When did the incident start?
- Who did the signal come from / who identified the incident?
- What is the identity (including V-number) of the foreign national who caused the incident?
- What is the nature of the incident (hunger/thirst strike, suicide threat or other)?
- Does the act of the foreign national have a purpose? If so, what purpose?
- What actions have already been taken?
- Who is the contact point on the spot?
- Is medical care needed and, if so, what kind?

The KCT can ask the notifier to keep a factual account of the behaviour of the foreign national and the conversations that take place. The KCT can also provide advice to the notifier. Questions and/or advice can be asked by email or telephone. On the basis of all information received, the KCT will determine whether a deployment is necessary.

Step 3. Actual deployment of the KCT

If the conclusion is made that deployment of the KCT is necessary, the KCT employee will determine when the deployment will take place and which KCT employees will be deployed. It will be done in close consultation with the KCT manager. The starting point is that, insofar as possible, two KCT employees will be sent from different organisations. If two female KCT employees are deployed when the foreign national of concern is male, a male interpreter will be engaged. The location will be relayed through the safety bureau and the appointment will be confirmed.

The following training topics are recommended for members of the incident team (as suggested by the COA).

- Communication: how do you connect with the foreign national in a conversation?
- Psychiatry: trauma, depression, suicide and fear.
- Hunger and thirst strikes: the psychical consequences and the mental aspects.
- How do you conduct a conversation with a suicidal person?
- Ethical dilemmas.
- How does the brain work?
- How do you de-escalate in a conversation?
- Time management.

In addition, it is recommended for team members to receive intervision lasting 3 hours once every 6 weeks.

The efforts of the KCT are aimed at de-escalating and/or ending (threats of) incidents. This is achieved by conducting one or several conversations with the foreign national in the presence of an interpreter.

Prior to the conversation with the foreign national, there is always a preliminary meeting at the location with the person who made the report or others who are involved with the foreign national, for example the supervisor. After the deployment, oral feedback of the conversation is given, if possible in the presence of the same people who participated in the preliminary meeting. No later than 2 working days after the deployment, a written report will be sent to the three organisations, which will forward it to those involved and, if possible, save it on the computer systems / database.

A report will be closed when the situation stabilises and/or the location where the person of concern is staying no longer needs support from the KCT.

Step 4. Questions after deployment

It is possible that, during a deployment, it will appear that the foreign national has questions, for example about the duration of the procedure or about transfer to another location. These questions will be answered to the extent possible during the deployment. If those who are deployed are unable to answer or need to seek information from another organisation first, the situation will be scaled up to the KCT manager who, if necessary, will contact senior management or a director.

Evaluation/prevention. In addition to stabilising incidents (de-escalation), the primary goal of the KCT is the prevention (of escalation) of incidents. Adequate information exchange is essential for this. Identifying and analysing trends is part of this effort. Every month, a report about KCT activities is sent to the Sub-Council on Asylum and an explanation of notable reports is given. The KCT will periodically evaluate the activities and the cooperation in the chain.

Dealing with the media. Information concerning incidents is provided to the press information department of the Ministry of Justice and Security, which maintains contact with the board of directors / management of the various chain partners.

ANNEX 10. CRITICAL INCIDENT REPORTING TEMPLATE

Below is a basic template that can be used in the reporting of critical incidents (the form was adjusted from a reporting template used by Fedasil).

Name of authority	
Notification/registration number	

GENERAL INFORMATION
Report information
Reception facility
Author of the report
Time
Date
Time of the incident
Date of the incident
Location of the incident
Information received from
Police involvement
Other external intervention
Media involvement
Time spent to close case

GENERAL INFORMATION ON THE INCIDENT PERSONS AFFECTED BY THE INCIDENT	
Resident(s) is affected	YES/NO
Type of incident	
In brief: against whom and circumstances	
Employee is affected	YES/NO
Type of incident	
In brief: against whom and circumstances	
Facility is affected	YES/NO
Technique used and circumstances	
Work accident	YES/NO
Type of incident	
Where	

Information on persons affected (resident(s) causing the incident)

RESIDE	RESIDENT(S) AFFECTED											
Name	Identification number	Nationality	Date of birth	Gender	Family composition	Date of entry into the facility	Gravity of impact (low, medium, high)	Involvement: causing/ witnessing/affected	Incident caused	Consequences/ sanctions	Number of sanctions already received	Other comments

