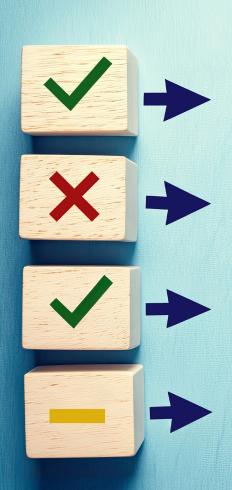


Self-assessment Tool on the Quality of the Asylum Procedure



Tool for the self-assessment of the quality of the asylum procedure

Implementation of the *Guidance on Asylum Procedure: Operational standards and indicators*

August 2025

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About the tool

Why was this tool 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 (¹)) 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.

The present document builds on the EASO Guidance on Asylum Procedure: Operational standards and indicators which was developed to support the EU+ States in the practical implementation of key provisions of Directive 2013/32/EU (APD (recast)) to achieve fair and effective asylum procedures.

It offers guidance to national authorities on assessing the quality of the asylum procedure in their national context. It accompanies an electronic Tool that will allow to perform the self-assessment with improved efficiency.

How was this tool developed? The tool was created by experts from across the EU+ (²), with valuable input from the European Commission and the United Nations High Commissioner for Refugees (³). 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 the flat version of this Tool.

Who should use this tool? The primary target group of the tool those involved in quality assurance activities, as well as decision- and policymakers of national asylum authorities. In addition, the tool can also provide guidance to legal officers, supervisors and managers. 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 tool relate to other EUAA tools? The tool should be used in conjunction with the EASO Guidance on Asylum Procedure: Operational standards and indicators (4) and with the other relevant practical guides and tools that are publicly available on the EUAA's website at https://euaa.europa.eu/practical-tools-and-guides.

How does this tool relate to national legislation and practice? This is a soft convergence tool. It is not legally binding and reflects the commonly agreed standards and indicators that are included in the EASO Guidance on Asylum Procedure: Operational standards and indicators.

Disclaimer

This tool 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.

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

⁽²⁾ 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.

⁽³⁾ Note that the finalised guide does not necessarily reflect the positions of the United Nations High Commissioner for Refugees.

⁽⁴⁾ EASO, Guidance on Asylum Procedure: Operational standards and indicators, September 2019, https://euaa.europa.eu/publications/guidance-asylum-procedure.



Introduction

The present document is the descriptive version of a tool for the self-assessment of the quality of asylum procedure. It focuses on the methodology for the self-assessment step. It does not include the steps concerning the reporting and the action plan, which are instead available in the tool.

The tool builds on the existing operational standards and indicators (⁵), which was developed to support the EU+ countries in the practical implementation of key provisions of Directive 2013/32/EU (asylum procedures directive (APD) (recast)) to achieve fair and effective asylum procedures.

The guidance serves therefore as a reference for conducting self-assessments of the quality of asylum procedure systems by providing operational standards and indicators for the correct and effective implementation of the APD (recast).

The tool offers guidance to EU+ countries to conduct the self-assessment of quality in the asylum procedure effectively and efficiently. The electronic tool offers further functionalities including a reporting function and a support function for the definition of a plan of action based on the outcome of the self-assessment.

Objective

The aim of the tool is to provide an IT solution that facilitates efficient self-assessment of the quality of asylum procedures by the relevant administrations. Furthermore, the tool enables users to generate reports that give an overview of assessment results and assist with the identification of good practices, as well as potential gaps. Finally, based on the outcome of the self-assessment, the EU+ countries will be able to identify the actions needed to improve the quality of asylum procedures. The tool is supported by a template for the drafting of an action plan which is designed to improve the procedures. The tool offers the capability to collect, process (assess), compare and store data locally.

Methodology

The proposed methodology aims to operationalise the standards and indicators using a practical self-assessment tool for national asylum administrations.

The methodology comprises three main steps:



⁽⁵⁾ EASO, Guidance on Asylum Procedure: Operational standards and indicators, September 2019, https://euaa.europa.eu/publications/guidance-asylum-procedure.



Step 1. Self-assessment

Step 1.1. The tool **offers guidance for the assessment** of the implementation of each of the indicators. It also includes a list of **data collection tools** and actions that each national administration can adapt as necessary, depending on its administrative set-up.

Step 1.2. The tool includes a **rating system** that describes, for each indicator, and in a tailored way, the procedure to be followed to evaluate the data and information collected.

Step 2. Reporting

The electronic tool can generate detailed **reports** on the outcome of the self-assessment, identifying areas of compliance as well as shortcomings.

Step 3. Action plan

The outcome of the self-assessment, accessed through the reports, can inform the planning of national authorities, enabling them to address the prioritised procedural shortcomings identified and to implement good practices where applicable. The IT tool can also suggest a tailored **action plan** template.





Self-assessment. Step 1.1: data collection and assessment

Preparation

To collect the data needed for a self-assessment, preparation is paramount.

In this preparatory phase, it is essential to define the scope of the self-assessment and the roles and the responsibilities of the authorities concerned.

Depending on the structure of the national asylum system, it is possible that the various stages of the asylum procedure are managed by different authorities. In the preparation phase, the first step is to define the scope of the self-assessment and who is responsible for which part of it. The self-assessment can cover the entire asylum procedure or focus on only some stages. One authority can carry out the entire procedure, or different authorities may carry out different stages of the procedure.

The authorities that are responsible for specific parts of the procedure are likely to be the best placed, and to have the required means, to collect the necessary data. In this case, the data for the assessment of the standards and indicators that are relevant to these parts of the procedure need to be collected and, depending on the national set-up and on which authority is designated as being responsible for the self-assessment, either assessed directly by those authorities or shared with the (different) authorities that are conducting the self-assessment exercise.

Parts of the tool are related to processes conducted by authorities other than the determining authority (e.g. authorities responsible for registration, border crossings and detention centres). The experts of the authority who are responsible for and have the overview of the self-assessment exercise, need to have a clear picture of these authorities. Depending on the structure of the national asylum system, it is very possible that the authorities that are responsible for specific parts of the procedure are those that also have the means to collect the data. In this case, the data for the assessment of the standards and indicators that are under these areas need to be collected and, depending on the national set-up, assessed by the authorities that are conducting the specific activity.

The assessors need to identify in advance the authorities or staff responsible for the action, activity or task that is related to the relevant indicator. The self-assessment can be conducted with respect to the asylum procedure at the national level or focus on particular geographical areas.

The period covered by the assessment should also be defined in the preparation phase.

The preparation phase will also necessarily include identifying, designing and setting up the data collecting tools needed to carry out the assessment. For more details, see '<u>Data</u> collecting tools', below.

If more 'subjective' terms are used in the data collection methods and the rating system, the administration needs to decide how it will approach these terms. For example, what are the relevant languages for the caseload, the six most common languages, the languages





understood by 60 % of applicants? These are issues that the assessors need to decide in advance to proceed with the assessment.

For the definition of the term 'systematically', see 'Self-assessment. Step 1.2: rating' below.

Data collecting tools

The tool proposes a non-exhaustive range of data collecting tools and methods tailored to each indicator.

The national authority(ies) responsible for the self-assessment could consider setting up and using one or a combination of the proposed data collecting tools. For some indicators, one tool could suffice to gather enough data that cover all the elements relevant to the indicator (see 'Guidance for the assessment' above, and to proceed with the assessment. In most cases, the assessment may demand a combination of different tools for the assessor to have an accurate picture of the various relevant aspects and conclude their assessment.

Below is a list of the data collecting tools proposed.

It is important to note that all the below-mentioned methodologies can be used either alone or in combination, depending on the nature of the indicator that is being assessed and also the capacity and the resources of the national authority.

Consulting national guidance documents

Data collection for many indicators can effectively be carried out by consulting the various **guidance documents** (6) available at national level, such as SOPs, guidelines, national law, decrees, existing templates (7), training plans or administrative processes. These documents may be referred to in different ways depending on the national context (e.g. they might be called SOPs or guidelines, training plans or training programmes). In the present document/tool, reference is made to 'guidance documents' to indicate any type of relevant document irrespective of how they are named at national level. When it is mentioned in, or anyway relevant to, the indicator, further specification is provided on what kind(s) of guidance document(s) are useful for the Data collection. Unless it was specified by the indicator, when referring to guidance documents as data collecting tools, the examples mentioned normally include 'guidelines' and 'SOPs' as the most representative. These terms designate any kind of national guidance. Depending on the indicator, more specific terms, such as national law or decree, are used for accuracy. (8)

This is a tool that can be used remotely in most cases.

⁽⁸⁾ For the definition of guidance and standard operating procedures (SOPs), see EUAA, *Practical Guide on Quality Assurance in Asylum Procedures*, May 2024, https://euaa.europa.eu/publications/practical-guide-quality-assurance-asylum-procedures.



⁽⁶⁾ It will be essential not only to review the content of such national guidance documents in light of each relevant indicator, but also to assess whether the documents are disseminated to, accessible to and known by the relevant personnel.

⁽⁷⁾ The review of existing templates is also crucial for the assessment of several indicators. In this case the information can be collected directly and remotely by the assessor.



Reviewing individual case files

A useful data collecting tool that can enable a review of how the guidance is implemented and what is done in practice is a **review of individual case files**. In this case, the review must involve a representative sample of case files.

To ensure representativeness of the sample, the authority needs to consider a combination of factors. Firstly, the number of cases observed, or case files reviewed, needs to be defined in proportion to the total number of case files handled by the monitored office in the time frame under assessment. (For instance, if the exercise is carried out quarterly, the sample size should be defined based on the total number of case files handled by that office during the said quarter. As a result, the greater the total number of case files handled during the selected quarter, the greater the sample size should be.) Secondly, for the sample size to be representative, its composition needs to proportionally reflect the various cases assessed by the office in the relevant time frame, which are expressed in terms of nationality, profile of the applicant, type of procedure, special procedural guarantees or office where the case was processed.

Notwithstanding the size of the sample, key information can be collected if the selected sample is relevant. A regular and systematic sample analysis can contribute to the effectiveness of the assessment.

When the self-assessment exercise is carried out at the national level (targeting all offices simultaneously), the central authority can ensure representativeness of the sample by including asylum cases processed in diverse offices or locations, whereby number and composition are duly considered as described above.

Consultation of case files has the advantage of providing the assessor with first-hand information on the practical implementation of the indicator, thereby ensuring a high degree of objectivity of the information.

This is a method that can also be done remotely in most cases.

Direct observation and shadowing

Another tool that can be used to assess performance on some indicators is the **observation of a process or a workflow**. This method requires the assessor to be physically present and to **shadow** the staff member responsible for a specific task, for example lodging an application or conducting a personal interview, when conducting this task.

Similar to the consultation of case files, direct observation has the advantage of providing the assessor with first-hand information on the practical implementation of the indicator, thereby ensuring a high degree of objectivity of the information.

This method, which entails an in-person field mission *in loco*, can pose some operational challenges in some national settings and contexts.

Surveys

The responsible authority could consider administering **surveys** to relevant personnel and key informants – including, in some cases, applicants for international protection. The surveys should comprise objective questions that minimise the risk of subjective interpretation by survey respondents.





These surveys can be administered either in written form or orally. When administered orally, they can be conducted through different means, for example by a call, by videoconference or during a field visit. When administered in writing, this can happen online, via email or on paper.

Surveys are a means of obtaining direct feedback on the implementation of the indicator that is being assessed from the personnel who are responsible for conducting a process or managing a situation.

This data collection method can be performed remotely or with the physical presence of the assessor.

Quality assurance tools and reports

The data collection can be carried out through **quality assurance exercises**. As an example, the EUAA quality assurance tool (QAT) can provide information relating to quality standards and indicators to assess personal interviews and decisions. Alternatively, a national QAT that assesses the same or similar indicators can be used as a data collecting tool. Otherwise, an ad hoc data collection tool can be set up to gather relevant information, which could be informed by the EUAA QAT mentioned above.

Furthermore, if none of the above-mentioned data collecting methods can be implemented in a given national setting, the authority can still collect the necessary data through **existing reports on quality assurance** outlining the implementation of the relevant indicators. Such a method can be useful to carry out a retroactive self-assessment exercise.

