

# Quality Assurance in Asylum Procedures

Examination of applications for international protection







# **Practical Guide on Quality Assurance in Asylum Procedures**

*Examination of applications for international protection*

**April 2024**

On 19 January 2022, the European Asylum Support Office (EASO) became the European Union Agency for Asylum (EUAA). All references to EASO, EASO products and EASO bodies should be understood as references to the EUAA.



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# About the guide

**Why was this guide created?** The mission of the European Union Agency for Asylum (EUAA) is to facilitate and support the activities of EU Member States and associated countries (EU+ countries <sup>(1)</sup>) in the implementation of the Common European Asylum System. In accordance with the EUAA's overall aim of promoting the correct and effective implementation of the CEAS and of enabling convergence, the EUAA develops common operational standards and indicators, guidelines and practical tools.

**How was this guide developed?** This guide was created by experts from across the EU+, with valuable input from the European Commission, the United Nations High Commissioner for Refugees and the European Council on Refugees and Exiles <sup>(2)</sup>. Its development was facilitated and coordinated by the EUAA. Before its finalisation, a consultation was carried out with all EU+ countries through the EUAA Asylum Processes Network. The EUAA would like to extend its thanks to the members of the working group who drafted this guide: Ingrid Riemsma, Siiri Veijonen and Matthias Wild.

**Who should use this guide?** This guide is primarily intended for persons responsible for assessing the quality of personal interviews and decisions on applications for international protection. At the same time, this guide is for top-level and middle management officials and officials responsible for implementing and coordinating quality assurance in national administrations. In addition, this guide is useful for any other person working or involved in the field of international protection in the EU context.

**How does this guide relate to other EUAA tools?** The guide should be used in conjunction with the EUAA's guidance on the asylum procedure <sup>(3)</sup> and its quality assurance tool <sup>(4)</sup> and with the other practical guides and tools that are publicly available on the EUAA's website (<https://euaa.europa.eu/practical-tools-and-guides>).

**How does this guide relate to national legislation and practice?** This is a soft convergence tool. It is not legally binding and reflects the commonly agreed standards adopted by the EUAA's Management Board on 29 April 2024.

## Disclaimer

This guide was prepared without prejudice to the principle that only the Court of Justice of the European Union can give an authoritative interpretation of EU law.

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<sup>(1)</sup> The 27 Member States of the European Union and Iceland, Liechtenstein, Norway and Switzerland.

<sup>(2)</sup> Note that the finalised guide does not necessarily reflect the positions of the United Nations High Commissioner for Refugees and the European Council on Refugees and Exiles.

<sup>(3)</sup> EUAA, [Guidance on Asylum Procedure: Operational standards and indicators](#), September 2019.

<sup>(4)</sup> EUAA, [Quality Assurance Tool: Examining the application for international protection](#), July 2019.





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# Abbreviations

Abbreviation	Definition
<b>APD (recast)</b>	asylum procedures directive (recast) – Directive 2013/32/EU of the European Parliament and of the Council of 26 June 2013 on common procedures for granting and withdrawing international protection (recast)
<b>CAF</b>	Common Assessment Framework
<b>CEAS</b>	Common European Asylum System
<b>COI</b>	country of origin information
<b>EUAA</b>	European Union Agency for Asylum
<b>EU+ countries</b>	27 Member States of the European Union plus Iceland, Liechtenstein, Norway and Switzerland
<b>ISO</b>	International Organization for Standardization
<b>PDCA</b>	plan–do–check–act
<b>SOP</b>	standard operating procedure





## Executive summary

The aim of quality assurance as described in this guide is to ensure fair and efficient asylum procedures, conducted in a transparent manner in accordance with the legal standards set out by the Common European Asylum System. The introduction of a quality assurance methodology, based on the plan–do–check–act model, in national asylum administrations improves their performance in a continual and sustainable manner.

Management's commitment to establishing an organisational quality culture is key for the effective functioning of quality assurance mechanisms. An organisational quality culture is characterised by results-oriented and fact-based management; people involvement; learning and knowledge management; feedback and a positive approach to responding to errors; a service mentality; and recruitment, training and professional development.

Quality assurance is based on the development of robust mechanisms for consultation on quality within the organisation and the development of quality support tools. The consultation mechanisms can take the form of providing supervision and mentoring, applying the four-eyes principle, providing a help desk and/or organising regular consultation meetings. Quality support tools can consist of guidance, standard operating procedures, templates, etc.

Quality support tools can be used by case officers in their daily work and they can make use of the consultation mechanisms offered.

Monitoring the quality of personal interviews and first-instance decisions is an ongoing activity. It provides an opportunity to assess the development of the examination of asylum applications over time, helping to identify the strengths and weaknesses of the asylum procedure). The steps for monitoring the quality of personal interviews and first-instance decisions include:

- selection of standards and indicators;
- data collection;
- assessment and analysis;
- feedback and reporting;

Additional inputs and activities that support the review of interviews and decisions and supplement the monitoring of quality consist mainly of second-instance decisions and court decisions, external evaluations and audits, complaint mechanisms, surveys targeting applicants and input from internal stakeholders.

Based on the outcomes of the monitoring activities and consultation with management, recommendations for the improvement of the processes can be drawn up, complemented by an action plan for their implementation.





# Introduction

The asylum procedure achieves its objectives and offers the necessary protection only when it is implemented in line with the applicable standards in every single case.

This guide aims to support asylum administrations to implement a quality assurance methodology in the asylum procedure and further develop their quality management systems. Quality assurance measures ensure a fair, efficient and transparent procedure, which is carried out in accordance with legal standards. At the same time, the guide explains how measures can be implemented in practice to ensure the quality of personal interviews and first-instance decisions. Depending on the set-up of national asylum administrations, the guidance and standards included in this guide can also be applied in other areas of the asylum procedure, such as the application of the Dublin III regulation <sup>(5)</sup>, interpretation services, the quality of country of origin information (COI), reception and other administrative procedures.

This practical guide is structured in four chapters: [Chapter 1. 'A systematic approach to quality in the asylum procedure'](#) outlines the definitions, components and outcomes of quality, quality management and quality management systems. It also details key concepts from management theory that can be applied by national asylum administrations. [Chapter 2. 'Consultation mechanisms'](#) highlights the importance of a consultation culture in asylum administrations and introduces a set of mechanisms that ensure the quality of personal interviews and first-instance decisions. [Chapter 3. 'Quality support tools'](#) focuses on the tools that support case officers in their daily work. The chapter discusses how they can be developed and kept up to date, and provides recommendations for the optimal design and implementation of the tools. [Chapter 4. 'Monitoring quality'](#) outlines the steps for devising a methodology to continuously monitor the quality of the asylum procedure, focusing on personal interviews and first-instance decisions. It also details the activities that provide inputs to monitor the quality of the asylum procedure, allowing follow-up actions and improvements to be implemented.

This guide focuses on quality assurance in the context of the examination of applications for international protection. For a broader discussion of quality management systems in general, consult the literature in this field <sup>(6)</sup>.

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<sup>(5)</sup> [Regulation \(EU\) No 604/2013](#) of the European Parliament and of the Council of 26 June 2013 establishing the criteria and mechanisms for determining the Member State responsible for examining an application for international protection lodged in one of the Member States by a third-country national or a stateless person (recast) (OJ L 180, 29.6.2013).

<sup>(6)</sup> See, for example, International Organization for Standardization (ISO), 'ISO 9001:2015: Quality management systems' (<https://www.iso.org/iso-9001-quality-management.html>); European Foundation for Quality Management (EFQM), 'The EFQM Model' (<https://efqm.org/the-efqm-model/>); Chartered Quality Institute (CQI), 'Knowledge & research' (<https://www.quality.org/knowledge>); American Society for Quality (ASQ), 'Quality resources' (<https://asq.org/quality-resources>).



# 1. A systematic approach to quality in the asylum procedure

Defining quality is a challenging task. This chapter aims at outlining the core elements that contribute to quality in the asylum procedure. As quality assurance in asylum procedures is not a standalone activity, it needs to be supported by an organisation that favours a quality culture. This chapter presents the organisational principles necessary to achieve this.

Asylum administrations have established different organisational set-ups for quality management functions, which are also outlined in this chapter. It touches upon the main elements to consider when administrations plan to introduce a quality management system. At the same time, the chapter builds further on the plan–do–check–act (PDCA) cycle in the asylum procedure.

## 1.1. Defining quality in the asylum procedure

The asylum procedure is a public administrative procedure and as such is governed by the rule of law. In parallel with adhering to legal standards set out in the legislation, over the last decades the public sector has drawn lessons from the private sector with regard to assuring quality. In particular, the approach to quality in both the public and the private sector, has, in the context of conformity with legal requirements, become increasingly service oriented (<sup>7</sup>).

In the area of asylum, both society as a whole and applicants for international protection are the main beneficiaries of state procedures. However, because applicants can only turn to the state to apply for asylum, there is an imbalance of power between the applicants and the state that needs to be taken into account. In addition, in the asylum procedure the stakes are high. Any shortcomings in its implementation could put applicants' safety at risk and risk exposing them to ill treatment. The weaker position of the applicants can be offset by the implementation of measures to ensure the quality of the processing of their claims and the provision of procedural guarantees. High-quality procedures are essential to ensure that applicants, the public and other stakeholders continue to have confidence that those who are in need of international protection can receive it.

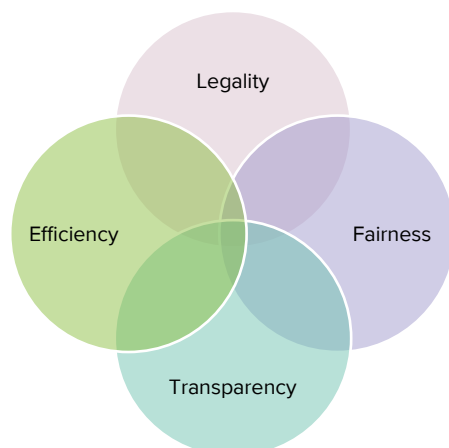
Quality in the asylum procedure covers four fields of action: legality, fairness, efficiency and transparency (see Figure 1).

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(<sup>7</sup>) For further details on the theory of conformance to requirements, see Crosby, P. B., *Quality is Free*, McGraw-Hill Book Co., New York, 1979, and the ISO 9000 series of standards on quality management principles and customer focus.



**Figure 1. Four contributing elements to quality in the asylum procedure**



**Legality** ensures that the legal framework and the procedural guarantees that are set out in international, EU and national law, relevant case-law and due process guarantees are properly implemented in practice.

**Fairness** ensures that each applicant's claim is assessed on an individual basis, taking into account their personal circumstances (e.g.

specific vulnerabilities). It also ensures that all applicants have equal access to and opportunity to participate in the asylum procedure and can enjoy their rights and fulfil their obligations. Furthermore, it ensures that similar applications are processed and assessed in a comparable way. At the same time, fairness contributes to the integrity of the asylum procedure, which relates to the ability of authorities to detect, report and act on fraud.

**Efficiency** entails a timely asylum procedure through optimised processes, which allows a swift examination while ensuring that it is adequate and complete. An efficient procedure ensures that applicants are not left waiting on the outcome of their application for an unnecessarily long time. Efficiency also incorporates the adaptability of the asylum procedure to the changing circumstances that characterise asylum flows, in terms of both the size of the flow and the types of claims.

**Transparency** ensures that the asylum procedure is predictable for the applicant, that relevant information is provided to the applicant, that applicants understand their rights and obligations and the procedure, that decisions are clear and well reasoned and that applicants have access to an independent legal counsellor and to an effective remedy. Transparency of procedures is key for guaranteeing the accountability of the asylum administrations to the applicants and to society as a whole.

In conclusion, quality results in a **fair** and **efficient** asylum procedure that is conducted in a **transparent** manner in accordance with the **legal standards** set out by the Common European Asylum System (CEAS).



## 1.2. Organisational set-up of quality management functions of asylum administrations

National asylum administrations in the EU+ countries are structured in different ways. The organisational roles, responsibilities and authorities, including those assigned to quality management activities, are determined by top-level management <sup>(8)</sup>.

In most EU+ countries, quality management is institutionalised to a certain extent. For example, some authorities have a dedicated unit, staff with specific quality management responsibilities or arrangements involving cooperation with other organisations. In this respect, the quality management functions of asylum administrations can be fully centralised or partially decentralised.

It is important to stress that quality should be implemented throughout an organisation in accordance with the principle of ‘getting the job done’, by the people most competent to do so in the required roles. This is an essential element of quality management.