PERSONNEL A	PERSONNEL AFFECTED						
Name	Role	Gravity of impact	Work-related accident	Stress team activated: yes/no	Other comments		

DESCRIPTION OF INCIDENT

Context and circumstances preceding the incident

ANNEX 11. REFLECTION TOOL AFTER A CRITICAL INCIDENT HAS OCCURRED

Systematic follow-up using the questions provided below can facilitate the process of ensuring that those affected are coping with a critical incident. The questions can be used by internal and external facilitators with team members and affected staff, and the reflection tool can be used also by first-line officers on their own to strengthen their resilience and cope with an incident. Following this question cycle allows affected staff and teams to explore areas for learning to avoid similar incidents in the future, and also enables them to be better prepared when they do take place.

REFLECTION FOR AFFECTED STAFF

STEP 1: DESCRIPTION

What actually happened?

STEP 8: LEARNING

What will I do if I am ever in a similar, or even different, situation? What do I need from others in the event of a similar incident?

STEP 7: EVALUATION

What else could I have done in the situation?

STEP 6: MONITORING

Did I or others (line manager, colleagues, family, etc.) learn from what has happened? If so, in what ways?

STEP 2: EMOTIONS

What were my first thoughts and feelings?

STEP 3: SUPPORT

Who did I first want to reach out to?

STEP 4: RESPONSE

What support did I receive immediately and what felt the most comforting and why? What else would have been useful and why?

STEP 5: ANALYSIS

What was the worst part of looking at what happened and were there any good outcomes?

ANNEX 12. SETTING BOUNDARIES AND GROUNDING TECHNIQUES AFTER A CRITICAL INCIDENT

A. SETTING BOUNDARIES: THE MAGIC BUBBLE EXERCISE

Healthy boundaries can be imagined as a 'magic bubble' around ourselves. Take a minute and sit down in a quiet space where you are not being distracted.

Imagine that this invisible bubble surrounds you and keeps you safe. You can imagine your own magic bubble in your favourite colour. Try to close your eyes briefly when envisaging your personal magic bubble. The thin layer of the bubble functions as a kind of shield to protect you.

You know that this thin layer, however, allows oxygen, light, relevant information and food, etc., to come inside to nourish you and allow you to feel, learn and grow in healthy ways. The magic bubble gets larger, creating more space around you to provide you with privacy and safety. It gets smaller, if you decide so, to allow more intimacy and time for yourself when needed. You pay attention to your magic bubble and will learn to know when the time comes to expand, and when the time is right to make your bubble smaller.

Setting and maintaining boundaries regarding the volume of work we accept and the interaction with our colleagues or applicants are associated with practising assertiveness. Learning how to be assertive yet respectful is an important skill to have to prevent burnout. Assertiveness may be associated with setting limits to your workload or to the unrealistic expectations of others.

B. THE 5, 4, 3, 2, 1 EXERCISE

Counting backwards from 5, the employee can use their senses to list things around them (¹⁰⁰). For example, five things they can hear, four things they can see, three things they can touch from where they are sitting, two things they can smell and finally one thing they can taste.

C. BREATHING EXERCISES

Employees can slowly inhale through their nose, and then exhale through their mouth (¹⁰¹). They can concentrate on their breathing, feel each breath and note how it feels to push it back out. They try to imagine inhaling calm, safety and protection and exhaling distress, worry and anxiety. When inhaling, imagine that breath brings calm

into your body. While exhaling, visualise how worry is being drawn out of the body to evaporate into the air. This exercise is to be repeated several times.

For some persons, it is good to count during inhalation (e.g. 1, 2, 3, 4 and exhale) since it keeps the mind focused without the risk of wandering back to what has happened.

D. FOCUS ON 'WHAT IS OK' EXERCISES

One sits or stands back, looks around and tries to name three things that feel right, make the staff member feel safe or comforted and are familiar to the affected staff member; for example, 'I see my colleague standing next to me', 'I realise that the sun is shining' and 'I notice nobody is hurt'.