Guidance for the assessment

The tool offers detailed practical guidance to the assessor on what information and data needs to be collected, reviewed and analysed to assess each indicator.

This guidance 'unpacks' the indicator in a way that makes it more easily measurable. It presents the assessor with all the elements that need to be considered to be able to assess the relevant indicator and reach a conclusion on whether the indicator is met at the national level.





Self-assessment. Step 1.2: rating

The rating methodology is based on a 'Yes', 'No', 'Partially', 'N/A' (not applicable) system, applied as relevant to each indicator.

The tool details the criteria to be used to decide which of the rating options should be chosen. These are qualitative criteria, and they are related to if and to what extent the administration fulfils them. For this reason, the 'Yes' option is suggested when the action that the indicator stipulates has been put in place and occurs or is applied in a systematic way. 'No' should be chosen not only when the action has not been put in place, but also when this does not happen in a systematic way.

For the purpose of this tool and its rating system, 'systematically' means consistently, uniformly and with no relevant exceptions in terms of significance, frequency or magnitude. It is up to each assessing administration to define how they evaluate this in practice. For example, when an indicator prescribes that internal guidelines for a specific procedure need to be in place, the 'Yes' choice requires not only the existence of these guidelines, but also their systematic application. It is up to the administration to define the threshold used to determine when the guidelines are not 'systematically' implemented.

Furthermore, when considering the rating of an individual indicator, it is important to keep in mind that every indicator is being rated within the scope of the standard under which it falls.

For some indicators, 'Partially' and 'N/A' are not relevant options. 'Partially' is not an option for those indicators where all elements included in the indicator are considered essential for the indicator to be measured. On the contrary, 'partially' is an option when non-key elements within the indicator can be identified and, if not met, would not substantially affect the applicability of the indicator. 'N/A' is an option only when the indicator is not applicable in a national system.

The IT version of the tool will include a dedicated space, next to the rating of each indicator, where the assessor can add comments. Comments are mandatory for the choices 'No' and 'Partially'. The aim of a self-assessment exercise is to help the administration to deal with shortcomings and improve deficiencies, which is why it is important that the assessor provides information on the reason(s) for the negative or moderate rating. Of course, comments can also be added when the rating is 'Yes', for example when the assessor wants to highlight a good practice, but this is not obligatory.





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Access to procedure

Making the application

STANDARD 1: Authorities that are likely to receive applications are aware of their responsibilities and their personnel are sufficiently qualified.

Indicator 1.1: Tasks and responsibilities of the relevant authorities are documented.

Data collection

Guidance for assessment

Review if national law identifies all authorities that are likely to receive applications for international protection. These will normally include the police, border guards, immigration authorities and personnel of detention facilities.

Review if the tasks are reflected at the level of each administration, in laws, decrees or other official founding or steering documents, and at the level of the job descriptions of the relevant staff. Instead of, or in addition to, being found in official documents, the tasks and responsibilities may be listed and/or clarified in guidance provided by internal documents of the administration, such as guidelines and standard operating procedures (SOPs).

Review if guidance provided in the above-mentioned documents is being followed by staff of the relevant authorities when performing their tasks on the ground.

Tools

Consult national law and other official documents that set out the tasks and responsibilities of authorities likely to receive applications, regarding access to asylum.

Consult guidance documents (such as guidelines or SOPs) regarding the tasks and responsibilities of relevant authorities and staff.

Rating system

Yes. The tasks and responsibilities are listed in official documents and are described in a sufficiently clear manner either in the official documents or in the complementing internal documents and the relevant personnel are aware of their tasks and responsibilities — when this is the case for all the authorities concerned.

No. The tasks and responsibilities are not described, either in an official document or in an internal document or the relevant personnel are not sufficiently aware of their tasks and responsibilities – when this is the case for one or more of the authorities concerned.

Partially. The tasks and responsibilities are listed in official documents **but** in an insufficiently clear or incomplete way without





Survey managers and other relevant staff to determine if staff are aware of their tasks and responsibilities.

Survey relevant staff asking them about their understanding of their tasks and responsibilities and which materials or sources they can consult in this regard.

being complemented by more detailed descriptions in internal documents – **when** this is the case for one or more of the authorities concerned – **but** the relevant personnel of all authorities concerned are sufficiently aware of their tasks and responsibilities.

N/A. This is not an option for this indicator.

Indicator 1.2: Personnel working at border crossing points and in detention facilities have received the necessary level of training to fulfil their tasks and responsibilities related to the asylum procedure. This training includes how to notice that a person may wish to apply for international protection, based, among others, on Article 10 of the Schengen Handbook and the EUAA-Frontex Practical Guide on Access to Procedure, and how to inform the persons that they may apply for international protection.

Data collection

Guidance for assessment

Review if training relevant to the asylum procedure includes training in how to be aware that an individual may need or wish to apply for international protection, how to inform these potential applicants that they have the opportunity to do so and the identification of vulnerable individuals and special procedural safeguards applicable to them.

Review if this training takes due account of relevant guidance developed by the EUAA, such as the EUAA-Frontex Practical Guide on Access to Procedure, and/or includes the relevant modules of the European Asylum Curriculum, developed by the EUAA, related to access to the asylum procedure.

Review if such training is provided to all relevant personnel working at border crossing points and in detention facilities, including new personnel (prior to or upon the start of their assignment) and experienced personnel (in the form of refresher training).

Rating system

Yes. Training on access to the asylum procedure is systematically delivered to all new relevant staff and such training includes elements on how to recognise and adequately deal with applicants for international protection and such training is offered with regularity, in line with the responsibilities and tasks of the personnel and with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews – when this is the case for all the authorities concerned.

No. Personnel are not systematically trained on access to the asylum procedure **or** personnel





Review if the training is in line with the responsibilities and tasks of the personnel and with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

Tools

Survey personnel of the relevant authority responsible for training and continuous professional development (e.g. human resources (HR) department, training unit).

Consult existing training plans regarding this specific training.

Consult existing training records regarding the number of training sessions delivered, the number of staff who effectively participated in these training sessions and the relevance of the timing and target groups of delivered training (e.g. prior to or upon the start of their assignment for new personnel; refresher training for experienced personnel).

Consult training documentation such as training syllabi, overviews of learning outcomes and material related to the assessment of the learning that took place and determine to what extent it draws on the modules of the European Asylum Curriculum and guidance developed by the EUAA on access to the asylum procedure, notably the EUAA-Frontex Practical Guide on Access to Procedure.

Survey relevant personnel asking them about which training they have followed and how effective they found them. Ask about relevant resources they can refer to if in doubt.

Directly observe during visits to border crossing points to see if trained personnel follow the guidance provided during their training.

are systematically trained **but** such training does not include all relevant aspects on how to recognise and adequately deal with applicants **or** the training offered is not offered with regularity **or** it is not at all in line with the responsibilities and tasks of personnel or with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews – **when** this is the case for one or more of the authorities concerned.

Partially. Training on access to the asylum procedure is systematically delivered, in all the authorities concerned, to all new relevant staff and such training includes elements on how to recognise and adequately deal with applicants for international protection and such training is offered with regularity but is not entirely in line with the responsibilities and tasks of the personnel and with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews – when this is the case for one or more of the authorities concerned.





STANDARD 2: Personnel of authorities that are likely to receive applications have relevant information and instructions to inform applicants as to where and how applications for international protection may be lodged.

Indicator 2.1: Written instructions and information are available to all relevant authorities in order to prepare them to inform applicants of where and how to lodge an application.

Data collection

Guidance for assessment

Review if instructions and information on how to inform applicants of where and how to lodge an application exist in written form and are made available to all relevant authorities.

Review if available guidance documents (such as guidelines or SOPs) contain all relevant information such as where and how an application can be lodged (including whether online, by post or in person), addresses and opening times, whom to take along or include and which documents to bring or submit.

Tools

Survey managers of the relevant authorities asking them about the existence, content and dissemination of documents to relevant staff of written guidance on how to inform applicants about where and how to lodge an application.

Consult guidance documents (such as guidelines or SOPs) regarding the information provided to the applicant on the methods of lodging an application.

Directly observe the situation in the relevant locations to see if documents containing relevant instructions and information are available to and followed by relevant personnel.

Rating system

Yes. Written instructions and information are accurate, detailed and available to all relevant authorities that are likely to receive applications to prepare them to inform applicants on where and how to lodge an application – **when** this is the case for all the authorities concerned.

No. Written instructions and information are not available to at least one of the authorities that are likely to receive applications in order to prepare them to inform applicants on where and how to lodge an application **or** the information is incorrect or incomplete – **when** this is the case for one or more of the authorities concerned.

Partially. Written instructions and information are available to all relevant authorities that are likely to receive applications **but** the information they provide lacks specificity on non-key aspects – **when** this is the case for one or more of the authorities concerned.





Indicator 2.2: The instructions and information are formulated in a comprehensible way for the personnel of the relevant authorities.

Data collection

Guidance for assessment

Review if the available instructions and information are clear and easy to understand for officials with no background in asylum.

Review if personnel are aware of and follow the available guidance.

Tools

Survey staff who provide information on lodging an application asking them about their understanding of the instructions they received from their administration in this regard.

Consult guidance documents (such as guidelines or SOPs) regarding the information provided to the applicant on the methods of lodging an application.

Directly observe the situation in the relevant locations to see how relevant personnel follow available guidance in practice.

Rating system

Yes. Written instructions and information are described in a clear manner **and** the relevant officials have knowledge as to where and how a person can lodge an application for international protection – **when** this is the case for all the authorities concerned.

No. Written instructions and information are inaccurate or insufficiently clear **and** the relevant officials of these authorities do not have a correct understanding as to where and how a person can lodge an application for international protection – **when** this is the case for one or more of the authorities concerned.

Partially. Written instructions and information are described in a clear manner and relevant officials have a correct understanding as to where and how a person can lodge an application, in all the authorities concerned, but the instructions lack specificity on certain non-key aspects in one or more of the authorities concerned.





Indicator 2.3: When a person makes an application to an authority that is not competent to register it, the applicant is immediately informed on how and where the application will be registered, including the time frames for lodging the application with the competent authority.

Data collection

Guidance for assessment

Review if the information provided to the applicant by the authority that is not competent to register the application includes all relevant information on how and where the application will be registered, including the time frames for lodging the application.

Review if this information is provided to the applicant immediately following their making of an application (i.e. in a way that allows for a smooth provision of information, without a major interruption in time or place).

Review if this information is reflected in guidance documents (such as guidelines or SOPs) and that the personnel are aware of and follow this guidance.

Tools

Consult documents (including guidelines and SOPs) for personnel of authorities that are likely to receive applications without being competent for registration.

Survey applicants asking them about the content and timing of the information provided to them by the concerned administration regarding the procedures and place of registration and time frame of lodging.

Shadow staff of authorities likely to receive, but not competent to register, applications who are tasked with information provision on registration procedures (including the time frame for lodging).

Rating system

Yes. Persons who make an application to authorities not competent to register it are systematically informed how and where the application will be registered, including the time frames for lodging the application with the competent authority and this information is provided immediately after they make their application to the authority concerned – when this is the case for all the authorities concerned.

No. Persons who make an application to authorities not competent to register it are not systematically informed how and where the application will be registered **or** this information is not systematically provided immediately after they make their application to the authority concerned – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. If authorities that are likely to receive applications also have the competence to register the application.





STANDARD 3: Personnel of detention facilities and at border crossing points have tools available to provide clear information to persons who may wish to make an application for international protection on where and how to do so.

Indicator 3.1: Standard information regarding the possibility to apply for international protection has been made available to persons who may wish to make an application, in writing and orally where necessary.

Data collection

Guidance for assessment

Review if written information material (posters, leaflets, brochures, etc.) related to the possibility of applying for international protection is available at detention facilities and border crossing points.

Review if this written information is disseminated in accessible areas of detention facilities and border crossings.

Review if the information provided is sufficiently clear, accurate and complete regarding the possibility to make an application. Review if the standard information provided in writing is also, if necessary, communicated orally.