In addition, having a unit that is assigned the essential task of overseeing and monitoring the quality of the asylum procedure has, taking into account the size of each administration, substantial advantages for asylum administrations. In this case, the relevant unit has an oversight function, without this entailing that all quality management functions are concentrated in this unit. To ensure good governance in the organisation, conflict between roles should be avoided, and independence must be ensured during the performance of assigned tasks. In both centralised and partially decentralised set-ups, it is important to invest in consultation mechanisms and define the various roles (for more information, see [Section 2. ‘Consultation mechanisms’](#)).

This section presents the main set-ups for quality management functions in national administrations <sup>(9)</sup>. The strengths of each set-up are highlighted and recommendations for their implementation are provided. National set-ups can take several forms and combinations of forms other than those presented below. The set-ups are often based on the specific characteristics of asylum administrations, such as size, operating location, infrastructure, administrative culture, legal framework, number of staff and caseload.

Considering the characteristics of each administration, the organisational setup that is ‘fit for purpose’ needs to be in place when setting up a quality management system.

### 1.2.1. Fully centralised quality management functions

This set-up is characterised by a central quality management unit, typically in the headquarters of an asylum administration (see Figure 2). This unit can be a dedicated quality unit, or a function of a legal unit, a unit responsible for coordinating the asylum procedure, or a senior

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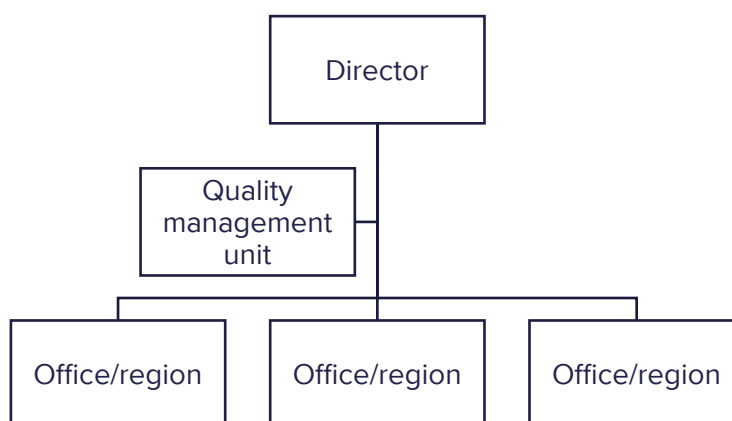
<sup>(8)</sup> For more information, see ISO 9001, Sections 5.3 ‘Organizational roles, responsibilities and authority’ and 7.1.2 ‘People’.

<sup>(9)</sup> See EUAA, *Quality Matrix Report on Quality Management*, December 2022 (restricted document for the use of EU+ countries only).



management unit. The unit is assigned the essential tasks of monitoring the quality of the asylum procedure and implementing quality assurance activities.

**Figure 2. Fully centralised set-up**



#### Advantages of the set-up and organisational strengths

- The quality management unit is closely associated with senior management and those involved in decision-making.
- The set-up includes a high level of expertise and specialisation.
- The consistency and coherence of quality-related activities throughout the administration is ensured.
- Objectivity and independence is ensured when implementing quality-related measures throughout the administration.
- Knowledge is shared with regional/local offices consistently.

#### Elements to consider

- Distance from the operational level can have consequences for the flow of information and maintaining close contact with the field.
- The efficiency of the process could be compromised because of delays created due to logistics and over-reliance on a centralised process.
- Ensuring human resources are available for all activities can create challenges. This can be mitigated through quality missions and the establishment of active communication channels in the field.
- When implementing quality management measures, such as reviews of cases by the asylum administration, it may be possible to obtain resources from the local level.

### 1.2.2. Partially decentralised quality management functions

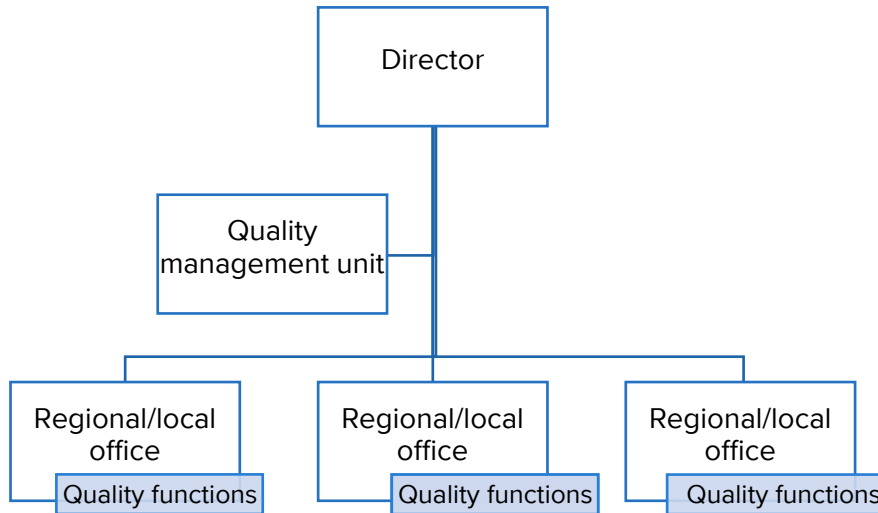
In this set-up, quality management activities are partially decentralised within the asylum administration (see Figure 3). Specific quality-related competences and tasks are assigned to regional or local offices, while a central quality unit retains the function of coordinating





activities and setting quality requirements at national level. The type and scope of quality-related activities implemented by regional or local offices can vary. The activities typically include first-line quality reviews of individual cases.

**Figure 3. Partially decentralised set-up (regional level)**



#### Advantages of the set-up and organisational strengths

- The closeness of the quality unit to practices and operational processes in the field enables the flow of information, allowing the identification of new challenges, needs and good practices.
- The central quality unit can focus on coordination and monitoring activities.

#### Elements to consider

- Strong coordination and communication channels with the central quality unit are needed to ensure the consistency and streamlining of the implementation of processes at regional/local level.
- A high number of staff need to be engaged in quality-related activities in regional/local offices, which can draw resources away from other processes.
- Objectivity and independence must be ensured when implementing quality-related activities at regional/local level.
- There is a risk that divergent quality cultures develop in different local/regional offices.

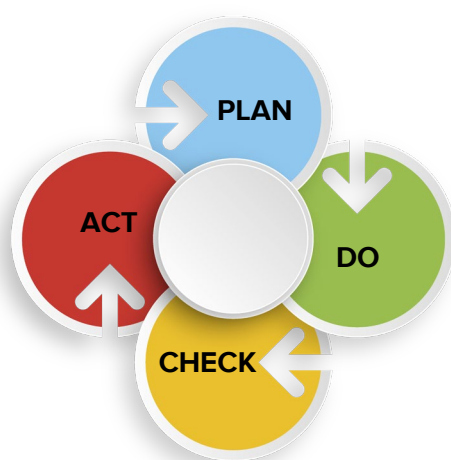
Quality management functions can also be partially decentralised in a horizontal manner, for example among different units/departments in the headquarters of an asylum administration.



### 1.3. Implementing a plan–do–check–act cycle in the asylum procedure

The establishment of a **fair** and **efficient** asylum procedure that is conducted in a **transparent** manner in accordance with the **legal standards** can be best supported through the introduction of the PDCA cycle in the asylum procedure.

**Figure 4. PDCA cycle**



The PDCA cycle <sup>(10)</sup> (see Figure 4) is a management approach used to facilitate the continual improvement of products and processes. The PDCA cycle can be implemented to manage the quality of each process in any organisation, as it combines planning, implementing, monitoring and continual improvement <sup>(11)</sup>. More importantly, the PDCA cycle can be applied to a quality management system where interrelated and interdependent processes are managed together to enhance organisational performance.

Owing to its practicability and widespread use in the area of quality management, the PDCA cycle can also form the basis for quality assurance in asylum

administrations.

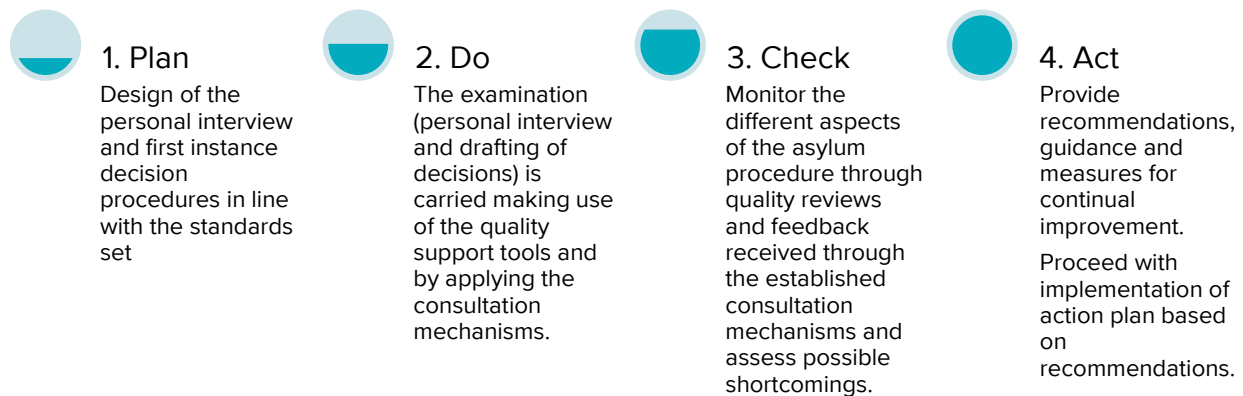
For the purposes of this guide, the PDCA cycle at process level includes, but is not limited to, the activities of asylum administrations described in Figure 5 <sup>(12)</sup>.

<sup>(10)</sup> The Deming Cycle (plan–do–study–act) replaces ‘check’ with ‘study’ when outcomes are monitored to test the validity of plans through signs of progress and success, or problems and areas for improvement (see the Deming Institute’s website, available at <https://deming.org/explore/pdsa/>).

<sup>(11)</sup> The PDCA cycle forms the basis of the ISO 9001 quality management system standards. For more information on the PDCA cycle, see ASQ, ‘What is the plan–do–check–act (PDCA) cycle?’ (<https://asq.org/quality-resources/pdca-cycle>).

<sup>(12)</sup> See also EUAA, *Quality Matrix Report on Quality Management*, December 2022 (restricted document for the use of EU+ countries only).



**Figure 5. PDCA cycle for quality assurance in the asylum procedure**

## 1.4. Organisational principles for an effective quality culture

Organisations that foster a quality culture are characterised by a number of organisational principles. Adopting them allows the administrations to implement quality management activities effectively. These principles are described below <sup>(13)</sup>.

### 1.4.1. Management's leadership and commitment

The implementation of quality assurance measures demands resources and time, while their positive impact is not always visible to the operational units in the short term. Therefore, it is crucial that top-level management directs the relevant activities, is willing to improve and is open to feedback. It is recommended that the head of the quality management unit or official responsible for coordinating the quality management activities reports directly to the top-level management of the asylum administration, which assumes overall responsibility and accountability.

### 1.4.2. Results-oriented and fact-based management

In order to implement effective quality management processes, the administration should be results oriented. Therefore, it should base its decisions on facts and law, operational guidance and the data and information available, with a view to making informed, effective and objective management decisions. This will allow administrations to examine international

<sup>(13)</sup> For further information, see the Common Assessment Framework (CAF) principles of excellence (in European Public Administration Network (EUPAN) and European Institute of Public Administration (EIPA), [Common Assessment Framework: The European model for improving public organisations through self-assessment, 2020](#)) and the ISO 9000 quality management principles (available at <https://asq.org/quality-resources/iso-9000>).



protection applications in a way that is consistent with the legal framework and the objective criteria that stem from it.

### 1.4.3. Staff involvement

Management's commitment alone is not effective when the organisational culture (i.e. the set of shared assumptions that guide collective behaviours) <sup>(14)</sup> does not recognise the importance of quality. The achievement of the required level of quality depends on every person in the organisation. Staff at all levels are the essence of an organisation. The contribution of employees should be maximised through their involvement, and the creation of a work environment where employees share the same values and there is a culture of trust, openness, empowerment and recognition. When all staff (e.g. case officers, COI officers) participate in this quality culture, it is more likely that they will produce high-quality deliverables. It is recommended that senior management spearheads quality management activities for the purpose of promoting the quality culture so that it becomes a part of the organisation's day-to-day work <sup>(15)</sup>.

### 1.4.4. Learning organisation

Successful organisations that can last are those that adapt to a constantly changing environment by learning. This is achieved by allowing their staff to expand their potential and create new patterns of thinking, which can in turn contribute to the organisation's mission. A key component for a learning organisation is learning from teams, as teams are the driver for learning in modern organisations <sup>(16)</sup>.