E. FOCUS ON FEELING YOURSELF AGAIN EXERCISE

The affected staff member is advised to take a deep breath through their nose while counting to 3, then to breath out while counting to 4. The person takes their hands and gently and slowly touches/strokes along their forearms and upper arms all the way up to the shoulder. Soft pinching can help, and squeezing muscles, such as in the thighs, followed by stretching their legs slightly and shaking out their hands allows for even stronger bodily sensations.

ANNEX 13. SELF-CARE PLAN

My self-care plan template

AREA OF SELF-CARE	SELF-CARE PRACTICES TO START / TO BE CONTINUED	EVALUATION FREQUENCY	ADDITIONAL PRACTICES TO TRY
Physical (eat regularly, exercise, etc.)			
Emotional/spiritual/mental (engage in counselling sessions, do meditation exercises, acknowledge own achievements, spend time in nature, etc.)			
Professional (maintain work–life balance, manage time, engage in capacity building, etc.)			
Personal/social (meet / video call / phone friends and family, etc.)			
Financial (create a budget to improve quality of life)			

Other suggestions are provided below.

- Start keeping a diary to release tension and to keep the reflection process going.
- Write a letter to yourself, for example relating to your job satisfaction or private life.
 Describe what works and what has to change. Open the letter after a certain period (e.g. 6 months, 1 year) and see positive changes and the areas that need more attention.
- Discover old, forgotten hobbies (e.g. cooking/writing/dancing).
- Watch a film you've always wanted to watch.
- Get enough rest and sleep to recover.
- Make use of technology (e.g. social media) to talk regularly to friends/family not close by or hard to reach as a result of other circumstances (e.g. during a pandemic).

ANNEX 14. SAMPLE TRAINING PROGRAMME WITH A FOCUS ON STAFF WELFARE

EASO offers a number of training modules for both asylum officials and reception officials, as well as for trainers in the field. The modules, courses for trainers and continuing professional development cover a range of competency areas including legal policy procedures, communication, professional standards, professional well-being, health, safety and security (¹⁰²). Find below recommended training topics focusing on the three stages of work: onboarding/pre-deployment, employment and end of employment/deployment.

STAGE 1: ONBOARDING/PRE-DEPLOYMENT

INDUCTION 1: ORGANISATIONAL STRUCTURE AND SYSTEMS IN PLACE						
Objective of the training	 Induction or orientation training is given to the new employee for familiarisation with the: new working environment background of an organisation or authority (foundation, mission, goals) organisational structure and leadership team team members (core team and associated teams) standard business procedures – basic overview general tasks code of conduct anti-fraud and anti-corruption policy anti-sexual harassment policy or similar communication channels existing policies in the organisation and various amenities (remuneration and staff benefit policies, medical and psychological assistance) 					
Description of contents	Depending on the tasks required from the new employee, certain aspects during induction will differ. In case of being assigned to various locations to conduct duties, the employee will be guided and provided with an opportunity to visit all sites under his/her line management					
Suggested format of training	In-person, online or remote study units A focal person from the various departments will provide a brief presentation (verbally, including folders with relevant informational material) to the new employees and share contact details in case of follow-up questions					
Benefits	 Creates a feeling of being welcome and belonging to the authority/agency Builds the employee's confidence in the organisation Provides a feeling of confidence to start the new duties required 					
Recommended length of training	Depending on the size of the organisation / duty, as well as role: between 3 days and 1 month, to become familiar with new tasks					
Staff category	All new employees					
Delivered during	First month of employment					
INDUCTION 2: TECHNICAL SYS	INDUCTION 2: TECHNICAL SYSTEMS AND EQUIPMENT					
Objective of the training	 Induction or orientation training is given to the new employee for familiarisation with the following: office space and related functions (who to find where, location of practical items such as photocopier, bathrooms, canteen, parking) work equipment usage rules rules of use of internal relevant online platforms (e.g. IT software relevant for asylum staff (e.g. Eurodac, COI Portal)) data protection policy and guidelines 					

(102) For more information, refer to the European sectoral qualifications framework occupational standards and educational standards.