Tools

Consult information provision material on the possibilities to apply for international protection that is available at detention facilities and border crossing points.

Consult guidance documents (such as guidelines or SOPs) used by relevant personnel regarding availability and methods of information provision (e.g. on how to distribute or place materials in given locations/situations or how to deal with an applicant who cannot understand the written information provided).

Directly observe of the content and dissemination of written information provision material during visits to detention facilities and border crossing points.

Survey applicants regarding their experience of information provision in detention facilitates or border crossing points.

Rating system

Yes. Standard written information is systematically made available to persons who may wish to make an application **and** this information is clear **and** available orally where necessary — **when** this is the case for all the authorities concerned.

No. Standard written information is not systematically made available to persons who may wish to make an application **or** it is not available orally *or* the information provided is inaccurate or unclear – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Indicator 3.2: Information is given as soon as possible to ensure that identified applicants can make an application without delay.

Data collection

Guidance for assessment

Review if applicants identified in detention centres and at border crossings are informed as soon as possible about how and where to apply for asylum, allowing them to make their application without delay.

Review if guidance documents (such as guidelines or SOPs) regarding the promptness of the information provided to identified applicants are available and if the relevant personnel are aware of and follow the guidance provided.

Tools

Survey managers of relevant authorities by asking them about the availability, content and dissemination of such documents to the personnel in charge of identifying potential applicants and providing information on where and how to apply for international protection.

Consult guidance documents (such as guidelines or SOPs) regarding the provision of information on where and how to apply for international protection, in particular on how to follow up identified potential applicants and the timing of the provision of this information.

Survey staff tasked with providing information to identified potential applicants asking them how they follow up potential applicants and how long it typically takes for such individuals to make an application after receiving this information.

Consult statistics from the authorities' case-handling system regarding the timing of information provision.

Shadow staff in detention centres and border crossings regarding the way they follow up identified potential applicants and the timing of information provision.

Rating system

Yes. Relevant information on how to apply for international protection is systematically provided to identified applicants as soon as possible – **when** this is the case for all the authorities concerned.

No. Relevant information is not systematically provided to identified applicants **or** only after an unreasonable amount of time has passed – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Indicator 3.3: Information on the possibility to make an application is accessible in relevant languages.

Data collection

Guidance for assessment

Review if the information on the possibility to make an application is accessible in relevant languages either through translated written materials or through interpretation at detention facilities and border crossing points.

Review if the languages, in which translated materials or interpretation are available, are relevant to the caseload (i.e. whether selected languages match the languages of the applicants).

Review if there is guidance for personnel on how to provide information to applicants in a language they understand, and if the personnel are aware of and follow available guidance.

Tools

Survey staff managing the interpretation services asking them about the planning of, availability of and potential gaps in interpretation services for the provision of information on the possibility to make an application.

Survey staff in charge of organising the translation of information materials, asking them about the selection criteria for translation of relevant material (including continued monitoring of the caseload for new language needs), the availability of the translated materials and potential gaps in this respect.

Survey staff in charge of information provision asking them how they follow up, in terms of language needs, with potential applicants and whether they encounter any gaps in terms of interpretation/translation needs.

Consult guidance documents (such as guidelines or SOPs) for personnel in charge of information provision on the ground regarding the distribution of translated materials or the follow-up of identified interpretation needs of applicants.

Rating system

Yes. Information on the possibility to make an application is systematically accessible in relevant languages in relation to caseload, by means of both translated written materials **and** interpretation services – **when** this is the case for all the authorities concerned.

No. Information is not systematically accessible in relevant languages, in relation to the caseload, either by means of translated materials or interpretation services — **when** this is the case for one or more of the authorities concerned.

Partially. Information is systematically accessible in relevant languages in all the authorities concerned **but** only by means of translated written materials **or** interpretation services.





Consult translated materials and statistical data on applicants' languages regarding the adequacy of selected languages.

Consult statistical data relating to applicants' languages and available interpretation services (e.g. database of interpreters and records on allocation of interpreters, including when such an allocation could not take place due to the unavailability of interpreters in a relevant language).

Directly observe the availability of relevant information in relevant languages in the form of translated materials and their dissemination to applicants during visits to detention facilities and border crossing points.

Indicator 3.4: Information to persons who may wish to make an application is adapted to the age / level of understanding of the applicant.

Data collection

Guidance for assessment

Review if relevant available information and the way it is communicated are adapted to applicants' needs, including those of children, persons who are illiterate or have a low level of education, elderly persons and persons with cognitive difficulties or impairments.

Review if there is guidance for relevant personnel on how to adapt information to the level of understanding of the applicant and if personnel are aware of and follow available guidance.

Tools

Survey managers of detention facilities and border crossing points asking them about measures taken to adapt information provision material and communication techniques, including the dissemination of guidance to the personnel in charge of information provision.

Consult written information provision material to see if they are adapted to the age and level of understanding of the person (e.g. specific leaflets for minors, use of visualisations).

Rating system

Yes. Information is systematically adapted in a needs-based manner – **when** this is the case for all the authorities concerned.

No. Information is not systematically adapted in a needs-based manner – **when** this is the case for one or more of the authorities concerned.

Partially. Information has been only partially adapted in a needs-based manner (e.g., for children but not for other older individuals or those less able to understand).





Consult guidance documents (such as guidelines or SOPs) regarding the needs-based adaption of relevant information.

Survey staff in charge of information provision asking them how they adapt their communication to the person's age and level of understanding.

Shadow staff in charge of information provision during visits to detention facilities and border crossing points to see how information is communicated to persons of different ages or levels of understanding.

STANDARD 4: Interpretation services are available, free of charge, when necessary.

Indicator 4.1: Arrangements for the necessary interpretation in relation to the procedure are initiated as soon as the need is identified.

Data collection

Guidance for assessment

Review if a process is in place that allows for the quick identification and deployment of the necessary free-of-charge interpretation as needed.

Review if such a process is implemented in practice.

Tools

Survey supervisors of detention facilities and border crossing points, or their supervisors, asking them about the processes in place to identify and deploy interpreters as needed, including questions on timelines, potential delays and fees.

Consult guidance documents (such as guidelines or SOPs) regarding the process in place for the identification and deployment of interpretation services, including timelines and potential fees.

Rating system

Yes. A process is in place to initiate free-of-charge interpretation as soon as the need for this is identified and interpretation is, in practice, systematically initiated, free of charge, as soon as a need is identified – **when** this is the case for all the authorities concerned.

No. There is no process in place to initiate free-of-charge interpretation as soon as identified **or** interpretation is, in practice, not systematically initiated as soon as a need is identified **or** it is systematically initiated as soon as a need is identified **but** is not free of charge – **when** this is the case for one or more of the authorities concerned.





Survey staff at border crossing points and detention centres asking them how they identify a need for interpretation, how they follow up on it and if there are any applicable timelines or fees regarding interpretation.

Survey organisations and persons providing advice and counselling asking them about issues regarding the timing and free-of-charge nature of interpretation services.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

STANDARD 5: In detention centres and at border crossing points, organisations and persons providing advice and counselling, and their interpreters, have adequate access to applicants to assist them.

Indicator 5.1: Access is only restricted/limited by national law where it is objectively necessary for security, public order or the administrative management of the crossing point, provided it is not thereby severely restricted or rendered impossible.

Data collection

Guidance for assessment

Identify all national law provisions that regulate access to detention centres and border crossing points.

Review if national law allows any restrictions on access to the applicant by organisations and persons providing advice and counselling, and their interpreters, and if these restrictions are limited to situations where security, public order or administrative management considerations make them objectively necessary.

Review if these restrictions do not, in theory and in practice, severely restrict or render impossible the relevant organisations' and persons' access to the applicant (e.g. by excessively limiting visiting hours or not allowing visits at all).

Tools

Consult national law and other official executory documents (if applicable) regarding access limitations and verify the extent of and grounds for these limitations.

Rating system

Yes. Limitations or restrictions on access to applicants are allowed by national law **and** are objectively necessary **and** the access is not severely restricted or rendered impossible, either legally or in practice – **when** this is the case for all the authorities concerned.

No. Limitations or restrictions on access to applicants are allowed by national law **but** are not justified **or** are only partly justified by objective reasons **or** access to applicants is otherwise severely restricted or rendered impossible, either legally or in practice – **when** this is the case for one or more of the authorities concerned.





Survey organisations and persons providing advice and counselling asking them about their ability and that of their interpreters to access applicants, under what circumstances access has been restricted, legally and in practice, and if there are any difficulties regarding accessing the applicant.

Consult guidance documents (such as guidelines or SOPs) for relevant personnel (e.g. personnel at reception of detention centre) to check entrance restrictions for relevant persons and organisations, including their interpreters, against national law or other executory documents.

Consult relevant records (e.g. visitor entry and exit registration forms) for data on whether access limitations met the legal requirements.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 5.2: Where rules are established on the presence of persons and organisations providing advice and counselling, these are clear and accessible to the applicant and/or their adviser or counsellor, and the interpreter.

Data collection

Guidance for assessment

Review if rules on the presence of persons and organisations providing counselling are accessible in writing (e.g. on the internet or by means of materials distributed in the detention centres) or explained orally when needed to all relevant parties (applicant, organisations or persons providing advice and counselling, interpreter).

Review if these rules are set out in an easily understandable and non-technical language for all parties (applicant, organisations or persons providing advice and counselling, interpreter).

Review if the languages in which the rules are made accessible to the applicant are relevant to the caseload (see indicator 22.1).

Tools

Survey managers of detention facilities and border crossing points asking them where rules on the presence of persons and organisations providing advice and counselling can be

Rating system

Yes. Rules on the presence of persons and organisations are clear and accessible to all parties involved – **when** this is the case for all the authorities concerned.

No. Rules are not accessible to the applicant or their advisor/counsellor, or the interpreter, *or* rules are accessible to all parties **but** are unclear – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. No such rules are established.





found, how relevant parties can access these rules and to what extent these rules are accessible in languages relevant to the caseload.

Consult guidance documents (such as guidelines or SOPs) addressed to relevant personnel tasked with communicating these rules to the relevant parties.

Consult written material provided to the parties (if available) on these rules regarding clarity of the information provided.

Survey organisations and persons providing advice and counselling regarding their knowledge of / access to information on the rules regarding their presence.

Consult translated materials and statistical data on applicants' languages regarding the relevance of selected languages.

Consult statistical data relating to applicants' languages and available interpretation services (e.g. database of interpreters and records on allocation of interpreters).

Directly observe the availability of information in relevant languages in the form of translated materials in relevant languages.

Indicator 5.3: The applicants in detention facilities have access to means of communication with their advisors/counsellors.

Data collection

Guidance for assessment

Review if processes are in place to ensure that applicants in detention facilities have both regular and needs-based (e.g. due to a change of personal circumstances) access to their advisors/counsellors through telephone, email or another means of communication used by their advisors or counsellors.

Tools

Survey managers of detention facilities asking them about the communication means put at the disposal of the applicant, under which conditions and at what frequency.

Rating system

Yes. Applicants systematically have both regular **and** needs-based access to means of communication with their advisors or counsellors – **when** this is the case for all the authorities concerned.

No. Applicants do not systematically have regular or needs-based access to means of communication with advisors or counsellors –





Consult documents (such as guidelines or SOPs) addressed to relevant personnel regarding permitting or granting the applicants the use of a means of communication to contact their advisors or counsellors.

Survey relevant staff regarding permitting or granting the applicants the use of means of communication to contact their advisors or counsellors.

Survey advisors and counsellors asking them about their clients' access to means of communication (frequency, needs-based, reasons given for not granting access).

Survey applicants in detention facilities regarding their access to means of communication with advisors/counsellors (frequency, needs-based, reasons given for not granting access).

when this is the case for one or more of the authorities concerned.

Partially. Applicants systematically have access to a means of communication with advisors or counsellors for all the authorities concerned, **but** communication is, in one or more of the authorities concerned, granted either in a regular **or** in a needs-based manner.

N/A. This is not an option for this indicator.