Learning through teams is fuelled by dialogue and fostered through building a consultation culture in asylum administrations, which is described in detail in Chapter [2. 'Consultation mechanisms'](#). This can support directly with processes improvement in the organisation, as it is through dialogue that knowledge gaps are identified, ways to address them are discussed and team members are motivated to contribute actively to the implementation of improvement measures.

### 1.4.5. Knowledge management

Knowledge is an intangible yet highly valued organisational asset and its management has become a core part of the strategy of modern organisations <sup>(17)</sup>.

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<sup>(14)</sup> Ravasi, D. and Schultz, M., 'Responding to organisational identity threats: Exploring the role of organisational culture', *Academy of Management Journal*, Vol. 49, No 3, June 2006, pp. 433–458.

<sup>(15)</sup> For further information on quality assurance initiatives, see Refworld, 'Quality assurance' (<https://www.refworld.org/qualityassurance.html>).

<sup>(16)</sup> See further in Senge, Peter M. 'The Fifth Discipline: the art and practice of the learning organisation', Random House, London, 1990, p. 10.

<sup>(17)</sup> Lambe P. and Milton N., 'The Knowledge Manager's Handbook: a step by step guide to embedding effective knowledge management in your organisation', Kogan Page Limited, 2016, pp. 7–8 analysing findings of a 2014 survey conducted by Knoco Ltd. in 2014.





In practice, the following elements are prioritised in a knowledge management strategy: learning from experience, improving access to and management of documents, creation and provision of best practices and innovation <sup>(18)</sup>.

Knowledge can be classified in different groups, for example it can be operational, relating to the daily working functions of an organisation, such as knowledge included in SOPs available. It can also be strategic, relating to the mission of an organisation, such as knowledge stemming from the national legal framework. It can be explicit i.e. organised in such a way that can be accessed by all staff and it can also be tacit or implicit. Tacit knowledge is experienced individually by members of an organisation and is further empowered through the communities of practice, as further described under the consultation mechanisms in Chapter [2. 'Consultation mechanisms'](#).

Knowledge management should be addressed as a continual process, incorporated in the organisation's policy <sup>(19)</sup>. To this regard the coordination of the knowledge management strategy in the administration is key, as it ensures the effective provision, transfer and use of knowledge from all staff.

#### **1.4.6. Feedback and positive approach to responding to errors**

A learning organisation can only be achieved when feedback is given in a motivational and constructive manner. Erroneous decisions in the examination of international protection applications can have a significantly detrimental impact on applicants. Quality assurance mechanisms therefore need to be in place to prevent and amend this type of situation. At the same time, the act of learning from mistakes needs to be cherished so that staff is not afraid to mention errors they have made and are not afraid to receive feedback. Learning from best practices is also advised, as it encourages the development of desired behaviours or processes and gives recognition to deserving staff. The positive approach to responding to errors can be put into practice through the four-eyes principle and consultation, which allows giving feedback to the case officer (for further information, see Section [2. 'Consultation mechanisms'](#)).

#### **1.4.7. Service mentality**

A service mentality prioritises the requirements of the external and internal beneficiaries of organisations' services, who are highly affected by their decisions. External beneficiaries of asylum administrations' services mainly include applicants for international protection but also include the citizens of the country, as public organisations aim to serve the public interest. Internal beneficiaries of administrations' services are colleagues who depend on a person's or unit's output to provide their own service (e.g. case officers benefit from COI products issued by colleagues working as COI officers).

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<sup>(18)</sup> Lambe P. and Milton N., 'The Knowledge Manager's Handbook: a step by step guide to embedding effective knowledge management in your organisation', Kogan Page Limited, 2016, pp. 9–10

<sup>(19)</sup> Perrott, Bruce, 'Organisational Knowledge Management Dynamics: Insights and Perspectives', in 'From Knowledge Management to Learning Organisation to Innovation: The Way Ahead!', Fawzy Soliman and contributors, Cambridge Scholars Publishing, 2015, pp. 82-86





## 1.4.8. Recruitment, training and professional development

Staff responsible for examining applications for international protection must have the appropriate knowledge, skills and receive relevant training to be able to issue decisions based on facts. Asylum administrations should ensure that the right resources are available and recruit an adequate number of personnel with the qualifications needed to conduct personal interviews and issue first-instance decisions.

Relevant staff should receive the necessary training on international protection <sup>(20)</sup>. This ensures regular professional and capacity development; facilitates the convergence of methods, decisions and practices; and ensures that staff are kept up to date on new practices, policies, case-law and legislation. Training is also an opportunity for senior case officers to advance their knowledge and specialise in thematic areas, for staff in managerial positions to enhance their skills and for organisations to foster a culture of lifelong learning. There is also a need to train experts on quality management activities, for example how to monitor the quality of asylum decisions and interviews and how to give feedback. Management can also complement formal training with work-based capacity-building activities such as dedicated workshops. Capacity development and training are important in improving motivation and avoiding high staff turnover. Ensuring staff welfare is also key for the effective functioning of asylum administrations.



### Related EUAA publications

EASO, [Practical guide on the welfare of asylum and reception staff – Part I: Standards and policy](#), September 2021. This practical guide supports managers in preventing, reducing and handling occupational strain among staff working in the asylum context.

EASO, [Practical guide on the welfare of asylum and reception staff – Part II: Staff welfare toolbox](#), September 2021. Part II proposes practical tools, exercises and capacity-building activities to meet staff well-being standards.

The principles described above can be formalised through the introduction of quality management systems. Organisations can engage in quality assurance activities without having a quality management system. However, having a quality management system can take asylum administrations farther in terms of improving their performance and processes.

Adopting a quality management system is a management approach that aims to make quality management activities more systematic, comprehensive and continuous. A quality management system can be designed and implemented in an asylum administration by means of a project. The ultimate goal of the system is to improve an organisation's performance continually and sustainably <sup>(21)</sup>. In doing so, the quality management system contributes to increasing the organisation's maturity over time.

<sup>(20)</sup> See, for example, the EUAA training modules on personal interviews and evidence assessment.

<sup>(21)</sup> According to ISO 9001, a quality management system is a structured and formalised system that consists of documented policies, processes, responsibilities and procedures necessary for an organisation to provide products and services and operate in a way that meets the needs and expectations of interested parties.



This guide does not discuss quality management systems in detail. However, in the following box you will find key elements that should be considered when administrations plan to introduce a quality management system for the asylum procedure, in particular the examination process.



### Quality management system: main components and success factors

**Fit for purpose.** Any quality management system should be tailored to the relevant asylum administration's set-up and services provided, and should use the organisation's language.

**Senior management's commitment.** Senior management must set the tone of the quality management system activities from the start. At the same time, embedding the practice of regular reporting by management on the implementation of the asylum procedure and the performance of associated processes is key. Regular review by senior management of the results achieved by the system and the required preventive and corrective actions are also indispensable components of a successful quality management system.

**Continuity.** Quality management system activities are not one-off activities. Instead, their aim is to ensure the continual improvement and learning of the organisation through the periodical monitoring, assessment and review of the system.

**Effectiveness.** The quality management system must be able to demonstrate a positive impact by improving the performance of the administration's processes in delivering the intended value-adding results (and not just on paper).

**An up-to-date documentation system.** This can be a quality manual or similar documentation that describes the administration's quality management system.



## Key points from Chapter 1

The outcome of having the right quality measures in place is a fair and efficient asylum procedure that is conducted in a transparent manner in accordance with the legal standards laid down in the CEAS.

National asylum organisations' set-ups for quality management functions can vary based on their specific characteristics, such as size and staff number, operating location, infrastructure, administrative culture, legal framework and caseload. Quality management functions can be fully centralised or partially decentralised. Each set-up has its own advantages when implementing quality management activities and challenges that need to be mitigated.

Certain principles are reflecting the quality culture of asylum administrations:

- management support;
- results-oriented and fact-based management;
- staff involvement;
- learning organisation;
- knowledge management;
- feedback and a positive approach to responding to errors,
- service mentality,
- recruitment, training and professional development.

Adopting a quality management system is a management approach that aims to make quality management activities more systematic, comprehensive and continuous. The ultimate goal is to improve organisations' performance continually and sustainably.





## 2. Consultation mechanisms

Asylum administrations need effective processes for internal consultation to ensure the quality of personal interviews and decisions, given the importance of the individual assessment and the key role that the case officer plays in carrying out this examination. These are all the more important owing to the complexity of the examination procedure, the wide diversity of asylum claims and the often quickly changing circumstances in applicants' countries of origin.

Consultation mechanisms refer to practices embedded in the organisation that enable open dialogue within an administration on a daily basis. People working for the administration should feel safe to ask questions, to give and ask for advice, and to share their concerns and ideas as well as be open to receive new information and feedback.

A **consultation culture** can be developed by systematically putting in place mechanisms that ensure regular dialogue. Such mechanisms can be reviewed regularly to continually identify possible ways to improve them. Quality monitoring and continuous consultation within an administration and with external stakeholders can lead to the creation of new or adapted quality assurance measures.



Consultation mechanisms are concrete measures aiming to implement the organisational principles introduced in [Section 1.4. 'Organisational principles for an effective quality culture'](#), including employee involvement, a service mentality and learning through discussion and feedback. To this end, consultation is intended to continuously address quality considerations during the interviewing and decision-making processes.

This chapter introduces a set of consultation mechanisms that can assist in ensuring the quality of personal interviews and first-instance decisions. The mechanisms are intended to complement each other. It should be possible for administrations to apply them in combination depending on their needs. They are to be applied taking into account the national context and should be adapted accordingly where necessary.



Keep in mind that in an asylum context the confidentiality of the applicants for international protection needs to be ensured, for example when personal information relating to applications is used or shared <sup>(22)</sup>.

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<sup>(22)</sup> In addition to the confidentiality specific to an asylum context, the general data protection rules apply. See [Regulation \(EU\) 2016/769](#) of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation).



## 2.1. Supervision and mentoring

Supervision and mentoring aim to ensure that tasks are carried out in accordance with the agreed standards. They ensure that case officers are provided with practical advice and regular feedback during their daily work and form the first line of quality assurance.

**Supervision** refers to the formal responsibility for ensuring that tasks are carried out efficiently and correctly in accordance with the law and internal guidelines.

**Mentoring**, or coaching, focuses on enhancing case officers' skills and knowledge by means of listening, explaining, clarifying and giving examples.

Supervision and mentoring often go hand in hand, and both contribute to achieving and maintaining the standards set in the asylum procedure. A supervisor can also provide mentoring as part of their tasks. Several asylum administrations also have team leaders who assume responsibilities related to supervision, such as ensuring that the law and internal guidelines are implemented correctly. Team leaders may also assume mentoring functions.

Supervision and mentoring are key tools to enable case officers to become more independent as they gain experience. New case officers need a lot of real-life examples of and advice on how tasks should be carried out. As their experience increases, the supervisor or mentor can shift to a coaching role, which eventually leaves the initiative for seeking advice increasingly to case officers.



Supervising and mentoring also contribute to the prevention, detection and reduction or handling of **occupational strain** through one-on-one discussions, feedback sessions and the promotion of self-care <sup>(23)</sup>. Case officers are expected to fulfil quantitative targets, draft well-substantiated decisions and interact with applicants who are not cooperative or who have lived through traumatic personal experiences. Such long-term exposure can lead to the secondary traumatisation <sup>(24)</sup> of the case officer and influence their ability to conduct personal interviews and draft decisions objectively and impartially, which may affect the quality of outputs.

### Practical examples of how supervision and mentoring can contribute to quality improvement include:

- providing advice to case officers during breaks in interviews;

<sup>(23)</sup> For more information on how mentoring can contribute to case officers' well-being in addition to self-care, see EUAA, [Practical guide on the welfare of asylum and reception staff – Part II: Staff welfare toolbox](#), September 2021, Section 2.5 'Self-assessment: burnout test', pp. 20–21.

<sup>(24)</sup> Secondary traumatisation, also known as vicarious trauma, can be described as an intense reaction and experience of trauma symptoms by people who are exposed to someone else's traumatic experiences. For more information, see EUAA, [Practical guide on the welfare of asylum and reception staff – Part II: Staff welfare toolbox](#), September 2021, p. 66.



- attending full interviews to provide practical feedback to case officers on aspects that are not visible in the interview transcript, such as the officer's communication with the applicant and the atmosphere created in the interview;
- providing thorough feedback to case officers, in writing or orally, on draft decisions as part of the process of approving decisions;
- discussing matters that cause stress at work with case officers, including through one-to-one discussions.



### Good practice

In the Netherlands, new case officers are allocated to a location where they are trained in groups of maximum 12 people before they start working in regional offices. After a theoretical training session, they examine applications for international protection that are suited to their level of knowledge, which become increasingly complex as they gain experience. A mentor follows their work closely.