Description of contents	 This training module contains: usage of relevant office equipment (printers, copiers, projectors, video equipment, audio equipment, communication technology, first aid equipment) usage of organisation's internal communication platforms IT software and platforms relevant for asylum staff (e.g. Maris in Germany, Eurodac, COI Portal)
Suggested format of training	In-person, online or remote study units / information provision (leaflets, action flows, contact lists)
Benefits	New staff members become familiar with their new work settings, in terms of infrastructure, equipment, logistics and rules of usage
Recommended length of training	4 hours
Staff category	All new employees
Delivered during	First month of employment
INDUCTION 3: SAFETY AND SE	CURITY
Objective of the training	Safety and security training is given to all employees for familiarisation with the safety and security policy and procedures in place and the relevant channels of communication
Description of contents	 This training module contains: first aid training fire protection instruction security briefing (including for deployment) evacuation plan and emergency contact list health-related protection measures to observe (e.g. COVID-19, Ebola and other possible communicable disease) safety at work, behaviour-based safety, safety culture and safety circle
Suggested format of training	In-person, online or remote study units / information provision (leaflets, action flows, contact lists, etc.)
Benefits	Sets the frame of rights and responsibilities of employees regarding safety and security Ensures that employees are protected from injuries caused by work-related accidents Builds the employee's confidence in the organisation
Recommended length of training	4 hours
Staff category	All new employees
Delivered during	First month of employment

NB: COI, country of origin information.

STAGE 2: EMPLOYMENT PHASE / ONGOING SUPPORT

Professional development

RECRUITMENT, STAFF SELECTION AND STAFF PERFORMANCE APPRAISAL				
Objective of the training	To provide structured guidance on the procedures to follow and the skills needed for recruitment of staff and appraisal of work performance			
Description of contents	 This training module contains: recruitment procedures selecting procedures conducting recruitment interviews and tests performance appraisal procedures appraisal goals performing appraisal and processing results 			
Suggested format of training	In-person, online or remote study units			

Benefits	Acquired knowledge of the organisation's procedures regarding recruitment, selection and appraisal and improved skills in the conduct of these procedures in the context of asylum
Recommended length of training	8–12 hours (depending on the level of participants)
Staff category	HR staff
Delivered during	First month of employment
PROFESSIONAL DEVELOPMENT TRA	AINING MODULES INVOLVING CASE OFFICERS (103)
Objective of the training	To provide either a basic overview of international protection and the Common European Asylum System, including practical skills in putting European regulations and directives into action Furthermore, Member States provide a training unit on asylum in that specific Member State, which will provide knowledge on how the international and European frameworks apply to the national context and are linked to national legislation
Description of contents	Content could include the following topics: the Common European Asylum System, with a specific focus on the asylum processes directive; inclusion; evidence assessment; interview techniques including with vulnerable groups, including children; decision-making; the importance of country of origin information; gender, gender identity and sexual orientation; exclusion; etc.
Suggested format of training	In-person, online or remote study units
Benefits	Staff professional capacity to perform duties is enforced Knowledge on how to translate regulations/directives into daily practice to ensure a common approach to asylum throughout Europe
Recommended length of training	Depending on the number of years of experience of participants
Staff category	All new case workers / updates for existing case workers
Delivered during	After probation period / refresher modules
PROFESSIONAL DEVELOPMENT TRA	AINING MODULES INVOLVING RECEPTION OFFICERS (104)
Objective of the training	To have a basic overview of international protection and the Common European Asylum System, including practical skills in applying European regulations and directives in reception contexts Member States could provide an add-on module on how the international and European frameworks on asylum apply to the national context and are linked to national legislation
Description of contents	Content might include the Common European Asylum System, with a specific focus on the reception conditions directive and national guidance on reception; safeguards for vulnerable persons; reception conditions for children; importance of information provision, gender, gender identity and sexual orientation; contingency planning; international refugee law; human rights; etc.
Suggested format of training	In-person, online or remote study units
Benefits	Knowledge on how to translate regulations/directives into daily practice to ensure a common approach to asylum throughout Europe
Recommended length of training	Depending on the number of years of experience of participants
Staff category	All new reception officers / updates for existing reception officers
Delivered during	After probation period / refresher modules advised
DATA PROTECTION	
Objective of the training	To provide structured guidance on the procedures to follow with regard to data protection, both in internal communication and with regard to external parties and the main target groups of the work (i.e. applicants)

⁽¹⁰³⁾ The EASO training curriculum offers a broad range of modules covering the skills, knowledge and responsibilities required for officials to perform their day-to-day tasks and duties.