STANDARD 6: The organisations and persons providing counselling are able to meet and speak with applicants privately.

Indicator 6.1: If there are rules on visiting hours, the opening hours are long enough to allow an effective meeting with applicants.

Data collection

Guidance for assessment

Review if the visiting hours for organisations and persons providing counsel are reasonable, are not arbitrarily restricted and are sufficiently long to allow for an effective interaction between the applicant and their counsel.

Tools

Survey managers of detention facilities and border crossing points, asking them about the opening times for organisations and counsellors.

Consult documents (such as guidelines or SOPs) addressed to relevant staff regarding visiting hours and duration of meetings between applicants and counsellors.

Consult official documents (e.g. official website) to check information on visiting hours.

Rating system

Yes. Visiting hours are long enough to allow effective meetings between applicants and their counsellors – **when** this is the case for all the authorities concerned.

No. Visiting hours are unreasonably short and therefore do not allow effective meetings between applicants and their counsellors – **when** this is the case for one or more of the authorities concerned.





Survey applicants regarding the adequacy of visiting hours.

Survey organisations and counsellors regarding the adequacy of visiting hours.

Partially. This is not an option for this indicator.

N/A. There are no rules on visiting hours.

Indicator 6.2: The organisations and persons providing counselling can meet the applicant in a place and under conditions that ensure adequate privacy.

Data collection

Guidance on information collection

Review if the practical set-up allows organisations or persons providing counselling to meet with the applicant without being overheard or disturbed by others, for example by providing for a separate, relatively soundproof meeting room or location with controlled access, free from interference by other meetings or persons.

Review of any internal documentation that describes the conditions for meetings between the organisation or persons providing counselling and the applicants.

Tools

Survey managers of detention facilities and border crossing points, asking them about the practical set-up of, and internal requirements for, meetings between organisations or persons providing counselling and applicants.

Directly observe locations within detention facilities and at border crossing points regarding the practical/material conditions in which meetings are held.

Survey applicants regarding the conditions in which meetings are held and in particular about potential privacy concerns.

Survey organisations and counsellors who intervene in detention facilities and at border crossing points, asking them about the practical set-up of meeting locations and potential privacy concerns.

Rating system

Yes. The ability to hold a confidential conversation is systematically ensured – **when** this is the case for all the authorities concerned.

No. The ability to hold a confidential conversation is not systematically ensured – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





STANDARD 7: Applicants at border crossing points and applicants held in detention are informed of the existence of organisations or persons providing counselling and can effectively contact them.

Indicator 7.1: Information about how to contact relevant organisations and persons providing counselling are available to applicants in different languages.

Data collection

Guidance for assessment

Review if information is prepared/provided in relevant languages in relation to the caseload and made available to applicants in the form of written documentation (e.g. posters, brochures displayed in visible/accessible places) or communicated verbally, using interpretation services.

Tools

Survey staff managing the interpretation services asking them about statistical data relating to applicants' languages, and about the planning of, availability of and potential gaps in interpretation services for the provision of information on the opportunity to make an application.

Survey staff in charge of organising the translation of information materials, asking them about the selection criteria for translation of relevant material (including continued monitoring of the caseload for new language needs), the availability of the translated materials and potential gaps in this respect.

Consult statistical data relating to the applicants' languages and available interpretation services (e.g. database of interpreters and records on allocation of interpreters, including when such an allocation could not take place due to the unavailability of interpreters in a relevant language).

Rating system

Yes. Information on how to contact relevant organisations and persons is systematically available to applicants in relevant languages in relation to the caseload— **when** this is the case for all the authorities concerned.

No. Relevant information is not systematically available to applicants in relevant languages in relation to the caseload by means — **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Survey staff in charge of information provision, asking them how they follow up, in terms of language needs, with potential applicants and whether they encounter any gaps in terms of interpretation/translation needs.

Consult guidance documents (such as guidelines or SOPs) for personnel in charge of information provision regarding the distribution of translated materials or the follow-up of identified interpretation needs of applicants.

Consult translated materials and statistical data on applicants' languages regarding the adequacy of selected languages.

Directly observe the availability of information in relevant languages in the form of translated materials and their dissemination to applicants during visits to detention facilities and border crossing points.

Indicator 7.2: The means to contact these organisations and persons are placed at the disposal of the applicants.

Data collection

Guidance for assessment

Review the practical means of communication that are put at the disposal of applicants at border crossing points or in detention centres in order to contact relevant organisations and persons (e.g. access to a directory or list of organisations or legal counsellors and their contact details, access to a phone or a computer with internet connection in order to send an email, including assistance on how to use these means, if necessary).

Tools

Survey managers of border crossings or detention centres asking them about the practical means of communication that are made available to applicants.

Consult guidance documents (such as guidelines or SOPs) for personnel regarding the practical means of communication that are made available to applicants.

Rating system

Yes. The means to contact organisations or persons providing counselling are systematically placed at the disposal of the applicants – **when** this is the case for all the authorities concerned.

No. The means to contact organisations or persons providing counselling are not systematically placed at the disposal of the applicants – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Survey organisations and counsellors who intervene in detention facilities and at border crossing points, asking them about the means of communication put at the disposal of their clients and potential concerns in this regard.

Survey applicants asking them about the means put at their disposal to contact relevant organisations and persons who provide counselling and any potential difficulties encountered in this regard.

N/A. This is not an option for this indicator.

STANDARD 8: Guarantees have been put in place to ensure that every person has the possibility to make an application on their own behalf.

Indicator 8.1: In situations where national law provides that an application may be made by an applicant on behalf of dependent adults, authorities verify with every dependent adult whether they wish to lodge an application on their own behalf. This information shall be conveyed in private to the dependent adult.

Data collection

Guidance for assessment

Review if authorities inform every dependent adult of their right to make a separate application and ask them whether they wish to do so.

Review if this information is conveyed in private to the dependent adult, that is, in a setting that allows the dependent applicant to be out of earshot of any other concerned person who may wish to act on the dependent adult's behalf (e.g. spouse).

Review if the information provided to the applicant is conveyed in languages relevant to the caseload (see indicator 22.1).

Tools

Consult national law and other official executory documents regarding the possibility of applications being made on behalf of a dependent adult.

Rating system

Yes. Authorities systematically inform dependent adults of their right to make a separate application and verify with every dependent adult whether they wish to make an application on their own behalf and

this is done in private – **when** this is the case for all the authorities concerned.

No. Authorities do not systematically verify with every dependent adult whether they wish to make an application on their own behalf, *or* they do verify this **but** it is not done in





Consult guidance documents (such as guidelines or SOPs) regarding the handling of applications by dependent adults (e.g. what information is provided to them, what questions are asked, what measures are taken to ensure the privacy of this interaction).

Shadow relevant staff to see if dependent adults are, in private, informed of their right to make and lodge their own application and asked if they wish to do so.

Consult individual case files of dependent adults to see if information was provided to them and if the dependent adult was explicitly asked if they wish to make and lodge their own application.

Consult statistical data relating to applicant languages and available interpretation services (e.g. database of interpreters and records on allocation of interpreters).

Survey applicants who are dependent adults asking them if they were provided with the option to make and lodge their application, and whether this was done in a setting that ensured privacy.

private – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. National law does not allow an individual to make an application on behalf of a dependent adult.

Indicator 8.2: Training to authorities that are likely to receive applications includes guidance on how to detect indications that an unaccompanied child may wish to apply for international protection, and on how to formulate questions in an age-sensitive manner.

Data collection

Guidance for assessment

Review if the training provided to relevant staff of authorities that are likely to receive applications includes training on how to detect that an unaccompanied child may wish to apply for international protection and on how to ask questions in an age-sensitive manner when addressing unaccompanied children who may wish to apply for international protection.

Review if the training is in line with the responsibilities and tasks of the personnel and with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

Rating system

Yes. Training on how to detect indications that an unaccompanied child may wish to apply for international protection and on how to ask questions in an age-sensitive manner is systematically delivered to all personnel and such training is offered with regularity, in line with the responsibilities and tasks of the personnel and with the results of any assessment of previous learning, ongoing training needs assessment and/or quality



Review if this training takes due account of relevant guidance developed by the EUAA and/or includes the modules of the European Asylum Curriculum, developed by the EUAA, related to access to the asylum procedure.

Review if such training is provided to all relevant staff (including new personnel, prior to or upon the start of their assignment, and refresher training for experienced staff) working at border crossing points and in detention facilities.

Tools

Survey addressed to the personnel of the relevant authority responsible for training and continuous professional development (e.g. HR department, training unit). Ask them about specific training on how to detect indications that an unaccompanied child may wish to apply for international protection and on how to ask questions in an age-sensitive manner when addressing unaccompanied children.

Consult existing training plans regarding this specific training.

Consult existing training records regarding the number of training sessions delivered, the number of staff who effectively participated in these training sessions and the relevance of the timing and target groups of delivered training (e.g. prior to or upon the start of their assignment for new personnel, refresher training for experienced personnel).

Consult training documentation, such as training syllabi, overviews of learning outcomes and material related to the assessment of the learning that took place and see to what extent it draws on the modules of the European Asylum Curriculum, developed by the EUAA, related to access to the asylum procedure.

Survey relevant personnel at border crossing points asking them which training they have followed and how effective they found them. Ask about relevant resources they can refer to if in doubt.

reviews —**when** this is the case for all the authorities concerned.

No. Personnel are not systematically trained neither on how to detect indications that an unaccompanied child may wish to apply for international protection, nor on how to ask questions in an age-sensitive manner or personnel are systematically trained only on one of these aspects or the training is not offered with regularity or is not at all in line with the responsibilities and tasks of the personnel or with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews – when this is the case for one or more of the authorities concerned.

Partially. Training on how to detect indications that an unaccompanied child may wish to apply for international protection and on how to ask questions in an age-sensitive manner is systematically delivered to all personnel and such training is offered with regularity but it is not entirely in line with the responsibilities and tasks of the personnel and with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews —when this is the case for all the authorities concerned. N/A. This is not an option for this indicator.





STANDARD 9: There is an effective mechanism in place to ensure that where an unaccompanied child makes an application, a representative is designated as soon as possible.

Indicator 9.1: The authorities that are likely to receive applications are instructed on how to refer the child to the competent child protection authorities.

Data collection

Guidance for assessment

Review if guidance exists, for personnel of authorities that are likely to receive applications, on how to promptly refer an identified unaccompanied child to the authority in charge of appointing a representative (also referred to as 'guardian') for unaccompanied children. Depending on the national set-up, this can be the judicial authority, the social welfare authority, local or regional authorities, etc.

Review if guidance in relation to referrals is clear and comprehensive (e.g. easily understandable and applicable instructions).

Review whether the guidance is regularly updated to reflect any changes in legislation or best practices.

Review if relevant personnel are aware of and follow available guidance on referrals for unaccompanied minors.

Tools

Survey managers of the authorities likely to receive applications asking them about the availability, content and dissemination of instructions provided to relevant personnel on how to refer unaccompanied children to authorities competent to appoint a representative.

Consult documents (such as guidelines and SOPs) regarding instructions on how to refer unaccompanied children to authorities competent to appoint of representatives (including the requirement to activate these mechanisms as soon as a case has been identified).

Rating system

Yes. Relevant staff within the authorities that are likely to receive applications are systematically instructed on how to refer unaccompanied children to authorities competent in the designation of representatives and systematically do so as soon as possible – when this is the case for all the authorities concerned.

No. Relevant staff within the authorities that are likely to receive applications are not systematically instructed on how to refer unaccompanied children to authorities competent in the designation of representatives or do not systematically do so or do so with delay – when this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Survey relevant personnel asking them about how they follow up when an unaccompanied child has been identified, in particular regarding referral mechanisms and time frames.

Consult individual case files or statistical data regarding the practical implementation of available guidance (e.g. actual time between identification and referral).

Survey authorities competent in the designation of representatives for unaccompanied children, asking them about their experience with referrals by authorities likely to receive applications, including about any potential concerns (e.g. delayed referrals).

Directly observe the workflow and procedures followed by the relevant personnel when identifying and referring unaccompanied children.