Once their knowledge of conducting personal interviews and drafting decisions is at an appropriate level, they manage the same caseload as they would in the regional office. After a one-year induction period, case officers are considered nearly fully qualified. They join a regional office and are expected to manage applications independently according to the existing practices, such as the four-eyes principle or consultation with senior case officers.

## 2.2. Four-eyes principle

The four-eyes principle refers to a practice whereby at least one person other than the case officer reviews the draft decision on an application for international protection.

The main reason for applying the four-eyes principle is the high impact of asylum decisions on the applicant's life. The decision-making process is complex. Applying the principle reduces the risk of bias and errors during the individual assessment, as it enables case officers to obtain a second opinion and gives them the opportunity to make the necessary changes to a decision on an individual application before it is issued.

It is recommended that the four-eyes principle is applied to all decisions. To ensure the efficiency of the decision-making process, the need and depth of the review can differ depending on the experience of the case officer and the complexity of the case. For example, for more experienced case officers and/or less complex cases, it may be sufficient to review the decision only, without reviewing the interview transcript.

The four-eyes principle is often applied by team leaders or supervisors, who review decisions that are drafted by the case officers prior to approving them. However, it can also be



implemented through a peer review, in particular for more experienced case officers. The four-eyes check can be complemented with a centralised review by management to ensure the harmonisation of decision-making practices by those who are directly responsible for implementing the policy.

## 2.3. Regular consultation

Asylum administrations function in a rapidly changing environment in which new case-law, policies and applicants from different countries of origin require continuous adaptation to changes. Regular consultation within an administration and between the administration and external stakeholders ensures that the asylum administration is ready to respond to any changes. The generation of new ideas and innovative solutions to any challenges encountered is enabled through different types of consultation, for example intervision and communities of practice.

Regular consultation enables discussions within organisations that bring in different perspectives, which serve as a forum for both discussing quality issues and determining solutions to them. Regular consultation and information-sharing can also foster staff's motivation and improve their welfare, as they allow personnel to understand the strategic direction of the organisation and how they contribute to it.

Regular consultation can take place at different levels.

### 2.3.1. Consultation with case officers

Regular consultation among and between case officers and supervisors or team leaders is an indispensable tool for improving the quality of the examination procedure. It is the starting point for the bottom-up communication of new challenges and opportunities for improvement. It provides a forum for colleagues to discuss common problems with their peers and immediately identify solutions. It also enables supervisors and team leaders to explain and discuss new policies, strategies and priorities, and possible related quality support tools that could have implications for the examination of applications.

Consultations between case officers and supervisors or team leaders typically involve case officers from the same team or branch office, together with their direct supervisor or team leader. The consultations can also involve case officers examining applications from the same country of origin or working on the same special procedure. It is advisable to regularly invite specialists from the same organisation to these meetings, for example a vulnerability specialist, COI specialist, exclusion specialist or legal specialist, depending on the advice case officers need considering their caseload.

Case officers can often identify the kind of support they need and where there may be gaps in the practical tools that are available to them. In consultations involving case officers, these needs and gaps are discussed. Team leaders are often responsible for ensuring the quality of interviews and decisions within their team, so that they can function as a bridge between the case officers and management.



**The consultations can, for example, discuss:**

- gaps identified by case officers in quality support tools and proposals to address them;
- the allocation of case files and division of workload;
- training needs;
- challenges related to interviews and decisions that repeatedly arise in the team and measures that address these challenges;
- findings stemming from monitoring the quality of interviews and decisions and other feedback that relates to the quality of interviews and decisions;
- strategies and priorities of the organisation.

**Intervision as a type of consultation**

A specific type of consultation that can be used among case officers is intervision. It is a form of knowledge development in a small group that shares a common challenge or problem. The core feature is mutual support and consultation between equals. It is an opportunity for professionals and colleagues to use the expertise of others to help them to gain valuable insights.

Intervision can help, for example, in:

- dealing with issues, including problematic situations;
- providing insights into case officers' personal habits and patterns that could influence their work with applicants for international protection;
- enabling communication between different professionals and creating a shared understanding of inputs from different disciplines on the work of case officers.

Group discussions often consist of approximately five to eight participants. Together, they discuss a problem that has been put forward by a participant. Intervision is not primarily intended to solve the problem; instead, the group members encourage each other to find solutions by asking the participant who suggested the problem questions. These should help the person to develop a new way of thinking in order to gain insights into the problem and the challenges linked to it <sup>(25)</sup>.

### 2.3.2. Interdepartmental consultation

For administrations that consist of several branch offices, departments or units that deal with the examination of applications for international protection, interdepartmental consultation refers to discussions between these sections of the administration.

Interdepartmental consultation is key to upholding agreed standards and promoting a quality culture. It contributes to the development of a common approach to conducting interviews

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<sup>(25)</sup> For more information on intervision and ways to implement it, see EUAA, [Practical guide on the welfare of asylum and reception staff – Part II: Staff welfare toolbox](#), September 2021, Section 3.1 'Intervision', pp. 23–29.



and drafting decisions by facilitating the adoption of and updates to quality support tools but also by sharing good practices and ensuring that quality support tools are implemented consistently in practice.

#### **Consultations can, for example, discuss:**

- quality issues and training needs that are identified in quality monitoring;
- the adoption of new or updated policies and quality support tools, and ensuring their harmonised implementation;
- ways to ensure that standards are applied consistently throughout the administration.



#### **Good practice**

To reduce the risk of divergence in interviewing and decision-making practices between units or branch offices, it is good practice to complement interdepartmental consultation with the regular cross-review of interviews and decisions. This may be conducted, for example, by decision-makers reviewing and approving decisions from other units or branch offices. The results of consultations can be discussed during interdepartmental meetings.

Interdepartmental consultation can take many forms. For example, team leaders from different units or branch offices can meet regularly to discuss challenges and issues that are brought to management for further reflection. It is good practice to focus interdepartmental meetings on specific themes, to allow better preparation and more in-depth discussions.



#### **Community of practice as a type of consultation**

A specific type of consultation among departments is a community of practice. It is a form of knowledge development involving a group of people who share a concern about or a passion for something they do, enabling them to learn how to do it better through regular interaction.

A community of practice can help, for example, in:

- capturing and sharing ideas and know-how;
- solving problems;
- disseminating good practices;
- generating new ideas and practices.

A community of practice is intended to complement existing organisational structures to stimulate knowledge-sharing, learning and change. It may be organised as a working group, a cross-functional group or a group focused on a specific theme or process. People in communities of practice share their experiences and knowledge freely and therefore do not



necessarily have an agenda for the meetings. The way in which the community is organised in practice will depend on the needs of an administration. Before creating a community of practice, it is beneficial to identify communities that could enhance the administration's strategic capabilities. A community of practice may fulfil different purposes or functions; for example, best practice communities may focus on developing and disseminating best practices and guidelines; knowledge-stewarding communities may focus on organising, managing and maintaining a body of knowledge; and innovation communities may focus on creating ideas, knowledge and practices. It is often beneficial to include participants who have the ability and passion to develop the administration's core competences <sup>(26)</sup>.

### 2.3.3. Consultation with external stakeholders

Consultation with external stakeholders who have expertise in providing legal counselling and support to applicants will provide concrete suggestions to further improve procedures. Involving external stakeholders widens the perspective of consultations and can help to identify challenges that are not immediately visible to the administration. Consultations can be held with dedicated organisations, including specialised civil society organisations, government agencies and international organisations, or directly with groups of applicants, depending on what kind of advice the asylum administration seeks through consultation.



#### Good practice

In addition to establishing regular consultations with dedicated organisations, feedback can be gathered on an ongoing basis. For example, applicants can be given the opportunity to provide anonymous feedback after their personal interviews by filling in a short questionnaire. The responses can be compiled and analysed at certain intervals to determine if measures should be taken to improve the interviews based on recurring feedback.

It is equally important to establish consultations with participants in the asylum procedure to ensure the flow of information. The participants can be internal or external to the asylum administration depending on the national set-up. They include authorities responsible for the registration/lodging of asylum applications, Dublin units, reception authorities, and courts and tribunals. Regular consultation aims to increase the end-to-end efficiency of the entire asylum procedure by exchanging information in relation to procedural practices and specific applications. Actions of one partner in the chain can have a far-reaching impact on the work of others, of which the first partner may not always be aware. For example, reception authorities may have information in relation to a specific application that is relevant to the determining

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<sup>(26)</sup> For more information on communities of practice, see, for example, Harvard Business Review, [Communities of Practice: The organisational frontier](#), 2000.



authority and that could be shared if the consent of the applicant is obtained. If such information is not shared, it may come up only in appeal procedures, leading to unnecessary loops in the procedure.



### Good practice

A digital case file management system can facilitate information exchange among relevant participants in the asylum procedure in relation to specific applications. When information relevant to an asylum application can be uploaded directly to the same database by different authorities, information flows become more efficient and reliable. Through user access management, it is possible to limit access to certain data only to participants who are competent to handle them in accordance with the law and need to know the information.

## 2.4. Help desk

A help desk is a centralised service provided by specialists through which they support case officers by responding to their questions on particular issues relating to the examination of applications.

A help desk may directly devise responses to requests that are within their area of competence or filter case officers' requests for support according to topic and refer them to specific units in the asylum administration (such as those with legal expertise or specialising in COI research).

An advantage of a help desk is that it provides case officers with a one-stop shop for their questions. Such centralisation allows the help desk to understand needs across the organisation and determine if, beyond providing an answer to the requester, new quality support tools need to be developed or existing tools updated. It also allows thematic experts to consult each other before providing answers to questions.

It is important to ensure that experts themselves have access to the relevant training and resources to enable them to fully understand their role in the asylum procedure and to keep their knowledge up to date.







## Key points to remember from Chapter 2

Consultation mechanisms assist in ensuring the quality of personal interviews and decisions and can be developed and updated based on the outcome of monitoring procedures and ongoing dialogue in an asylum administration.

Owing to the wide diversity of asylum claims, asylum administrations need effective processes for internal consultation. This consultation can involve:

- supervision and mentoring;
- the four-eyes principle;
- regular consultation;
- help desk.

By putting consultation mechanisms systematically in place, it is possible to build a consultation culture that ensures regular dialogue. This can enable the ongoing identification of quality issues and the design of solutions for them.



### 3. Quality support tools

Quality support tools assist case officers in their daily work when conducting personal interviews and drafting decisions. They can consist of guidance, among other, standard operating procedures (SOPs), templates, example interview transcripts and decisions and key case-law.

The advantage of quality support tools is that they ensure that all case officers are provided with the same guidance and instructions, which are formally approved by management and available to case officers at all times. To this end, they are intended to pre-emptively address quality objectives for the interviewing and decision-making processes.

The tools that are presented in this chapter are intended to complement each other. It should be possible for administrations to apply them in combination depending on their needs. They are to be applied taking into account the national context and to be adapted accordingly where necessary.

Quality support tools can be **developed** by specialised units, such as the quality, legal or relevant operational unit, but can also be created and developed by experienced case officers. Regardless of the unit that develops the tool, it is important to ensure its consistency with other tools by carrying out interdepartmental consultations and to seek endorsement from management before finalising it.