⁽¹⁰⁴⁾ The EASO training curriculum offers a broad range of modules covering the skills, knowledge and responsibilities required for officials to perform their day-to-day tasks and duties.

Description of contents	 This training module contains: EU data protection rules data privacy (rules for collecting, processing, sharing, archiving and deleting data) data security (data protection enforcement mechanisms) data protection rights data breach responses
Suggested format of training	In-person, online or remote study units
Benefits	Acquired knowledge on the organisation's guidelines and procedures regarding data protection
Recommended length of training	2–4 hours (depending on role and function)
Staff category	All staff
Delivered during	First month of employment

Stage 2 and Soft-skills development

COMMUNICATION AND COMMUNICAT	COMMUNICATION AND COMMUNICATION TECHNIQUES (105)	
Objective of the training	To offer an introduction on the use of effective communication tools and strategies in the workplace in support of good professional performance and healthy and constructive inteam interactions, including in situations of conflict	
Description of contents	 This training module contains: the communication cycle: speak – listen/hear – understand – negotiate – agree on – act barriers to and facilitators of effective communication types of communication/behaviour team membership and group dynamics setting boundaries negotiation techniques communication and conflict management identifying sources of conflict (psychological, organisational) anger management conflict resolution strategies (avoiding, compromising, accommodating, collaborating) strategies to avoid conflicts (within teams, with clients) de-escalation strategies 	
Suggested format of training	In-person, online or remote study units	
Benefits	Improved skills in effective communication in the workplace, avoiding misunderstandings, constructive response to criticism, empathising in the workplace Increased awareness of communicating constructively and effectively in the workplace	
Recommended length of training	2–4 hours	
Staff category	All personnel holding managerial roles and first-line officers	
Delivered during	After probation period / refresher modules advised	
STRESS MANAGEMENT		
Objective of the training	To raise awareness among staff members of the sources and signs of stress and burnout, as well as of the ways to avoid and cope with stress	
Description of contents	 This training module contains: an overview of stress, chronic stress, burnout and vicarious trauma basic skills in how to identify, prevent and manage stress in yourself and staff members negative and positive coping mechanisms and strengthening resilience basic knowledge of critical incident management self-care and self-care tools (preventing stress) 	
Suggested format of training	In-person, online or remote study units	

Benefits	An awareness of and skills in stress management lead to better motivation, productivity
	and communication at work, which help to maintain well-being
Recommended length of training	8–16 hours (depending on the responsibilities)
Staff category	All personnel holding managerial roles and all first-line officers
Delivered during	After probation period / refresher modules advised
INTERCULTURAL SENSITISATION	
Objective of the training	To provide background information on and skills in working within culturally diverse settings, to explain behaviours that may appear unfamiliar or confusing and to raise awareness of safeguarding and anti-discrimination policies in the field. To increase participants' cultural awareness, knowledge and communication
Description of contents	 This training module contains: – cultural diversity – gender roles in various cultural settings – concepts of gender, age, time and work in various cultural settings – safeguarding and anti-discrimination policies
Suggested format of training	In-person, online or remote study units
Benefits	Cultural awareness and understanding of the impact of cultural differences in work with clients and in the workplace A better understanding of the cultural challenges facing multicultural workplaces Enhance cultural sensitivity and competence
Recommended length of training	2–4 hours
Staff category	All personnel holding managerial roles and asylum staff
Delivered during	After probation period / refresher modules advised
MANAGEMENT AND LEADERSHIP IN	THE ASYLUM CONTEXT
Objective of the training	Introduction to key management styles and skills, and their application in the asylum setting
Description of contents	 This training module contains: defining leadership and management dimensions of leadership (types of leadership) expectations on managers leadership in daily management and time management management theories strategic thinking and planning / contingency planning decision-making delegation managing balanced workloads (principles and benefits) managing balance between quality and efficiency
Suggested format of training	In-person, online or remote study units
Benefits	Increased awareness of management skills and techniques for effective decision-making and constructive team leadership
Recommended length of training	8–12 hours
Staff category	All personnel holding managerial roles
Delivered during	After probation period / refresher modules advised
TEAM BUILDING	
Objective of the training	To provide managers with systematic knowledge on how to build a team and maintain positive team dynamics