Indicator 9.2: The pool of qualified potential representatives is sufficient to ensure the timely appointment of a representative for each unaccompanied child and to ensure that representatives are not made responsible for too many cases at the same time.

Data collection

Guidance for assessment

Review if the qualifications and requirements for being a representative for unaccompanied minors are clearly laid out in national law or other official documents.

Review if a pool (list) of representatives has been set up at the level of the authority competent in the designation of representatives of unaccompanied children.

Review if the pool of qualified potential representatives of unaccompanied children is sufficiently large to ensure that representatives are appointed in a reasonable time frame, meaning that they are designated as soon as the need is identified.

Review if the pool is sufficiently large to allow representatives to perform their duties in the best interests of the child, taking into account the specific tasks and responsibilities of the representative and criteria to determine their maximum capacity, as stipulated by national law.

Rating system

Yes. The pool of qualified potential representatives for unaccompanied children is sufficiently large to systematically ensure that representatives can perform their duties effectively, that the best interests of the child are upheld and that representatives are systematically appointed in a timely manner as soon as the need has been identified — when this is the case for all the authorities concerned.

No. There is no pool of qualified potential representatives for unaccompanied children *or* it is not sufficiently large, meaning that, systematically, representatives cannot





Review if there are contingency measures in place which allow for the possibility to upscale the pool of representatives if needed.

Review if there are measures in place to address any imbalances or shortages in the pool of potential representatives (e.g. strategies to attract and retain representatives, such as temporary voluntary guardians or providing incentives or resources to encourage participation).

Review if there is a system in place to regularly monitor and evaluate the performance and workload of representatives for unaccompanied children (e.g. assessment of the number of cases assigned to each representative, their caseload management practices and any mechanisms to identify and address when representatives are responsible for too many cases simultaneously).

Tools

Consult national law and other official documents regarding the creation of a pool of potential representatives, recruitment procedures (including required qualifications, training, absence of conflicts of interest), descriptions of tasks and responsibilities of representatives and the maximum number of cases that may be allocated to one representative (or the criteria used to determine the maximum number of cases per representative) as well as contingency measures aiming at upscaling the pool if needed.

Survey managers of authorities competent in the designation of representatives, asking them about the size of the pool of potential representatives, contingency planning, recruitment procedures and requirements, descriptions of tasks and responsibilities, and criteria (legal or other) to determine a representative's maximum capacity, and about any concerns in this regard; collect statistics on representatives' appointment time frames, and representative / unaccompanied child ratios.

Consult guidance documents (such as guidelines or SOPs) for relevant personnel of the authorities competent in the designation of guardians, which should include the maximum period within which a representative has to be appointed and the maximum number of cases

perform their duties in the best interests of the child **or** representatives are not systematically appointed in a timely manner – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





that may be allocated to one representative (or the criteria used to determine the maximum number of cases per representative).

Survey managers of authorities likely to receive applications asking them about their experience with the appointment of representatives after they have referred unaccompanied children to the competent authorities, including potential concerns about delays.

Consult quantitative data to determine the average time taken to appoint a representative, the number of representatives available in the pool and the average caseload per representative.

Registration of the application

STANDARD 10: When a person makes an application, the application is registered on the spot or the applicant receives immediately an appointment for the registration within the next three working days, or within the next six working days when the application is made to an authority not competent for registering it.

Indicator 10.1: A system to manage appointments has been put in place for registrations that cannot take place on the spot.

Data collection

Guidance for assessment

Review if a system to manage appointments for registration (e.g. electronic scheduling system, prioritisation of vulnerable cases, assessment of interpretation needs, respect of the legal time frame, communication of the appointment to the applicant) has been created for use when an application cannot be immediately registered, both at the level of authorities that are competent to register applications and at the level of authorities that are not competent to register applications.

Review if relevant personnel in all relevant locations are aware of the existence of the system, know how to use it and do so in practice.

Rating system

Yes. A system to manage registration appointments has been put in place for registrations that cannot take place on the spot and is being used by relevant personnel – when this is the case for all the authorities concerned.

No. A system to manage registration appointments has not been put in place for registrations that cannot take place on the spot **or** a system has been put in place **but** it is not





Tools

Survey managers of registration locations asking them about the existence and functioning of a system to allocate and manage appointments in which applications are registered (i.e. registration appointments).

Consult documents (such as guidelines or SOPs) regarding instructions given to personnel on how to proceed when applications cannot be lodged immediately.

Survey relevant staff asking them about how to proceed with an application in locations where or situations when applications cannot be registered immediately and ask them how appointments are allocated and managed.

Directly observe the registration process to see if and how the personnel use the system to manage lodging appointments.

Survey managers of authorities where applications are registered at a later stage, asking them about the way appointments are received when applications are made with another authority that is not competent to register them.

being used by relevant personnel – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. The national set-up ensures that registrations are always registered on the spot.

Indicator 10.2: A work process, which includes the availability of sufficient staff and resources, ensures that the registration takes place within three working days or within six working days when the application is made to an authority not competent for registering it.

Data collection

Guidance for assessment

Review if processes are in place to allow applicants to register their applications within 3 working days or, if the application is submitted to an authority that is not competent in registration, within 6 working days.

Review if personnel in all relevant locations are aware of the existence of such processes and apply them in practice.

Rating system

Yes. Registration of applications is systematically ensured within 3 working days (or, if the application is submitted to a noncompetent authority, within 6 working days) – **when** this is the case for all the authorities concerned.

No. Registration is not systematically ensured within 3 working days (or, if the application is





Review if sufficient personnel and resources (e.g. IT materials, meeting rooms/booths, interpretation services) are available to allow the processing of registrations within the legal deadlines.

Tools

Survey managers of authorities competent to register applications on the registration processes in place and their efficiency.

Consult available data on registration processing times (including de facto processing times, broken down according to the authority to which the application was made).

Consult documents (guidelines or SOPs) regarding registration timelines.

Consult individual case files regarding time elapsed between making the application and the timing of registration.

submitted to a non-competent authority, within 6 working days) – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

STANDARD 11: The application is properly registered.

Indicator 11.1: The applicant is physically present for the registration of the application, unless otherwise provided by the national law or if the applicant cannot go to the registration centre for reasons beyond their control.

Data collection

Guidance for assessment

Review if national law (or other official documents) requires the physical presence of the applicant for the registration of the application or if it provides for exceptions where the applicants do not have to be present.

Where exceptions to the physical presence requirement are allowed in national legislation and practice, review if guidance is in place on alternative ways of remotely registering a person (e.g. based on documentation submitted or by telephone) and if relevant personnel follow available guidance.

Rating system

Yes. Applicants are systematically physically present for the registration of the application unless there are valid reasons for their absence – **when** this is the case for all the authorities concerned.

No. Applicants are not systematically physically present for the registration of the application **and** there are no valid reasons for their





Tools

Consult national law (or other official documents) regarding possible exceptions to the requirement for physical presence during registration.

Survey managers of authorities competent to register applications asking them about the processes in place to ensure that an applicant is physically present when registering or, if exceptions apply, to ensure that an applicant is registered remotely.

Consult documents (guidelines or SOPs) regarding guidance on the registration process, including how to ensure the effective remote registration of an applicant (e.g. technical requirements, interpreting services), if exceptions apply.

Survey managers of reception centres asking them about the processes in place to ensure that the applicants are physically present at their registrations and, if exceptions apply, what is in place to ensure effective remote registration (e.g. technical means and support if the registration is done by phone from the reception centre).

Directly observe registration by means of in-person interview during a visit to authorities competent in registration.

Directly observe remote registration processes during a visit to reception centres or other locations where remote registration can take place.

absence – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. National law does not require the physical presence of applicants during registration.

Indicator 11.2: Registration takes place in a manner that ensures privacy to the extent possible.

Data collection

Guidance for assessment

Review if the practical set-up during the registration of an application respects the applicant's right to privacy as much as possible, allowing the applicant to express themselves without being overheard or disturbed by others, if possible, by providing a separate, soundproof meeting room/area with controlled access, free from interference by other meetings or persons.

Rating system

Yes. Registration conditions systematically ensure privacy to the extent possible – **when** this is the case for all the authorities concerned.

No. Registration conditions do not systematically ensure privacy to the extent





Tools

Survey managers of staff responsible for the registration asking them about the practical setting in which registration formalities are completed.

Consult documents (guidelines or SOPs) that describe the material conditions in which registration formalities are completed, in particular regarding applicants' privacy.

Directly observe registration processes during visits to registration facilities to see the practical and material conditions in which registration is carried out.

possible – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 11.3: The personal details of each applicant are registered, irrespective of whether the application was made directly or by an applicant on behalf of dependants.

Data collection

Guidance for assessment

Review if, regardless of whether the application is made directly or by an applicant on behalf of a dependant, the registration of the personal details (including first name and surname, date and place of birth, family composition, nationality) of each applicant is ensured.

Tools

Survey managers asking them about the registration practice regarding the recording of applicants' personal details, including how information is recorded, what type of information is recorded and if any distinction is made in this regard for dependent applicants.

Consult documents (guidelines or SOPs) that describe the process of recording personal details (including the type of information recorded) for all applicants, including those who are dependent on another applicant.

Shadow relevant personnel during visits to registration locations to see how the personal details of all applicants, including dependants whose applications are made on their behalf, are registered.

Rating system

Yes. The registration of the personal details of each applicant (including of dependants) is systematically ensured – **when** this is the case for all the authorities concerned.

No. The registration of the personal details of each applicant (including of dependants) is not systematically ensured – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Consult registration form templates regarding the recording of personal details, including registration templates for dependent adults, if available.

Consult individual registration case files, including those of dependent applicants, regarding personal details.

Lodging of the application

STANDARD 12: The applicant is informed of their rights and obligations regarding the lodging of the application at the latest when the application is registered.

Indicator 12.1: Written information is given to the applicant on how and where to lodge the application as well as the consequences of not lodging an application.

Data collection

Guidance for assessment

Review if written information material (leaflets, brochures, etc.) regarding the lodging of the application is handed to the applicant during the registration process, or earlier in the procedure.

Review if the information provided to the applicant is sufficiently clear, accurate and complete regarding how and where the application should be lodged, including the time frames for lodging the application.

Review if translations of written information materials are available and, if so, if the targeted languages are relevant to the caseload (see indicator 22.1).

Review if this information is reflected in guidance documents (such as guidelines or SOPs) and if personnel are aware of and follow this guidance.

Rating system

Yes. Applicants systematically receive clear written information on how and where to lodge the application **and** on the consequences of not lodging an application, at the latest during registration – when this is the case for all the authorities concerned.

No. Applicants do not systematically receive written information on how and where to lodge the application **or** the information is provided but is unclear or inaccurate, the information is clear but is provided only past the registration stage – **when** this is the case for one or more of the authorities concerned.





Tools

Survey managers of relevant authorities asking them about the availability and content of written information on lodging and how this information is disseminated to applicants, and to what extent information is provided in languages relevant to the caseload.

Consult guidance documents (such as guidelines or SOPs) regarding the provision of information on where and how to lodge an application for international protection, the relevant timelines and the consequences of not lodging an application.

Consult translated materials and statistical data on applicants' languages regarding the relevance of selected languages.

Survey staff tasked with registering applicants asking them if they provide applicants with written material on lodging and what information is included in this material.

Shadow personnel at registration points to see if they provide written material on lodging to applicants and what information this material contains.

Consult relevant written material (e.g. leaflets, brochures, posters) provided to applicants at the registration stage to determine what information on how and where to lodge the application and the consequences of not lodging it includes.

Directly observe the availability of information in relevant languages in the form of translated materials in relevant languages.

Partially. Applicants systematically receive clear written information on how and where to lodge the application in all the authorities concerned **but** this information does not mention the consequences of not lodging an application – **when** this is the case for one or more of the authorities concerned.

N/A. The national set-up requires that registration and lodging of an application be done at the same time.

Indicator 12.2: The written information is complemented with oral explanations to ensure the understanding of the applicant when needed.

Data collection

Guidance for assessment

Review if a process is in place whereby applicants are systematically asked whether they understand the written information provided or if they need additional explanations.