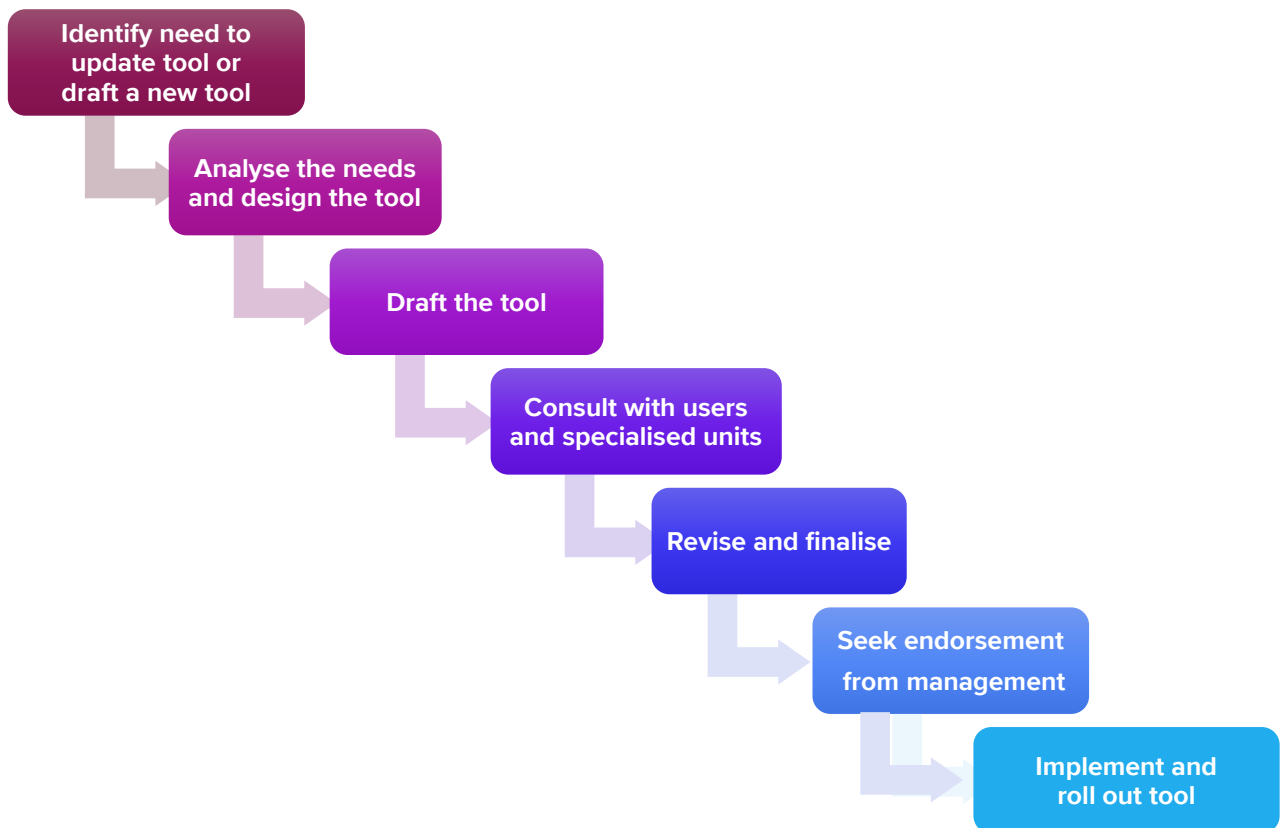


When creating or developing quality support tools, it is good to keep in mind that, beyond being legally compliant, they should be well structured and clear. In addition, their scope, purpose and target audience should be well defined. It is also advised that the tools are initially reviewed or tested by their users to determine if they are easy to follow, contain all the relevant information and are applied correctly in practice. For tools that require specialised knowledge that is not available within the office implementing them, it may also be necessary to consult external stakeholders to gather their inputs.

Quality support tools are often developed and updated as a result of needs identified through quality monitoring or consultation mechanisms. In addition, changes in the context of the asylum procedure, including in the law, case-law, policy and the competences of relevant authorities, can be a reason to develop and/or update tools.

The process of developing and updating a quality support tool is continual (see Figure 6). In this sense, the needs identified following the implementation of the tool set the tone for possible future updates.



**Figure 6. Process for developing and updating a quality support tool**

When a tool is ready, consider the best way to **implement** it among its target audience(s). For example, a specific distribution plan can be put in place to disseminate and communicate the tool in practice, which can include training sessions on how to use the tool and internal circulars introducing the key aspects of the new or updated tool, by making use of relevant consultation mechanisms.

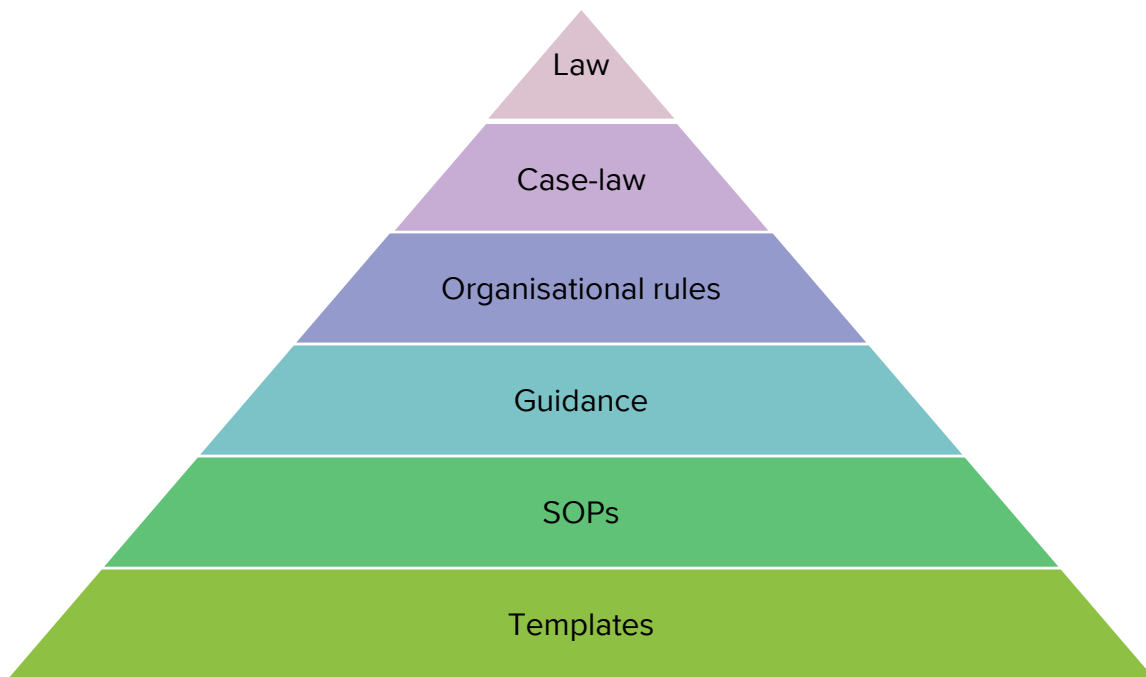
When distributing the tool, case officers should be reminded that, although tools are created to guide them in conducting interviews and drafting decisions, every decision must be taken on an individual basis based on the facts that are presented in the application. It is therefore recommended that the case officer first focuses on the applicant and their reasons for applying for international protection, and only after this chooses the tools that are relevant for the application.

To ensure **consistency between different quality support tools**, it is helpful to establish the relations between them in a document hierarchy. A document hierarchy organises documents according to how much importance and authority they have. For example, an organisation's document hierarchy puts law and jurisprudence at the top because they are binding to the administration. This is followed by organisational rules that are decided at the senior management level and relevant for the entire administration and below these rules are the quality support tools that are intended as technical guidance for the operational level. In other words, the more authoritative documents are at the top of the hierarchy, while less authoritative documents are at the bottom.



When a document close to the top of the hierarchy is developed or updated, it should be consistent with documents above it in the hierarchy. Consequently the documents below it in the hierarchy need to be updated accordingly. For example, when there are changes to the law and jurisprudence or policies, strategies, internal rules and priorities, the quality support tools should be updated accordingly. Quality support tools can be organised in such a way as to establish a hierarchical relation between them that reflects the overall document hierarchy (see Figure 7).

**Figure 7. Example of an organisation's document hierarchy**



Quality support tools should also be **easily accessible** to their users, and it should be clear which document is the most recent version. A document control system can assist in ensuring that the tools are organised, stored and distributed systematically throughout their life cycle.





### Document control

All quality support tools should include information that is essential for version control. This information often includes:

- a unique document ID;
- a version number;
- the date when the document was released;
- the latest date by which the document is to be reviewed;
- details of the entity or person(s) responsible for keeping the document up to date (document owner);
- the name(s) of the person(s) who drafted or updated and approved the document.

Outdated versions should be clearly marked and filed accordingly. The document management system should also consider the retention periods for different document types (i.e. how long they should be retained as records) and the procedure to be followed for destroying/disposing of documents that no longer need be retained or for maintaining documents that should not be disposed of.

Tools should be easily accessible to case officers in accordance with their needs and relevant data protection rules. It is recommended that quality support tools are stored in one location to ensure that tools that are interlinked can be easily found.

The following sections present a set of tools that are intended to complement each other. Their use is to be considered in the context of the national circumstances and to be adapted accordingly when necessary.

## 3.1. Guidance

Guidance refers to rules and advice on and real-life examples of how relevant standards are to be understood and implemented in practice. Guidance gives direction on the approach to be followed during the examination of applications for international protection, on the way in which legal concepts need to be implemented and on the policies to be applied.



Guidance aims to ensure the consistent and correct implementation of relevant standards and can harmonise the way legal provisions are applied across offices. At the same time, it shows how these can be implemented in the most efficient way.

For example, guidance can advise on the circumstances in which the need for international protection can be considered as established. This enables the more consistent and efficient application of the relevant standards.



There are different types of guidance. A guidance document issued by an administration can combine several types of guidance.

### Legal guidance

Legal guidance instructs how the law should be interpreted in view of the legal principles, broader legal framework, relevant case-law and any documents clarifying the intent of the legislators. For example, guidance should consider how asylum law can be interpreted in relation to the general legal principle of proportionality and how it can be applied in the context of fundamental rights or data protection.

### Country-specific guidance

Country-specific guidance outlines how a specific situation in a country of origin can be assessed in terms of the legal provisions that determine the conditions in which international protection can be granted. For example, it can outline which circumstances may heighten the risk of persecution against a religious group in a specific country.

### Methodological guidance

The guidance may provide an order in which an assessment can or should be carried out. For example, guidance on how to conduct the evidence assessment may stipulate that all the material facts need to be identified, and all supporting elements linked to each of the material facts, before the internal and external credibility assessments are carried out. Methodological guidance can also provide examples of factors that should be considered when examining applications and instructions on how to do so. For example, where case-law provides for certain elements to be assessed if claims relate to sexual orientation, guidance may provide a list of aspects that should be explored.

Any kind of guidance can be supported by elements such as summaries and visual presentations of key content. These formats aim to make it easier to apply the guidance during personal interviews or when drafting decisions.

## 3.2. Standard operating procedures

SOPs are prescriptive instructions on how a procedure should be implemented in practice. They provide step-by-step instructions on the order in which actions are to be completed and by whom in a particular context. Therefore, their aim is to ensure that the procedure is systematically implemented and documented according to the relevant standards and that everyone knows their role in the process across the asylum administration and its different branch offices.





SOPs can provide instructions, for example, on how to plan a personal interview, including how to invite the applicant to interview, book an interview room and book an appropriate interpreter.

As procedures can involve several steps, and participants from inside and sometimes outside the asylum administration, SOPs can include instructions relating to the following, depending on their content:

- what should be done;
- who should do it;
- which steps are to be taken and in which order;
- when it should be done.

SOPs often take the form of **manuals or process descriptions**. It is a good practice to accompany SOPs with checklists or flowcharts that present the steps in a more concise and visual manner than the SOPs, making them easier to apply in practice.

During the development of SOPs, it is recommended that the units or departments that carry out the processes are consulted to ensure that all aspects of the implementation of the asylum procedure and the interrelations between different steps in the procedure are taken into account appropriately. It is also recommended that the legal basis of the SOPs is included in the document.

### 3.3. Templates

A template provides a standardised structure and format for a document type that is used frequently and by different staff members. It aims to make conducting interviews and drafting decisions more efficient by setting out key elements that have to be included in the document.

Interview templates can include general templates, which are intended to be used for all personal interviews, and/or tailored templates, which are used for specific types of interviews, such as those with applicants (with specific profiles) from safe countries of origin. Similarly, decision templates can include tailored templates for certain decision types, such as those made in admissibility procedures or for applicants from safe countries of origin.





Particular attention should be given to draft templates to allow the individual assessment of each application. This could be done by focusing on templates that help to structure the interview or decision, without trying to over-regulate the assessment process. Detailed information or steps in the process that may not apply to all applications, for example relating to the credibility assessment, should be avoided. The templates can also include reminders of the guidance, such as the elements to be covered in the individual examination of each application. At a practical level, this can be supported by clearly indicating the parts of the template that need to be adapted before finalising the document, for example by presenting them in square brackets. Cases officers can also be reminded in the template that each application should be examined individually.

The templates may include various elements, such as the following.

The **document form** includes the standard elements that ensure that all the relevant information is included in the document. This includes the document title, to whom the document is addressed (with fields to fill in the applicant's personal details), when the document was created/issued (the date and time of the personal interview or the date the decision was issued), signatures and references to relevant legal provisions.

The **document structure** is the steps that the case officer needs to follow when conducting an interview or drafting a decision. For example, an interview template can include details about opening the interview, asking for a free narrative and closing the interview.

**Information items** are relevant pieces of information that should be provided to the applicant, which can be provided in writing in the template that is handed out to the applicant. For example, information that is relevant to the applicant can include what is expected from them during the interview, the steps following the interview and how to appeal a decision.

**Content** refers to proposals in relation to the substance of an interview or the assessment of a decision. For example, the interview template can include themes that are to be explored when interviewing applicants with certain profiles. The decision template may include standard sentences in relation to the situation in the applicant's country of origin and a risk assessment and legal assessment with instructions to be tailored according to the individual assessment.