Description of contents	 This training module contains: team-building techniques stages of team building and team dynamics what makes a team successful and what can spoil teamwork? identifying and using the strengths of team members practising effective collaboration with team members team-building activities managing conflicts within teams coaching: what is coaching? / difference between coaching and mentoring coaching: the coaching spectrum coaching: active listening and blocks to listening
Suggested format of training	In-person, online or remote study units
Benefits	Increasing knowledge and awareness of team dynamics to promote trust, satisfaction, good communication and effective conflict management within teams Improving a team's functioning in general, by developing interpersonal relations, clarifying roles or solving existent problems
Recommended length of training	8–16 hours
Staff category	All personnel holding managerial roles
Delivered during	During employment, after probation period
CRITICAL INCIDENT MANAGEMENT	
Objective of the training	To provide basic knowledge of the nature of critical incidents related to the asylum setting and management, and coping mechanisms
Description of contents	 This training module contains: critical incidents (nature and type) strategies to handle a critical incident (strengthening resilience of individual staff members) strategies to handle a critical incident (manager's support to teams and team
	members) — trauma: signs and coping mechanisms — immediate, medium-term and long-term support — organisational and collegial support — debriefing and lessons learnt
Suggested format of training	 trauma: signs and coping mechanisms immediate, medium-term and long-term support organisational and collegial support
Suggested format of training Benefits	 trauma: signs and coping mechanisms immediate, medium-term and long-term support organisational and collegial support debriefing and lessons learnt
	 trauma: signs and coping mechanisms immediate, medium-term and long-term support organisational and collegial support debriefing and lessons learnt In-person, online or remote study units
Benefits	 trauma: signs and coping mechanisms immediate, medium-term and long-term support organisational and collegial support debriefing and lessons learnt In-person, online or remote study units Ability to follow up on staff after a critical incident in a timely manner

STAGE 3: END OF EMPLOYMENT / POST-DEPLOYMENT

PREPARATION FOR EXIT	
Objective of the training	To ensure individuals have knowledge of what documents are to be completed (or are useful to consider) by outgoing staff members and managers
Description of contents	This training module contains: — conducting constructive exit debriefs/feedback — handing over documentation — preparation of documents (references, performance statements, etc.)
Suggested format of training	In-person, online or remote study units
Benefits	To ensure a smooth transition between a colleague preparing to leave and a potential incoming team member, including sharing of information and lessons learnt
Recommended length of training	2 hours
Staff category	All personnel holding managerial roles / HR staff
Delivered during	During employment phase

ANNEX 15. FOCUS GROUP DISCUSSION

Confidentiality should be maintained and unanimity should be sought at all times. The facilitator can record everything being discussed in the FGD, whereas the sharing of the details and summing up of key points should be done in agreement of all members. The FGD is not obligatory and employees should be informed from the beginning of the purpose of the FGD and the way information will be shared.

Checklist: FGD (106)

I. DESIGNING A FGD
Define the purpose
Develop a list of key questions
Seek ethics clearance
Identify and recruit participants
Ensure homogeneous composition (e.g. with regard to gender, age, language)
Decide on the number of participants
Recruit a facilitator and an assistant (one for facilitation and one for taking notes)
Decide on the number of focus groups
Identify a suitable location
Make sure the location is accessible and of a suitable size
Prepare materials (name tags, consent forms, attendance list, recording equipment)
II. Data collection
Pre-session preparation
Familiarisation with group dynamics, script and seating arrangements
Facilitation of the session
Make introductions (names of each member group, confidentiality issues, ground rules)
Facilitate (discuss, reflect, pause, record and observe discussion)
Track questions and follow up on topics
Write all answers alongside the questions using a specific format (co-facilitator takes notes)
Conclude
III. Analysis
Analyse content
Key topics
Listing/ranking
Content analysis
Discussion analysis
Decide on audience for the results
Packaging the feedback to be passed on to managers
Take next action points

(106) Nyumba, T. O., Wilson, K., Derrick, C. J. and Mukherjee, N., 'The use of focus group discussion methodology: insights from two decades of application in conservation', *Methods in Ecology and Evolution*, Vol. 9, 2018, pp. 20–32.

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