Rating system

Yes. Applicants' understanding of written information is systematically verified **and**, if needed, is complemented with oral





Where information on lodging is normally provided in writing, review if additional oral explanations are provided to the applicant if a need for this has been identified (e.g. illiterate applicant, applicant with a lower educational level, applicant with mental disabilities, UAMs).

Review if, where complementary oral explanations are provided, interpretation in relevant languages is available, if necessary.

Review if there is guidance for personnel on how to ensure that applicants understand the information provided on lodging, and if the personnel are aware of and follow available guidance.

Tools

Survey managers of the registration authority asking them about measures taken to ensure applicants' understanding of the written information on lodging.

Consult guidance documents (such as guidelines or SOPs) regarding checking applicants' understanding of the written information on lodging procedures and the provision of complementary, needs-based, oral information.

Survey relevant personnel asking them how they ensure that applicants understand the written information and how to follow up if this is not the case.

Directly observe the registration process to see if personnel in charge of distributing the written information on lodging provide applicants with additional oral explanations when needed.

Consult registration form templates regarding verification of applicants' understanding of information on lodging (e.g. inclusion of the applicant's signature to confirm that written information was understood or that oral information was provided; a record that the applicant was asked if they understood the information and that they approved).

Review individual case files (completed registration forms) to check if applicants' understanding of information on lodging was, in practice, verified and complemented by additional oral information if needed.

explanations – **when** this is the case for all the authorities concerned.

No. Applicants' understanding of the written information is not systematically verified **or** such understanding is systematically verified **but** not complemented by oral explanations when needed – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. The national set-up requires that registration and lodging of an application be done at the same time.





STANDARD 13: The lodging of an application takes place as soon as possible after the registration.

Indicator 13.1a: Where national law provides that applications should be lodged through a specific form to be filled in by the applicant, the form is handed out upon registration, with explanations on how to transmit it to the determining authority.

Data collection

Guidance for assessment

Review if national law requires that an application be lodged through the submission of a specific form.

Review if explanations on how to submit the form to the determining authority are provided to the applicants by relevant personnel when they are handing out the form.

Review if, where necessary, interpretation is available in relevant languages when such explanations are provided.

Review if there is guidance for personnel on the handing out of a specific lodging form, including relevant explanations on where, when and how the applicant has to submit such a form.

Tools

Consult national law (or other official documents) regarding the requirement of lodging an application through the submission of a specific form.

Survey managers of the registration authority asking them about the availability of specific lodging forms at registration and the guidance provided to relevant personnel on providing applicants with explanations in this regard.

Consult guidance documents (such as guidelines or SOPs) regarding explanations provided to applicants on the submission of specific lodging forms.

Rating system

Yes. The specific lodging form is systematically handed out at registration **and** explanations are provided on how to submit such a form – **when** this is the case for all the authorities concerned.

No. The application form is not systematically handed out at registration *or* such an application form is handed out **but** explanations on how to submit such a form are not systematically provided to the applicant – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. The national set-up requires that registrations and lodging take place at the same time *or* national law does not require applications to be lodged by means of a specific form.





Directly observe the registration process to see if the relevant personnel hand out specific lodging forms and if applicants are provided with additional oral explanations on the submission of such a form.

Consult registration form templates to determine if it includes information provided on how to submit the form to the determining authority.

Or

Indicator 13.1b: Where national law provides that applications should be lodged in person and at a designated place after the registration, a system to manage appointment has been put in place for lodging which cannot take place on the spot.

Data collection

Guidance on information collection

Review if national law states that applications should be lodged in person and at a designated place after the registration.

Review if a system to manage lodging appointments has been put in place (including, for example, an electronic scheduling system, prioritisation of vulnerable cases, assessment of interpretation needs, respect of the legal time frame, communication of the appointment to the applicant), in case applications cannot be lodged immediately after registration.

Review if relevant personnel are aware of the existence of the system, know how to use it and do so in practice.

Tools

Survey managers of authorities likely to receive applications asking them about the existence and functionalities of a system to allocate and manage lodging appointments.

Consult guidance documents (such as guidelines or SOPs) regarding instructions given to personnel on how to proceed when applications cannot be lodged immediately.

Rating system

Yes. A system to manage lodging appointments has been put in place, for lodging that cannot take place on the spot *and* is systematically being used by relevant personnel – **when** this is the case for all the authorities concerned.

No. A system to manage lodging appointments has not been put in place for lodging that cannot take place on the spot or a system has been put in place but it is not being systematically used by relevant personnel – when this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. National law does not state that applications should be lodged in person and at a designated place after the registration or





Survey relevant staff asking them about how to proceed when applications cannot be lodged immediately, and about how appointments are allocated and managed.

requires that registrations and lodging take place at the same time.

Directly observe the workflow, in particular in cases when applications cannot be lodged immediately.

Indicator 13.2: A monitoring system has been put in place to track the time-lapse between the registration of the application and its lodging.

Data collection

Guidance for assessment

Review if a monitoring system (e.g. digital monitoring) is in place to track the time that elapses between an applicant registering an application and the application being lodged.

Review if the monitoring system clearly records the relevant dates and notifies relevant personnel when the legal time allowed is about to elapse.

Tools

Surveys managers and IT staff of the authorities/departments that operate the monitoring system regarding the functionalities of, efficiency of and data collected by the monitoring system.

Consult documents (guidelines and SOPs) regarding instructions on how to use the monitoring system.

Surveys staff charged with lodging applications regarding their use, and the efficiency, of the monitoring system.

Rating system

Yes. A monitoring system has been put in place to track the time between the registration of the application and its lodging **and** the system is being used by relevant staff to ensure that applications are lodged as soon as possible after registration – *when* this is the case for all the authorities concerned.

No. No monitoring system has been put in place to track the time between registration and lodging of applications **or** a system has been put in place **but** is not being used systematically to ensure that applications are lodged as soon as possible after registration – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. The national set-up requires that registrations and lodging take place at the same time.





STANDARD 14: Where national law requires that the applicant is interviewed in view of lodging the application, interpretation is provided where needed.

Indicator 14.1: Before or at the beginning of any such interview, the need for interpretation is assessed and addressed.

Data collection

Guidance for assessment

Review if processes are in place that allow for the swift evaluation of interpretation needs, their documentation and the deployment of the necessary interpretation before or at the beginning of the interview.

Tools

Survey managers of staff tasked with lodging applications, asking them about how and at what point in the process interpretation needs are evaluated, documented and followed up.

Survey managers of the interpretation services during the lodging stage asking them about the planning and availability of interpretation services and potential gaps.

Consult guidance documents (such as guidelines or SOPs) for personnel in charge of lodging regarding the identified interpretation needs of applicants.

Survey staff in charge of lodging asking them whether they have encountered any gaps in terms of interpretation needs.

Consult statistical data relating to applicants' languages and available interpretation services (e.g. database of interpreters and records on scheduling of interpreters, including when such an allocation could not take place due to the unavailability of interpreters in a relevant language).

Rating system

Yes. The need for interpretation is systematically assessed and addressed before or at the beginning of an interview – when this is the case for all the authorities concerned.

No. The need for interpretation is neither systematically assessed nor addressed **or** it is systematically assessed **but** not addressed before or at the beginning of an interview – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. National law does not require an interview to lodge the application.

Indicator 14.2: The pool of interpreters is sufficient to ensure the timely lodging of the application.

Data collection Rating system





Guidance for assessment

Review if a pool (list) of interpreters has been set up at the competent authority for lodging applications.

Review if the pool is sufficiently large and includes relevant languages (in relation to the caseload) to ensure that interpreting services can be provided in a timely manner, to allow for timely lodging of the application.

Review if contingency planning is in place allowing for swift adaptation to changing interpretation needs.

Tools

Survey staff managing the interpretation services during the lodging stage asking them about planning for interpretation, the availability of interpreters and the monitoring of interpretation needs as well as about contingency planning.

Survey managers of personnel tasked with lodging of applications asking them about potential interpretation-related reasons behind delays in lodging.

Consult documents (internal guidance and SOPs) to see if they specify a maximum time frame within which an interpreter is to be provided.

Consult statistical data relating to applicants' languages and available interpretation services (e.g. database of interpreters and records on scheduling of interpreters, including when scheduling could not take place due to the unavailability of interpreters in a relevant language).

Consult data on the time that elapses between registration and lodging regarding potential delays caused by unavailability of interpreters.

Yes. A sufficient number of interpreters with relevant languages are available to systematically ensure that applications can be lodged in a timely manner – **when** this is the case for all the authorities concerned.

No. The number of available interpreters is not sufficient or there is a lack of relevant languages, meaning that applications cannot be systematically lodged in a timely manner — **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. Where national law does not require an interview to lodge the application.





STANDARD 15: Where another authority other than the determining authority is responsible for the lodging, the case file reaches the determining authority as soon as possible after the lodging.

Indicator 15.1: There is a process in place to ensure the timely transfer of the application file to the determining authority.

Data collection

Guidance for assessment

Review if, at the level of the authority competent for lodging, the timely transfer of the application file to the determining authority is ensured (e.g. through an electronic system), with clear responsibilities for transferring, receiving and dispatching the application, including specific timelines and the notification to the sending authority of the receipt of the file, always ensuring that the principle of confidentiality is respected during the transfer of files.

Tools

Consult national law or other official documents regarding requirements regarding the transfer of files (e.g. timelines, technical specifications).

Survey managers of the authority competent for lodging asking them about the process in place, including timelines and potential delays, and the training of personnel on how to transfer files.

Consult documents (guidelines or SOPs) on how to transfer case files after lodging (including how to use the IT system, if available; applicable timelines; where to record notification of receipt).

Shadow staff tasked with file transfer at the level of the authority.

Rating system

Yes. The timely transfer of the application file to the determining authority is systematically ensured – **when** this is the case for all the authorities concerned.

No. The timely transfer of the application file to the determining authority is not systematically ensured – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. The transfer of the application file is not necessary in the national set-up (e.g. because the determining authority is competent to lodge applications).





Indicator 15.2: The determining authority tracks the time between the lodging and the receipt of the file.

Data collection

Guidance for assessment

Review if, at the level of the determining authority, a monitoring system is in place to track the time that elapses between an application being lodged and the receipt of the file by the determining authority.

Review if such a system is being consulted by relevant personnel to ensure the timely arrival of the file at the determining authority.

Tools

Consult national law or other official documents regarding requirements regarding the transfer of files (e.g. timelines, requirement to track the time).

Survey managers of the determining authority asking them about the process in place, including timelines and potential delays, and the training of personnel on how to transfer files.

Consult documents (guidelines or SOPs) on how to track timely receipt of case files sent by the lodging authority and how to follow up if delays have been identified.

Shadow staff tasked with case file management at the level of the determining authority.

Rating system

Yes. There is a system in place to track the transfer of the application file to the determining authority **and** it is being used by relevant personnel – **when** this is the case for all the authorities concerned.

No. There is no system in place to track the transfer of the application file to the determining authority **or** the system is not being used by relevant personnel – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. The transfer of the application file is not necessary in the national set-up (e.g. because the determining authority is competent to lodge applications).





STANDARD 16: Where an application was made by an applicant on behalf of their dependent adults with legal capacity, the consent of the dependants is requested, in writing.

Indicator 16.1: Dependent adults are informed individually and in a place that ensures sufficient privacy.

Data collection

Guidance for assessment

Review if authorities inform every dependent adult with legal capacity on whose behalf an application is made of their right to lodge a separate application.

Review if this information is conveyed in private to each dependent adult, for example out of earshot of the concerned relatives.

Tools

Consult national law and other official executory documents regarding the possibility of applications being made on behalf of a dependent adult.

Consult guidance documents (such as guidelines or SOPs) regarding the handling of applications by dependent adults (e.g. what information is provided to them, what questions are asked, what measures are taken to ensure the privacy of this interaction).

Shadow relevant staff to determine if dependent adults are, in private, informed of their right to make and lodge their own application.

Directly observe the set-up regarding practical and material conditions ensuring privacy (e.g. out of earshot of relatives).