Templates can be accompanied by a simple tutorial, created by making a recording of your screen, that explains their different components. For example, the tutorial could explain how to use different functionalities of a template, by demonstrating them on a computer screen.





**Good practice**

Templates that are embedded in digital platforms can automatically find relevant data and fill in the relevant fields, such as the applicant's personal details; information that is specific to applicants of certain profiles, such as children; and messages to the applicant that are specific to the template type, for example the applicant's rights and obligations. Digital platforms may also allow the use of templates that can be tailored to specific applicant profiles by choosing relevant information from a set of options.

### 3.4. Selection of relevant case-law

A selection of relevant case-law can provide useful examples for the examination of applications. Such a selection could include, in particular, case-law that is central in guiding the national practices in relation to applicants with specific profiles or from certain countries. Case-law can often trigger changes to existing quality support tools or the development of new tools.

Any national, EU or European Court of Human Rights case-law that is added to the selection should be communicated to the case officers, for example by providing them with a summary of the judgment highlighting the key takeaways. In particular, when an appeals court concludes that a procedural fault or fault in the interpretation of the law has occurred, it is recommended that this is communicated to all case officers and that they should be provided with information on how the law should be correctly followed and interpreted.

**Good practice**

It is good practice to compile relevant case-law related to a specific country of origin or profile of applicant that outlines the main considerations that are put forward in the judgments. Such compilations can be made available, for example, in the form of a fact sheet, analysis or digital database that is cited in the relevant guidance.

An analysis of new case-law can be conducted as an ongoing process or periodically, for example on a quarterly basis, to ensure that the most recent case-law is considered.



## 3.5. Example interview transcripts and decisions

Example interview transcripts and decisions are a selection of interviews and decisions that are considered examples of good practice. They aim to help case officers to find specific advice that is not available in other tools, as they provide examples of cases similar to those they are currently examining.

Example interview transcripts and decisions provide the reasoning for or exploratory questions related to specific profiles or countries of origin of applicants, which can be useful in particular for new case officers. They also allow new case officers to see how an interview and decision can be structured, and what kind of language should be used.

It is important to select example decisions and interview transcripts carefully so that they reflect best practices. An explanation can be given for why each decision or transcript has been selected and/or which parts of the transcript or decision are useful. The transcripts and decisions should also be anonymised so that all case officers can be granted access to them.

The examples of interview transcripts and decisions can be made available in different ways. When a large number of examples are available, it is recommended that a search function is included, for example in the form of a repository. Decisions and interview transcripts could be tagged with keywords or organised into categories to allow the case officer to search through them by profile or country.



### Key points to remember from Chapter 3

Quality support tools assist in ensuring the quality of personal interviews and decisions and can be developed and updated based on the outcomes of monitoring and ongoing dialogue in an asylum administration.

The tools offer concrete assistance to case officers in conducting personal interviews and drafting decisions. The tools should be kept up to date and consistent with other tools through a clear development and updating process and using a document hierarchy. The quality support tools can include:

- guidance;
- SOPs;
- templates;
- a selection of key case-law;
- example interview transcripts and decisions.

When disseminating quality support tools, it is necessary to remind the case officers that each application must be assessed individually based on the facts that are presented in the application.



## 4. Monitoring quality

As detailed in Chapter 1, fairness, transparency, efficiency and respect for the legal framework are to be ensured at all times to achieve quality in the asylum procedure. To this end, monitoring the quality of the asylum procedure is crucial and should be an ongoing activity that allows the identification of the strengths and weaknesses of organisations. Through monitoring quality, it is possible to determine whether or not organisational goals are being met and whether the measures put in place to ensure quality are achieving their objectives.

The focus of this chapter is twofold:

- to present the methodology and steps for establishing a process for monitoring quality in the asylum procedure;
- to present the activities that provide inputs based on which quality can be monitored in an asylum administration.

The aim of this chapter is to outline a step-by-step methodology to establish and carry out quality monitoring, integrated into the PDCA cycle (described in Chapter 1).

The focus of this chapter is on monitoring the quality of personal interviews and first-instance decisions. However, the practices, standards and methodology presented can be applied to other stages of the asylum procedure.

**Figure 8. Monitoring cycle**





It is important to stress that the identification of needs can feed into each step of the monitoring cycle. The needs identified form the basis of the monitoring cycle and keep it in continual motion.

These needs are related to the functioning of the asylum procedure, in particular personal interviews and first-instance decisions.

The needs can arise for many reasons such as:

- a change in the legislation or the situation in the country of asylum;
- new/challenging profiles of applicants;
- the hiring of new case officers;
- new jurisprudence that has been issued;
- new/stricter productivity targets;
- an unclear situation in applicants' countries of origin;
- shortcomings that have been spotted through different audits, for example a quality review.

## 4.1. Setting up standards and indicators (for personal interviews and first-instance decisions)

The methodology for the monitoring mechanism should include the setting of objective criteria against which the monitoring is carried out. For this reason, the administration needs to identify which legal and operational standards will be monitored and to develop, for each of these standards, indicators on the basis of which it can be observed, assessed or measured if and/or to what extent the selected standards are met.

### 4.1.1. Legal standards

Legal standards are the provisions set out in the different legal instruments of the CEAS, as well as the national and international refugee law and human rights law.

For example, Directive 2011/EU/95<sup>(27)</sup> sets out the standards for the qualification of third country nationals or stateless persons as beneficiaries of international protection and for the type of protection granted, while Directive 2013/33/EU (APD (recast))<sup>(28)</sup> sets out the standards for the common procedures for granting and withdrawing international protection.

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<sup>(27)</sup> [Directive 2011/95/EU](#) of the European Parliament and of the Council of 13 December 2011 on standards for the qualification of third-country nationals or stateless persons as beneficiaries of international protection, for a uniform status for refugees or for persons eligible for subsidiary protection, and for the content of the protection granted (recast) (OJ L 337, 20.12.2011).

<sup>(28)</sup> [Directive 2013/32/EU](#) of the European Parliament and of the Council of 26 June 2013 on common procedures for granting and withdrawing international protection (recast), (OJ L 180/60, 29.6.2013).



Member States have incorporated Directive 2011/EU/95 and the APD (recast) into national legislation and into their organisational set-up and processes in the asylum procedure.

### 4.1.2. Operational standards

Operational standards relate to the practical implementation of the relevant provisions of the legislation on asylum and are therefore based on legal standards. Their overall objective is to ensure that the asylum procedure is implemented fairly and efficiently, in full respect of the relevant legal provisions.

In order to be comprehensive, the operational standards are developed from three different perspectives: the perspective of the process manager (to ensure efficiency and efficacy), the perspective of the legislator (to ensure legality) and the perspective of the applicant (to ensure fairness and transparency).

The standards should be developed by experts who have extensive experience of working in the relevant area.

### 4.1.3. Indicators

Measuring how an operational standard is achieved makes it possible to accurately determine to what extent a standard is being met and how this changes over time. Indicators are used to measure whether a standard has been achieved. Therefore, an indicator is considered a tool for measuring compliance with a standard. Indicators can be quantitative or qualitative. In setting up indicators, the RACER <sup>(29)</sup> criteria should be applied (see Table 1).

**Table 1. RACER criteria**

Criteria	
Relevant	Closely linked to the objectives to be reached
Accepted	Accepted by staff, stakeholders and other users
Credible	Unambiguous and easily interpreted by non-experts
Easy	Feasible to monitor and collect data at a reasonable cost
Robust	Not easily manipulated

<sup>(29)</sup> For more information on the RACER criteria, see European Commission, *Improving monitoring indicators system to support DG Competition's future policy assessments*, Publications Office of the European Union, Luxembourg, Section 2 'Methodological approach', pp. 9–10.



Indicators related to efficiency and timeliness are often easier to quantify than other quality indicators because they can be measured based on information available in case management databases. For other indicators, there may be limits to the extent to which they can be objectively quantified.

#### **(a) Quantitative indicators**

Quantitative indicators focus on number of cases and the timeliness of the procedures. These indicators can help to monitor the performance of the organisation at different levels: the individual staff member, the team, the regional office and the administration as a whole. These indicators can be measured by day, week, month or year. Data on quantitative indicators can be derived from the administration's information system. It is important for the administration to set targets for the implementation of each indicator. These targets need to be achievable and the period they cover should be defined.

Below are some examples of quantitative indicators in the context of reviews of the quality of personal interviews and first-instance decisions:

- number of pending cases <sup>(30)</sup>;
- percentage of first-instance decisions issued and/or notified within the legal deadline;
- (average) duration of a process end to end e.g. from the moment of the lodging until the moment when the decision is issued/ notified (throughput time, mostly expressed in days or weeks or months);
- (average) duration of an actual activity conducted by a staff member, e.g. duration of a personal interview (processing time, mostly expressed in hours and minutes);
- percentage of positive and negative decisions of same nationality and/or of similar profiles;
- percentage of cases overturned by the appeals authority.

#### **(b) Qualitative indicators**

Qualitative indicators are often quantified in a binary or ternary manner (yes/no or yes/partially/no). This method of measurement allows the calculation of a score (%) for each indicator and for the entire quality review. These scores allow the observation of trends over time. The indicators can also be weighted according to their importance or relevance.

However, these types of measurements may not allow a more nuanced assessment of quality in the sense of how well the standards are met without other complementary, non-measurable indicators.

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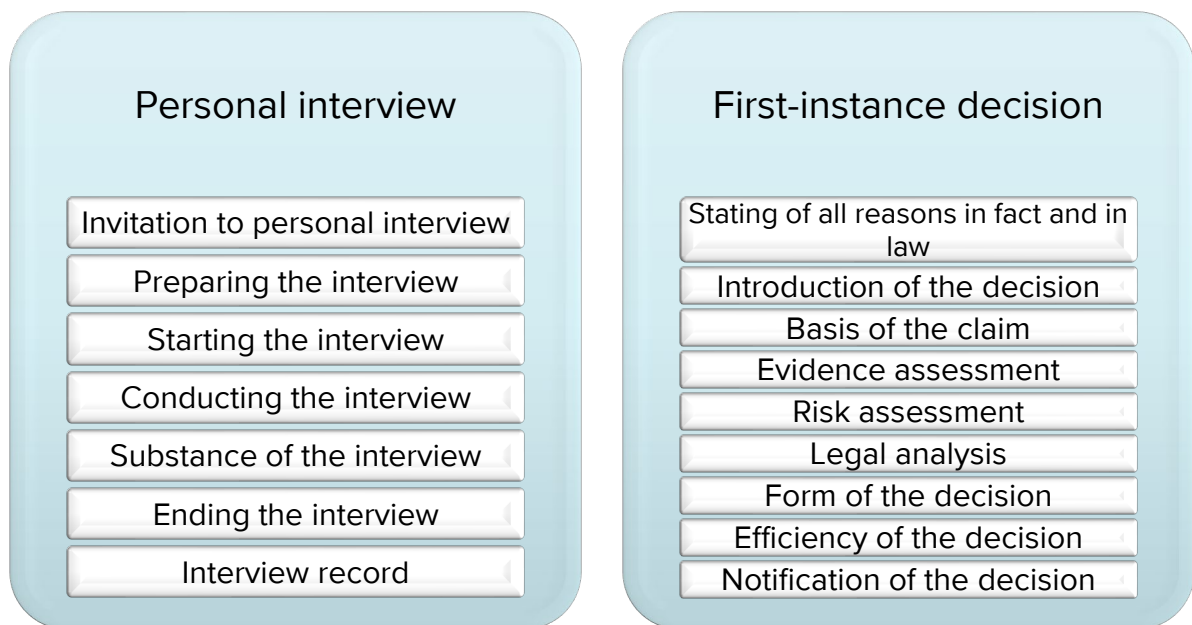
<sup>(30)</sup> In the context of personal interviews and first-instance decision procedures, the term 'pending cases' refers to cases in which an interview has been conducted but a decision has not yet been issued.



#### 4.1.4. Standards and indicators for personal interviews and first-instance decisions

The standards and indicators for assessing the quality of a personal interview and a first-instance decision can be related both to the outcome of a process (e.g. an interview transcript) and to the process itself (e.g. the way the interview is conducted). To establish the standards and indicators for a personal interview or a first-instance decision, it can be helpful to break each of the processes down into their main steps and components (see Figure 9).

**Figure 9. Steps and components of a personal interview and first-instance decision**



For each of the steps and components, standards and indicators can be developed with regard to either the output or the process. The standards and indicators used will complement each other to give an overall picture of the quality of the interview and decision-making process.

The periodic review of the standards and indicators is necessary to ensure that they align with changes in the asylum procedure and to improve the framework of standards and indicators based on lessons learned during the quality reviews.



## **EUAA quality assurance methodology**

The European Union Agency for Asylum (EUAA) has developed a methodology for assessing the quality of personal interviews and first-instance decisions. This methodology was incorporated in two practical tools:

- EASO, [\*Quality Assurance Tool: Examining the application for international protection\*](#), March 2021.
- EASO, [\*Guidance on Asylum Procedure: Operational standards and indicators\*](#), September 2019.

The overall objective of the first tool is to provide a common framework for assessing the quality of personal interviews and first-instance decisions in individual cases. The overall objective of the second tool is to support the practical implementation of key provisions of the APD (recast) to achieve a fair and efficient asylum procedure. Each of the two tools includes standards and indicators that were commonly developed and agreed with the EU+ countries and adopted by the EUAA Management Board.

## **4.2. Data collection**

When standards and indicators are set, the means for collecting information and data need to be put in place so that the monitoring process can be established.

The most important starting point is controlling the quality of the data to ensure the reliability and added value of the monitoring methodology. In order to assess whether organisational goals are being met, the data have to be of the right quality in terms of accuracy, reliability and timeliness. In particular, the timeliness of data entry is very important.

The digitalisation and automation of data collection are crucial, and can be advantageous for collecting real-time or frequently available data to support monitoring. For example, a digital system for case handling can provide data on pending cases at any time. It is important to clearly define the data fields of the digital system to avoid misinterpretation and to make sure the information is used for the intended purpose. Data quality measures can be incorporated into the monitoring cycle. Reports on the quality of data or data entry should be made available to management, staff and case officers.

### **4.2.1. Methodology for case sampling of personal interviews and first-instance decisions to be reviewed**

The main resource for monitoring quality in the asylum procedure is the transcripts of personal interviews and first-instance decisions. The personal interview can also be monitored by following the interview in person. Quality review exercises provide a learning opportunity for case officers. The overarching aim is to enhance the quality of the asylum procedure through the review of individual cases, which allows the:





- identification of instances of divergence from quality standards in the examination of cases;
- identification and promotion of good practices from personal interviews and first-instance decisions based on concrete examples;
- improvement of the individual performance of case officers;
- drafting of recommendations to be made at organisational level;
- identification of follow-up actions such as developing guidance, conducting workshops and improving a template;
- identification of training needs at individual level and the need to develop new or improved training modules.

As well as providing individual, detailed feedback to the case officer and team leader responsible for the case reviewed, the outcome of the quality review exercise is crystallised in an anonymised report <sup>(31)</sup>. The purpose of the report is twofold. First, it intends to provide concrete feedback to the case officers (and team leaders), so that they can learn from each other's mistakes and good practices. Second, the analysis of the findings in the report can support management to decide on the necessary improvement measures.

In general, it is recommended that *ex post* quality reviews are conducted to monitor quality – that is, by reviewing cases for which a first-instance decision has been issued. The aim of the quality review is to determine if the processes and (quality improvement) measures that are in place, as discussed in Chapter 2, are sufficient to guarantee the quality of the interview and decision when they are considered to be final. *Ex post* quality reviews also prevent the duration of the asylum procedure from being unnecessarily increased during the period of review <sup>(32)</sup>.

The following parameters can be considered when setting up a methodology for implementing quality reviews.

- The cases to be reviewed should be **randomly selected**, either from the whole caseload, or from a part of the caseload that has been identified as challenging or as a priority (see the point on thematic focus in this list). The selection of cases for review by case officers or team leaders may lead to bias. It is recommended that the cases chosen for the sample are taken from a specific recent time period, so that the feedback received reflects the current situation in terms of quality.
- To gain meaningful insights, the **sample size** needs to be sufficiently large. However, it does not necessarily have to be large enough to obtain statistically significant results, because quality in the asylum procedure needs to be ensured in every case. If it is the intention to monitor trends in quality over a longer duration, the sample must be of a size that allows statistical significance to be detected

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<sup>(31)</sup> The anonymisation aims to protect the personal data of both the applicant and the case officer by anonymising their data as well as any other identifiable information in the file. The anonymisation aims to protect the personal data of both the applicant and the case officer. The anonymisation of the report depends on the national context.

<sup>(32)</sup> One of the downsides of *ex post* quality reviews is that when grave deficiencies are discovered in a case during the quality review, the asylum authority may be obliged to withdraw its initial decision to re-examine the case.



through the extraction of comparable results. This depends on the caseload of the administration.

- The exact **timing and frequency** of the exercises depends on the needs identified, the available resources and the size of the national administration. It is recommended that quality reviews are planned and conducted systematically and periodically, to allow follow-up analyses of previous findings and the timely identification of possible problems.
- Quality review exercises can be **general or have a thematic focus** (e.g. cases of applicants from a specific country of origin, exclusion cases or cases of vulnerable applicants). General reviews allow overall conclusions on the quality of personal interviews and first-instance decisions, while thematic reviews allow a focus on new or particularly challenging situations. It is recommended that thematic reviews are conducted once 'new' concepts or procedures (e.g. the introduction of accelerated procedures) have been implemented in order to follow up on their implementation. Thematic reviews are also recommended when specific needs have arisen during a previous (general) quality review.
- The quality review can be **carried out by** a centralised quality unit, by team leaders or supervisors, or by decentralised quality officers, coordinated by one central officer. In the last case, it is good practice for team leaders, supervisors or quality officers from one unit or branch office to review the quality of cases of another unit or branch office. This can help to create more coherence between the practices of different units and branch offices.



#### Good practice

Whenever possible or required, it is recommended that every case is reviewed by **two quality assessors**. Each assessor should review the case as a whole (the interview and the decision), and then they should meet to discuss and draw conclusions on their findings together.

It is also recommended for **teams** of quality assessors to conduct meetings, for example through the joint assessment of a case, where all assessors would discuss a case and assess it together. This practice supports a uniform approach in review of cases.





### Related EUAA tool

The EUAA's Quality Assurance Tool (see details in [Section 4.1.4. 'Standards and indicators for personal interviews and first-instance decisions'](#)) takes the form of an online application with reporting functionalities. The tool allows several reports to be compared in aggregate, while also providing a statistical overview of the findings. In addition to receiving the quality feedback report, the case officer whose case is reviewed receives a report with comments providing individualised feedback for their work on the specific case (in the interview and/or decision-making process).

## 4.3. Assessment and analysis

The next step after setting the standards and indicators and collecting the data for a quality review and a review of the standards and indicators related to the asylum procedure is to assess the findings. The indicators can be assessed by considering the following questions.

- Is the indicator met?

Based on the findings, the assessor(s) will decide if the indicator is met or not. The indicators can be related either to the procedural aspects of the personal interview or the first instance decision or to the content of the interview and the decision. For example, when assessing an indicator such as 'the case file is available to the case officer sufficiently in time before the interview to allow for the preparation of the interview' under the preparation of the interview, the assessor will decide whether this indicator is met or not; when assessing an indicator such as 'the decision correctly identifies and assesses the risk on return (who, what and why)' under the risk assessment of the decision, then the assessor has to assess if this activity is done correctly and thus if the indicator is met.

The answers to the previous question, when assessing an indicator, can be the following.

Yes	Indicator is met	Indicator was applied correctly
Partially met	Shortcoming is identified	Minor error
No	Risk is identified	Significant error
Not applicable	Not applicable	Not applicable

Possible answers could be limited for some indicators, due to their nature and applicability. For example, an indicator could be only met or not met, but not 'partially' met. As some indicators apply only in some cases or in specific conditions, the option 'not applicable' must be available.

There is a need for more detailed guidance on how the selected standards and indicators should be assessed to ensure that consistent and harmonised assessments are made by the



various quality reviewers. The application of the four-eyes principle by quality reviewers and regular cooperation to discuss and clarify how the indicators should be assessed will also support a consistent approach.

## 4.4. Feedback and reporting

Providing feedback after a quality assessment is essential. This feedback can be for individual case officers, or for a team or a branch office as a whole. It needs to be provided to the case officers and to their managers. Feedback for teams and branch offices addresses more comprehensive and cross-cutting feedback related to the functioning of the whole system, based on the combined results of many case officers.

Individual feedback is given to the case officer after a case is concluded i.e. after a personal interview has been conducted or a first instance decision has been issued. The exact manner in which this takes place is decided by the administration. However, some basic principles should be applied. Where individual feedback is given, it is advisable to make sure the focus is on improving the individual's performance rather than solely on identifying their errors. The persons who provide feedback should have a knowledge of how to provide constructive feedback, as the ultimate aim is to help the case officer to understand possible mistakes and good practices and improve the quality of their work in the future. Case officers should also be able to ask questions and clarifications about the feedback received.

Individual feedback allows the case officer to adjust their work practices in a short period of time. The findings of the quality reviews could also be used in coaching and feed into team leaders' discussions with their case officers. The organisation should ensure a culture in which giving and receiving individual feedback becomes standard practice.



**Good practice****Feedback on personal interview and first-instance decisions should:**

- highlight good practices identified in the interview or decision;
- when errors are identified, provide guidance on what would have been the correct approach.
- it is also useful to explain why a certain error has been assessed as minor or significant.

When feedback is provided to improve a case officer's performance, promptness and guidance on how to apply the standards correctly are particularly important in helping to prevent them from making similar errors in the future.

In addition to feedback, one of the objectives of quality monitoring is to provide an overall assessment of the quality of the asylum process for the managers responsible for overseeing the process. This can be done by providing reports based on the quality assessments that take place and the analyses that follow.

Reports can focus on the application of all standards and indicators that were used for the quality assessment or on a specific topic or part of the asylum procedure, such as the credibility assessment or the application of an admissibility procedure, or examine cases involving applicants from a certain country of origin. The completed assessments can be used as a basis for compiling comprehensive periodic reports (monthly, quarterly, yearly, etc.), including follow-up audit reports and flash reports on certain issues of concern.

Reporting gives management in particular the opportunity to gain insight into the overall quality of the specific process that is being assessed and to identify possible weaknesses for which follow-up actions may be needed.

It is important that these reports are disseminated internally to the relevant parties (case officers, team leaders, managers, etc.). They may also be distributed as abridged versions to external stakeholders, for example other migration authorities, the UNHCR or even the public, depending on the content, to increase the transparency of the procedure and strengthen the confidence of external stakeholders in the processes.



## 4.5. Input from different sources for monitoring the asylum procedure

Apart from the outcomes of quality reviews, there are other activities that can provide input for the monitoring of the quality of personal interviews and first-instance decisions. They involve both internal and external stakeholders and complement the quality review reports by providing more comprehensive perspectives.

These activities mainly consist of:

- external evaluations and audits;
- complaint mechanisms for applicants and external stakeholders;
- surveys with applicants;
- second-instance decisions and court decisions;
- input from internal stakeholders.

### 4.5.1. External evaluations and audits

In addition to internal reviews that are conducted by the national authority, external reviews can provide meaningful information on the quality of the asylum procedure. Such reviews can be undertaken as audits, evaluations or assessments and can be conducted independently by external parties. They can be conducted by civil society organisations, specialised consultancy companies or entities responsible for audit control.

The administration needs to decide in which circumstances they should reach out to external evaluators and the advantage of their evaluation. It is also crucial to determine the exact type of review that is needed and assess whether the external evaluator is well placed to conduct this type of review. External reviews may be useful in particular for the review of a process from end to end, the review of processes for cooperating with other stakeholders and the review of the efficiency of processes. External parties may be well placed to question practices that are considered essential or unavoidable within the organisation.

The United Nations High Commissioner for Refugees often collaborates with national authorities in order to assess the quality of personal interviews and first-instance decisions<sup>(33)</sup>. National regulators with monitoring responsibilities can also conduct audits on the asylum procedure. Furthermore, scientific reviewers can provide a third-party assessment. Asylum administrations can also request an external review by partners in the private sector.

National human rights bodies and ombudsman offices often deal with issues related to the fairness and effectiveness of public administrations, including asylum offices. Consulting with these bodies and closely following their work can further strengthen the robustness and functioning of the asylum procedure. Similarly, bodies such as the European Ombudsman or

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<sup>(33)</sup> For more information on the United Nations High Commissioner for Refugees' quality assurance activities, see Refworld, 'Quality assurance' (<https://www.refworld.org/qualityassurance.html>).



other international human rights bodies, although not applicable to Member States, are a useful source of information on how to optimise the asylum procedure.

#### **4.5.2. Complaint mechanisms for applicants and external stakeholders**

A complaint mechanism is a tool that supports the correct implementation of law and guidance and increases the accountability of an organisation. Therefore, it is recommended that a complaint mechanism is accessible to all applicants and external stakeholders, such as lawyers, non-governmental organisations and other administrations involved in the asylum procedure.