Consult lodging form templates or other relevant documents regarding applications lodged by dependants (e.g. written verification that information was provided and was provided in private).

Consult individual case files of dependent adults to determine if it is recorded that relevant information was provided and if this information was provided in private.

Rating system

Yes. Dependent adults are systematically informed in a private setting of their right to lodge their own application – **when** this is the case for all the authorities concerned.

No. Dependent adults are not systematically informed of their right to lodge their own application **or** are not informed in a confidential setting – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. The national set-up does not provide for dependent adults with legal capacity to have their application lodged on their behalf.





Survey applicants who are dependent adults asking them if they were provided with the option to make and lodge their application, and whether this was done in a setting that ensured privacy.

Indicator 16.2: Dependent adults have been informed of the consequences of the lodging of the application on their behalf and of their right to make a separate application, before their application is lodged or before the personal interview.

Data collection

Guidance on information collection

Review if authorities inform every dependent adult with legal capacity of the consequences of lodging an application and their right to make a separate application.

Review if authorities provide this information in a timely manner, that is, before the application is lodged or before the personal interview.

Review if authorities request, in writing, confirmation of applicants' understanding of the consequences of not lodging their own application.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding the handling of applications by dependent adults (e.g. what and when information is provided to them, what questions are asked, how answers are to be recorded).

Consult lodging form templates or other relevant documents regarding applications lodged by dependants (e.g. written verification that information was provided, applicant's signature to confirm their understanding of the consequences of not lodging their own application).

Shadow relevant personnel to determine if dependent adults are, in private, informed of their right to lodge their own application and the consequences of not doing so and if their understanding of this information is verified and recorded in writing.

Rating system

Yes. Dependent adults are systematically informed about the consequences of the lodging of the application on their behalf **and** their right to make a separate application, in a timely manner — **when** this is the case for all the authorities concerned.

No. Dependent adults are not systematically informed about the consequences of the lodging of the application on their behalf **or** their right to lodge a separate application **or** they have not been informed in a timely manner – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. The national set-up does not provide for dependent adults with legal capacity to have their application lodged on their behalf.





Indicator 16.3: A form for obtaining the consent of dependent adults is used and is separate from the application form of the 'principal' applicant.

Data collection

Guidance on information collection

Review if the written consent of dependent adults whose application is lodged on their behalf is being recorded, by the lodging authority, by means of a dedicated form.

Review if this form is used and kept separately from the application form of the 'principal' applicant.

Tools

Survey managers of the authority competent to lodge applications, asking them if they use a form to obtain the consent of dependent adults and how this form is filed.

Consult guidance documents (such as guidelines or SOPs) regarding the handling of applications by dependent adults, in particular on how and where to record the dependent adult's decision (not) to lodge their own application.

Consult the lodging form template regarding applications lodged by dependants to check how their written consent (or decision to lodge their own application) is recorded.

Consult individual case files regarding the presence of a form for obtaining consent.

Rating system

Yes. A form for obtaining the consent of dependent adults is systematically used and kept separately from the application of the 'principal' applicants – **when** this is the case for all the authorities concerned.

No. There is no form for obtaining the consent of dependent adults **or** there is a form **but** it is not systematically kept separately from the 'principal' applicant's application – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. The national set-up does not provide for dependent adults with legal capacity to have their application lodged on their behalf.

Indicator 16.4: When informing dependants, interpretation is provided if needed.

Data collection

Guidance for assessment

Review if, where necessary, interpretation is provided when dependent adults receive information relating to the lodging of their application.

Rating system

Yes. Interpretation is, if needed, systematically provided when informing





Tools

Survey managers of the staff responsible for providing the information, asking them about the availability of interpretation services when providing information to dependent adults.

Consult guidance documents (such as guidelines or SOPs) to determine if they require that interpretation needs are assessed and addressed prior to providing information to the dependent adult.

Consult existing application templates; in particular, check that they include the evaluation and documentation of the need for interpretation.

Consult individual case files of dependent adults to determine if interpretation needs were evaluated and addressed.

dependants – **when** this is the case for all the authorities concerned.

No. Interpretation is not systematically provided when informing dependants, although needed – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

STANDARD 17: All applicants receive a document certifying their status.

Indicator 17.1: A system is in place to ensure that a document is issued as soon as possible after the registration of the application and/or at the latest within three working days of the lodging.

Data collection

Guidance on information collection

Review if the competent authority issues a document certifying an applicant's status as an applicant for international protection.

Review if this document is issued as soon as possible after the registration of the application or, at the latest, within 3 working days of the lodging.

Review if there is a process in place that systematises the issuance of documents within the prescribed timelines, including the tracking of time passed since registration or lodging.

Review if there is a process in place that ensures that applicants are informed of the issuance of this certificate (if not done on the spot) and that, where necessary due to the applicant's

Rating system

Yes. A system is in place to ensure that documents certifying the applicant's status are issued and provided to the applicant as soon as possible after the registration of the application or, at the latest, within 3 working days of the lodging.

No. There is no system in place ensuring that documents certifying the applicant's status are issued and provided to the





special needs, this certificate is delivered to the applicant (e.g. in the case of vulnerable applicants whose personal circumstances make it difficult for them to pick up the certificate in person).

Tools

Survey managers asking them about the process in place to issue certificates to applicants and to ensure that applicants have access to the certificate.

Consult guidance documents (such as guidelines or SOPs) regarding the provision of a certificate attesting the applicant's status, including applicable timelines; ways in which applicants are informed of the availability of the certificate; and ways to ensure that applicants with special needs can access their certificate.

Directly observe the workflow related to issuing and providing the certificate to the applicants.

Survey to organisations and persons providing legal counsel asking them about their clients' experience with the process.

applicant as soon as possible after the registration of the application or, at the latest, within 3 working days of the lodging.

Partially. This is not an option for this indicator.





Guarantees for the applicant

Procedural guarantees for applicants with special needs

STANDARD 18: A process has been established to identify, assess and respond to special needs within a reasonable period after an application for international protection is made and it is used throughout the procedure.

Indicator 18.1: The process clearly prescribes who is responsible for the identification, assessment of special needs and for ensuring the adequate response to allow applicants in need of special procedural guarantees to benefit from all the rights and comply with all the obligations during the procedure.

Data collection

Guidance for assessment

Review if authorities or service providers tasked with vulnerability assessment and providing adequate support to referred cases are clearly identified in national law or other official documents.

Review if guidance documents (such as guidelines or SOPs) clearly identify which authorities, units, staff members or external providers are responsible for the identification and assessment of special needs and for ensuring an adequate response.

Review if these documents also envisage that roles may need to be differentiated for different types of special procedural needs, especially for children, for needs related to gender, sexual orientation and gender identity and for medical illnesses or psychological disorders, in particular for the assessment and for ensuring an adequate response.

Review if relevant personnel are aware of and follow available guidance.

Rating system

Yes. Official documents clearly identify who is responsible for the identification and assessment of special needs and for providing an adequate response to the special needs of applicants and the distribution of these responsibilities is described in a sufficiently clear manner either in the official documents or in the complementing internal documents – when this is the case for all the authorities concerned.

No. Neither official nor internal documents describe who is responsible for the identification and assessment of special needs or for providing an adequate response to the special needs of applicants **or** the





Tools

Consult national law and other official documents to determine if authorities or service providers are clearly identified regarding their responsibilities for the identification and assessment of special needs and for ensuring an adequate response.

Survey managers asking them about the content and dissemination of internal documents to relevant personnel.

Consult guidance documents (such as guidelines or SOPs) available to staff at different competent authorities regarding the distribution and descriptions of tasks and responsibilities.

Survey relevant personnel (first-contact officials, registration officers, case officers) asking them about their tasks and responsibilities regarding the identification of special needs and follow-up actions for identified cases, and where to find relevant information if in doubt.

description is inaccurate or insufficiently clear— **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 18.2: Guidelines have been put in place on how to identify and assess special needs and how to respond to them.

Data collection

Guidance for assessment

Review if the authority has set guidance to ensure that applicants' special needs are considered by the personnel of authorities at every step of the procedure, including by authorities that are likely to receive applications and those that are tasked with the registration, lodging or examination of the applications.

Tools

Survey managers of the competent authorities asking them about whether internal guidance has been put in place and what aspects are covered by it.

Consult internal guidance (guidelines and SOPs) to verify if the guidance is clear, comprehensive and provides the measures and tools needed to allow for the formulation of adequate responses.

Rating system

Yes. Internal guidance about how to identify, assess and respond to special needs is in place – **when** this is the case for all the authorities concerned.

No. There is no internal guidance about how to identify, assess and respond to special needs or the guidance provided is inaccurate or insufficiently clear – when this is the case for one or more of the authorities concerned. Partially. This is not an option for this indicator.





STANDARD 19: The process to identify, assess and respond to special needs throughout the procedure is effectively applied.

Indicator 19.1: Sufficient resources are allocated to identify, assess and promptly respond to special needs.

Data collection

Guidance for assessment

Review if sufficient human and other resources (e.g. IT equipment, meeting rooms/booths, interpretation services) are available, in relation to the caseload, to ensure the identification and assessment of special needs and a timely response to those needs.

Review if relevant personnel have adequate time to explore and identify special needs, to assess them in a timely manner (without resulting in an unreasonable backlog) and to promptly and effectively implement the required follow-up measures.

Tools

Survey managers asking them about the allocation of resources for the identification of, assessment of and response to special needs (e.g. number of personnel competent to conduct interviews dedicated to special needs assessment); ask them about the monitoring of the caseload for planning purposes.

Shadow relevant personnel during registration interviews and personal interviews to determine if and how special needs are verified and if an adequate response or referral is implemented.

Survey staff responsible for the identification and assessment of special needs and for the implementation of follow-up measures, asking about their ability to implement the available guidance related to special needs, their workload, available support and their capacity to perform their task to the best of their ability and in respect of timelines.

Consult individual case files or statistical data from the authority's case-handling system regarding time elapsed between identification of, assessment of and response to special needs.

Rating system

Yes. Sufficient resources are made available to ensure that applicants' special needs are systematically identified, assessed in a timely manner and promptly responded to – *when* this is the case for all the authorities concerned.

No. Resources allocated to the identification of, assessment of and response to applicants' special needs are insufficient to the extent that the identification of assessment of or response to special needs is not systematically ensured or does happen but only with an unreasonable delay – when this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Consult individual case files regarding adequacy of responses given to identified special needs.

Indicator 19.2: The initial identification and assessment of special needs is conducted within a reasonable time, ensuring at the same time that special needs that become apparent at a later stage are adequately identified and assessed.

Data collection

Guidance for assessment

Review if there is a mechanism for the identification and assessment of special needs that is implemented at the early stages of the procedure (at the making, registration or lodging stage) and that there is no unreasonable backlog in the assessment process (where such a process is needed).

Review if processes are in place to ensure that special needs are adequately identified should they arise or become apparent at any point later in the procedure (e.g. at the stage of the personal interview).

Review if the examination of applications of persons with special needs is concluded within the regularly expected time limits.

Tools

Consult documents (guidelines or SOPs) available to personnel regarding registration of the making and/or lodging of an application to verify if or to what extent the process to identify special needs is initiated from the outset of the procedure.

Consult documents (guidelines or SOPs) available to the personnel of the determining authority regarding the identification of special needs at the outset or during the examination stage.

Consult templates of registration forms, lodging forms and other relevant forms (e.g. screening forms used by the determining authority before scheduling the personal interview) to check if they provide a dedicated space in which to record any identified special needs.

Rating system

Yes. The initial identification is systematically conducted during the registration of the making and/or lodging of an application and additional identification takes place during the personal interview and the assessments are systematically done within a reasonable time and the overall examination is systematically concluded within the regular time limits.

No. The identification is not systematically done at the first possible opportunity or not done at all **or** assessments are not systematically carried out within a reasonable time **or** the examination of the applications of persons with special needs is systematically not concluded within the regular time limits.

Partially. This is not an option for this indicator.





Consult data and statistics (e.g. output from the monitoring system) on any backlog for vulnerability assessment and the total time for the examination of cases of persons with special needs.