National administrations can, by examining complaints that are submitted to them, identify and subsequently resolve any issues or shortcomings in the asylum procedure. Complaints can also highlight whether the applicants and external stakeholders trust the asylum procedure as implemented by the national administrations. Most importantly, complaint mechanisms are a means for applicants to voice any complaints they have regarding the asylum procedure and for the administration to examine these complaints.

For the proper functioning of the mechanism, the administration should define who is responsible for managing it, who has access to it and who is tasked with reviewing the complaints. The set-up of the mechanism needs to ensure the respect of data protection law and confidentiality. The mechanism must stipulate how complainants will receive responses or feedback. It is also important to support the mechanism with a continuous information campaign in order to highlight its existence and explain its purpose, in particular the distinction between the mechanism and appeal procedures. It should be clear to the applicants that the use of the complaint mechanism does not have an impact on the examination of their application for international protection. It is recommended to register complaints and regularly compile a report on the complaint mechanism, including, for example, the number, type and follow-up of the complaints.

##### **Examples from practice**

###### **European Border and Coast Guard Agency**

The complaint mechanism of the European Border and Coast Guard Agency (FRONTEX) allows the submission of individual complaints by people who are directly affected by the actions (or lack of action) taken by staff involved in the agency's activities, and who consider that their fundamental rights have been breached as a result. For more information, see <https://frontex.europa.eu/fundamental-rights/complaints-mechanism/>.

###### **Finland**

Two mechanisms for filing an administrative complaint are available in Finland. One is with the Finnish Immigration Service, which can take immediate corrective actions. The other is with the parliamentary ombudsman or Chancellor of Justice who supervises the legality of and implementation of human rights in the actions of the authorities. Applicants for



international protection can file complaints through both mechanisms. The complaint can also be filed on their behalf with their consent. An administrative complaint can be filed during the examination of an application and after the decision on international protection is issued.

When a complaint is filed directly with Finnish Immigration Service, the legal service drafts a response to the complaint after hearing the views of relevant parties and presents the response to the senior management for approval. After approval, the response is provided in writing to the applicant and, if a mistake was made, the Asylum Unit is asked to correct it. Information on how to make such complaint is available on the website of the Immigration Service.

It is possible for an applicant to file a complaint to the parliamentary ombudsman or to the Chancellor of Justice when they suspect that an authority has acted unlawfully or neglected a duty, for example in relation to exceeding its authority or an undue delay in a procedure. If an investigation is initiated based on a complaint, the ombudsman or Chancellor of Justice hears the authority concerned, requests submissions to gather evidence and may conduct enquiries or ask the police to support the investigation. They cannot change the decision of an authority or a court, but it can bring legal charges, reprimand the authority or ask the authority to correct a mistake or the way in which a procedure is carried out.

### 4.5.3. Surveys for applicants

Apart from complaint mechanisms, administrations may introduce surveys directed at applicants for international protection that focus on specific elements of the asylum procedure. These elements could range from reception, accommodation and food to the manner in which the interview was conducted, the clarity of the information provided and the first-instance decision process.

Before drafting a survey, it is recommended that administrations determine the type of survey that is the most useful and suitable for the intended purpose. The means of running a survey and the timing should be considered carefully to ensure ease of access for applicants and the provision of timely and relevant feedback, respectively.

The availability of the survey in languages understood by the target applicants is key to their participation. In addition, guaranteeing applicants' anonymity facilitates the delivery of meaningful feedback and the achievement of a satisfactory participation rate.







### Related EUAA tool: the SAM project (Surveys of Asylum-related Migrants)

In recent years, EU Member States have shown increased interest in better understanding asylum-related migratory flows and the profiles of arriving migrants and their needs and aspirations. To complement existing data collection mechanisms, the EUAA has developed a surveying mechanism that is adaptable to country-specific needs and addresses information gaps in host countries by collecting comparable data directly from asylum-related migrants. The survey is anonymous, voluntary and available in the most common languages of asylum-related migrants, complies with data protection and ethical principles, and can be taken using individuals' own mobile devices.

As an example of responding to a crisis using SAM, the EUAA, in partnership with the Organisation for Economic Co-operation and Development, launched the Surveys of Arriving Migrants from Ukraine on 11 April 2022. Both anonymous and voluntary, the survey conducted as part of this project aims to collect standardised data across EU+ countries directly from people fleeing the war in Ukraine and seeking shelter in the EU. It also seeks information on respondents' lives in their host countries, education and employment, and the issues they have encountered with registration.

The survey can be accessed at [https://tellusyourstorysurvey.eu/index\\_lp.php?lang=en](https://tellusyourstorysurvey.eu/index_lp.php?lang=en). The results have been analysed in public fact sheets (The [thematic fact sheet on life in the host country](#)) and an in-depth report, in collaboration with the International Organization for Migration and the Organisation for Economic Co-operation and Development ([Forced Displacement from and within Ukraine: Profiles, experiences, and aspirations of affected populations](#)).

### Examples from practice

The Swiss State Secretariat for Migration, in the French-speaking region, conducted surveys among applicants for international protection regarding the asylum procedure, including their level of satisfaction with it. Some details on the type, context and methodology of the survey are provided in this box.

#### Type/context of survey

In Switzerland, applicants stay in one or more federal asylum centres throughout the first 140 days of their procedure. Each applicant can optionally participate in the satisfaction questionnaire on their final discharge from a federal asylum centre (participation is possible in the ordinary centres but not in the temporary centres). There is no specific participation indicator, but it is estimated that 60-80% of applicants fill it in.



### **Methodology**

An anonymous online form (in which the identity of the applicant is not requested) is filled in on tablets or smartphones by staff or directly by the applicant. It includes 10 specific questions on the quality of the services provided (food, room and activities), security, legal representation and the State Secretariat for Migration, with answers given on a scale of 1–5. The average score is determined as well as the overall score given by the applicant. In addition, the number of questionnaires completed each month and the comments made by the applicants are evaluated.

### **Analysis/reporting**

Carried out once a month by a ‘partner and administration’ specialist, who sends a report to the head of the French-speaking region (with comments and suggestions) and to the head of the company responsible for supervising and carrying out activities with applicants (containing raw figures only). Suggestions for improvements, if accepted by the regional head office, are then forwarded to those responsible for the relevant area for implementation.

## **4.5.4. Second-instance decisions and court decisions**

Court decisions can provide insight into the quality of the asylum procedure, in particular the legal reasoning and the interpretation of legal standards and criteria. The input received from second-instance decisions or court decisions can be beneficial to case officers conducting interviews and drafting decisions, as well as to the administration’s management for gauging the overall performance of the process.

A high rate of overturned first instance decisions at second-instance and court level may indicate issues with the quality of first-instance decisions, which will need to be reviewed and addressed. This requires the availability of data on the overturn rate as a result of appeals.

It is recommended that national administrations follow up on the decisions issued on appeals by providing internal guidance or drawing up reports based on the jurisprudence. The reports should be periodically updated.

At a higher level, case officers should also be informed of decisions issued by the European courts – that is, the Court of Justice of the European Union and the European Court of Human Rights. This input can help them in the examination of the substance of applications but also in carrying out processes that are part of the asylum procedure.

### **Examples from practice**

In Switzerland, the AMFR (Analysis and measures FAC rulings) project was initiated to analyse Federal Administrative Court rulings and measures taken in response to them. The



project aims to facilitate the more systematic and IT-driven analysis of the court rulings and the more systematic follow-up of measures taken (e.g. policy changes).

The State Secretariat for Migration has launched an IT project to implement the following measures:

comprehensive and systematic recording, evaluation and analysis of rulings;

- identification of actions needed beyond individual cases;
- systematic management of measures;
- provision of access for managers and case officers to the rulings and measures database.

In Finland, the decisions overturned from the courts of appeal are grouped into six categories by the Finnish Immigration Service, which determines the actions taken in response to the second-instance decision. The six categories are:

- a procedural mistake;
- a mistake in the interpretation of the law;
- different individual assessments of facts;
- new reasons for the need for international protection provided during the appeal;
- new evidence submitted during the appeal;
- a change in the personal circumstances of the applicant during the appeal;
- new policy in relation to examining applications has become into force.

The second-instance decisions that are overturned due to a procedural mistake or a mistake in the interpretation of the law are closely followed up on. They are thoroughly assessed by the legal officers to determine if any changes should be made to internal policies or guidelines. Their conclusions are also systematically reported to management and shared with case officers in order to ensure that the mistake is not repeated.

The second-instance decisions that are overturned for reasons related to the other categories are also carefully assessed, although they are not as likely to lead to changes in internal guidelines or to contain information that should be communicated to all case officers, because they concern the way in which an individual assessment is carried out and how evidence presented in the application was assessed. However, such decisions may contain information that is important to communicate to the management and to the officers who drafted and approved the decision. In addition, if the courts repeatedly overturn decisions, based on different individual assessment of facts, this can prompt a more thorough assessment of whether internal guidance or working methods should be revised.

#### **4.5.5. Input from internal stakeholders**

Input from internal stakeholders can provide useful insight for the administration. In particular with regard to personal interviews and first-instance decisions, case officers, managers and



staff involved in quality assessment can be given the opportunity to express their views on areas for further improvement.

By including internal stakeholders in monitoring, experts from within the organisation are given a voice. As they work with the organisational standards and goals on a day-to-day basis and experience problems first hand, they are often best placed to provide valuable feedback on concrete and viable solutions.

These exercises can be advantageous in particular for large organisations, where it can be challenging to know what staff are thinking and experiencing at all levels. The engagement of senior management is key to the successful implementation of exercises to gather internal input from staff.

At EU level, the Common Assessment Framework (CAF) is based on the internal input methodology (a self-assessment methodology) and aims to achieve a high level of quality in public administrations <sup>(34)</sup>.

### European Union Common Assessment Framework

At the core of the CAF is the organisation's self-assessment, providing the starting point for a comprehensive improvement process. Although the CAF primarily focuses on performance evaluation and management to make improvement possible, its ultimate goal is to contribute to good governance. It supports public administrations to:

- introduce a culture of excellence;
- progressively implement the PDCA cycle;
- carry out a self-assessment process in order to perform a comprehensive organisation check;
- reach a diagnosis that shows their strengths and areas for improvement, helping to determine actions to be taken to enable improvement.

## 4.6. Recommendations based on quality feedback and reporting

The results of data collection and reporting and those from other inputs should be presented to management for their review in the form of recommendations and actions that need to be taken. Recommendations should focus on responding to various shortcomings, in particular where significant shortcomings are observed. In practice, recommendations can include the

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<sup>(34)</sup> For more information about the CAF model, refer to EIPA, 'European CAF Resource Centre' (<https://www.eipa.eu/caf-resource-centre/>).





development of new tools or the updating of existing tools, such as those discussed in Chapter 3 (including guidance, SOPs and templates).

The input, reporting, recommendations and actions are presented to management for review and final decisions. These are accompanied by a proposed plan for the management to agree on, including those responsible and the timelines envisaged.

The management's review also includes an assessment of the status of implementation of actions adopted after the previous monitoring exercise and agreement on the actions to be taken to address residual findings.

## 4.7. Implementation

As mentioned in the previous section, the outcome of the meeting with management is an action plan to improve the quality of relevant processes, such as personal interviews and first-instance decisions. This action plan should also include the assessment of the actions that were taken after the previous monitoring cycle.

This action plan can contain the following elements:

- the results expected after a specific time frame;
- the steps for the implementation of the action plan;
- the persons responsible for implementing the plan;
- the target date for the completion of each action;
- the stakeholders that will be involved.

The changes implemented can support the improvement of the examination process, and new quality reviews, feedback, reporting and recommendations will lead to a subsequent action plan that will result in further improvements to the processes. This reflects the continuous change in process quality based on the PDCA cycle.





## Key points to remember from Chapter 4

Monitoring the quality of personal interviews and first-instance decisions is an ongoing activity and provides an opportunity to assess the development of the examination of asylum applications over time, helping to identify the strengths and weaknesses of the asylum procedure. Through monitoring, it is possible to determine whether organisational goals are still being met and whether the necessary measures are in place to ensure quality.

The regular monitoring of personal interviews and first-instance decisions is essential.

The steps for monitoring the quality of the procedure for examining applications for international protection are:

- the selection of standards and indicators;
- data collection;
- assessment and analysis;
- feedback and reporting;
- input from different sources:
  - ✓ external evaluations and audits,
  - ✓ complaint mechanisms,
  - ✓ surveys of applicants,
  - ✓ second-instance decisions and court decisions,
  - ✓ input from internal stakeholders;
- recommendations;
- implementation.





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