Consult individual case files to check if special needs identified at a later stage of the procedure could and should have been identified earlier.

Indicator 19.3: Where relevant, specialised actors are involved in the assessment of special needs.

Data collection

Guidance for assessment

Review which authorities or service providers are tasked with assessing special needs.

Review if specialised professionals (e.g. psychologists, doctors) are involved in the assessment of special needs whenever there are indications that an applicant may have special needs (e.g. if there are indications that the applicant may suffer from a mental disorder).

Review is there is there a pool (list) of qualified specialised professionals available for special needs assessment services and if this list is sufficient and adequate in relation to the caseload, both in terms of quantity and nature of the needed interventions.

Tools

Consult documents (such as guidelines or SOPs, and any inventory of specialised professionals) relating to the contacting of specialised professionals and the procedure of involvement and referral.

Survey staff tasked with the assessment of special needs asking them about their knowledge of and experience with specialised professionals.

Consult data/statistics related to the ratio of specialised professionals to applicants with special needs, taking into account the type of intervention needed.

Rating system

Yes. Specialised professionals are systematically involved in the assessment of special needs whenever there are indications that an applicant may have special needs – **when** this is the case for all the authorities concerned.

No. Specialised professionals are not systematically involved in the assessment of special needs even though there are indications that an applicant may have special needs – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Survey specialised professionals eligible to be called upon by the authorities for the needs assessment, asking them about their experiences, notably in terms of workload, timely appointment and adequacy of referrals.

Consult individual case files to verify if specialised professionals were consulted when needed.

Indicator 19.4: Communication channels and cooperation between the reception authorities and the determining authority are established and used.

Data collection

Guidance for assessment

Review if there are communication channels and cooperation mechanisms between reception authorities and asylum authorities (e.g. cooperation protocols, weekly meetings, dedicated email addresses, specific personnel tasked with liaising between the authorities) and if they are being used effectively to support the identification, assessment and response formulation processes for special needs.

Review if relevant personnel are aware of and use these communication channels and cooperation mechanisms.

Tools

Survey managers of both reception and determining authorities asking them about the set-up and functioning of communication channels and cooperation mechanisms.

Survey staff directly involved in the communication and cooperation mechanisms for each authority asking them about how and when they use these communication channels and mechanisms.

Consult cooperation protocols between reception authorities and the determining authority (including communication methods, purpose, frequency and staff involved).

Rating system

Yes. Communication channels and cooperation between the reception authorities and asylum authorities are established and systematically used to support the processes relating to special needs – when this is the case for all the authorities concerned.

No. Communication channels and cooperation are either not established **or** established but not systematically used to support the processes relating to special needs – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.



Consult desk reports, communication records or meeting minutes attesting to the actual use of these channels and cooperation mechanisms.

Survey relevant staff at the asylum authorities (including registration officers, case officers or their team leaders) asking them about their knowledge of communication channels and cooperation with reception authorities.

Survey relevant staff at the reception centres asking them about their knowledge of communication channels and cooperation with the asylum authorities.

Indicator 19.5: Referral mechanisms should be appropriately used in every relevant case.

Data collection

Guidance for assessment

Review if there are standardised referral mechanisms/tools (e.g. contact lists and channels, referral forms and protocols) to refer applicants to specialised, governmental and/or non-governmental actors to support processes relating to special needs.

Review if relevant personnel use these referral mechanisms in an appropriate manner (i.e. reaching out, in a timely manner, to the appropriate specialist, using the appropriate means of contact, sharing relevant case information in full respect of the confidentiality safeguards and ensuring adequate follow-up).

Tools

Consult documents (such as SOPs or guidelines) regarding the use of referral mechanisms and the tools that are there to support those mechanisms.

Consult relevant documentation attesting to the actual use of referral mechanisms/tools (minutes, emails, database entries).

Survey relevant staff asking them about their knowledge and use of referral mechanisms.

Consult individual case files to verify if referrals were effectively implemented when needed.

Rating system

Yes. Referral mechanisms exist and are being used appropriately when needed – **when** this is the case for all the authorities concerned.

No. There are no referral mechanisms or they are being used insufficiently or inappropriately (e.g. applicant referred to inappropriate specialists) – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Provision of information and counselling

STANDARD 20: An adequate mechanism to provide free of charge, legal and procedural information upon request has been established.

Indicator 20.1: The roles of the actors providing information and when are clearly defined.

Data collection

Guidance for assessment

Review if national law or other official documents clearly define the identity and the tasks and responsibilities of the actors mandated to provide free-of-charge legal and procedural information in relation to the different stages of the asylum procedure, including at which stage of the asylum procedure these responsibilities apply.

Review if the above is further clarified in internal documents of the administration, such as quidance and SOPs.

Review if the relevant personnel of the relevant authorities or other actors involved in information provision are aware of their tasks and responsibilities.

Tools

Consult national law and other official documents to determine if authorities or service providers are clearly identified regarding their responsibilities for information provision.

Consult guidance documents (such as guidelines or SOPs) available to personnel at different competent authorities regarding the distribution of tasks and responsibilities.

Survey personnel asking them about their tasks and responsibilities regarding information provision and where to find relevant information if in doubt.

Rating system

Yes. The roles are clearly defined in official documents **and** are described in a sufficiently detailed manner either in the official documents or in the complementing internal documents – **when** this is the case for all the authorities concerned.

No. The identity and roles of the actors providing information are not clearly defined in either official or internal documents **or** they the descriptions are insufficiently detailed – **when** this is the case for at least one of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 20.2: The responsibility for developing and keeping the information up-to-date is clearly defined.





Data collection

Guidance for assessment

Review if national law or other official documents clearly define who is responsible for developing and updating procedural information in relation to the different stages of the asylum procedure.

Review if the above is further clarified in internal documents of the administration, such as guidance and SOPs.

Review if the relevant personnel of the relevant authorities or other actors involved in developing and updating information provision are aware of their tasks and responsibilities.

Tools

Consult official documents that set out the tasks and responsibilities of actors competent to provide information, including the task of developing, distributing and updating information on the asylum procedure.

Consult guidance documents (such as guidelines or SOPs) that set out the tasks and responsibilities of actors competent to provide information, including the task of developing, distributing and updating information on the asylum procedure.

Rating system

Yes. The identity and roles of the actors responsible for developing and updating the information are clearly defined in official documents and are described in a sufficiently detailed manner either in the official documents or in the complementing internal documents and the relevant personnel are aware of their roles – when this is the case for all the authorities concerned.

No. The identity and role of the actors who are responsible for developing and keeping the information up to date are not clearly defined either in official documents or in internal documents – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 20.3: Applicants are informed about the steps of the procedure and the applicable timeframes.

Data collection

Guidance for assessment

Review if applicants receive, in writing and/or verbally, information about each step of the asylum procedure, including detailed and accurate information on the deadlines applicable to

Rating system

Yes. Applicants systematically receive sufficiently detailed information about the different steps **and** applicable time frames of





each step, the rights and obligations of applicants and the rights and obligations of the authorities in respect of applicants. Information should be detailed, practical and understandable, to allow applicants to exercise their rights and fully comply with their obligations throughout the asylum procedure.

Tools

Consult official documents regarding content that should be included in information provided to applicants.

Consult guidance documents (such as guidelines or SOPs) that set out the information to be provided on procedural steps and applicable time frames.

Consult relevant information provision materials (brochures, leaflets, videos) that are made available to applicants by different actors involved in information provision and check the content for accuracy and clarity in relation to the procedural steps and applicable time frames.

Survey staff of authorities providing information asking them about the content and timing of the information provided.

Survey applicants asking them whether they were informed about the steps of the procedure and applicable time frames, by whom, when and whether they received this information verbally / in writing.

the asylum procedure – **when** this is the case for all the authorities concerned.

No. Applicants do not systematically receive information about the steps of the procedure **or** they do not systematically receive information on the applicable time frames for these steps – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 20.4: Applicants are informed about rights and obligations, including the obligation to submit the elements needed to substantiate the application for international protection, and the possible consequences of not complying with their obligations and not cooperating with the authorities.

Data collection

Guidance for assessment

Review if written and oral information provided to applicants clarifies the rights and obligations associated with their status.

Rating system

Yes. Applicants are systematically informed of their rights and obligations, including the obligation to submit the elements needed to substantiate the application for international





Review if information provided includes information on applicants' obligation to submit the elements required to substantiate their application (e.g. documents if available).

Review if information provided includes information on the possible consequences of not complying with their obligations and of not cooperating with the authorities.

Tools

Consult documents (such as guidelines and SOPs) regarding the content and presentation of information, including rights and obligations of applicants and the potential consequences of not complying/cooperating.

Consult relevant information provision material (brochures, leaflets, videos) available to applicants at different stages of the procedure to determine if this material contains information on applicants' rights and obligations and on the consequences of non-cooperation.

Shadow personnel providing information to applicants, regarding the content of verbal information communicated.

Survey relevant personnel asking them about information provided to applicants on their rights and obligations.

Survey applicants asking them whether they were informed of their rights and obligations, and the consequences of non-compliance.

protection **and** the possible consequences of not complying with their obligations and not cooperating with the authorities – **when** this is the case for all the authorities concerned.

No. Applicants are not systematically informed either of their rights and obligations or of the possible consequences of not complying with their obligations and not cooperating with the authorities – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 20.5: The information on the different steps of the procedure is provided in a timely manner to enable applicants to exercise their rights and to comply with the obligations.

Data collection

Guidance for assessment

Rating system

Yes. Applicants are systematically provided with procedural information in a timely manner, allowing them to fully exercise their rights and comply with their obligations –





Review if applicants are given procedural information verbally or in writing, and whether this is done at relevant times or as early as possible, thereby allowing applicants to be aware of their rights and to fulfil their obligations.

Tools

Consult documents (guidelines or SOPs) regarding the timing of information provision on rights and obligations.

Survey relevant personnel asking them at what stage they inform applicants of their rights and obligations.

Survey applicants asking them at which stage of the procedure they were informed of their rights and obligations.

when this is the case for all the authorities concerned.

No. Applicants are not systematically provided information in a timely manner **or** are provided with only partial information – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

STANDARD 21. The mechanism to provide legal and procedural information is effectively applied.

Indicator 21.1: Sufficient resources are allocated to ensure an effective provision of legal and procedural information.

Data collection

Review if sufficient human and other resources are available, in relation to the caseload, to ensure the efficient provision of legal and procedural information.

Tools

Survey managers asking them about the allocation of resources for information provision and potential efficiency concerns in this regard.

Shadow relevant personnel during information provision.

Survey staff responsible for information provision asking them about the availability of resources and potential efficiency concerns in this regard.

Rating system

Yes. Sufficient resources are made available to ensure an effective provision of legal and procedural information – **when** this is the case for all the authorities concerned.

No. Resources made available for the provision of legal and procedural information are insufficient to the extent that this information cannot be provided in an effective manner — **when** this is the case for one or more of the authorities concerned.





Consult individual case files or statistical data from the authority's case-handling system regarding information provision.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 21.2. The personnel that provide information, clarifications and explanations have the necessary knowledge and skills.

Data collection

Guidance for assessment

Review if personnel tasked at any stage of the procedure with providing legal and procedural information, clarifications and explanations have the necessary subject matter knowledge and appropriate communication skills to convey information.

Review if guidance on providing information and on communication skills is available to personnel tasked with information provision.

Review if relevant personnel are aware of and follow the available guidance.

Tools

Survey managers of relevant authorities asking them how they ensure that their personnel have the necessary knowledge and skills (e.g. recruitment criteria, on-the-job training, coaching, shadowing).

Consult documents (guidelines or SOPs) regarding the timing of information provision on rights and obligations.

Directly observe during a visit to the authorities in charge of information provision.

Shadow relevant staff (e.g. registration officers, lodging officers, case officers) during information provision at any stage of the procedure.

Consult individual case files (in particular, interview transcripts) to check what kind of information was provided and how it was conveyed.

Rating system

Yes. The personnel tasked with providing information, clarifications and explanations have the necessary knowledge and skills **and** the information, clarifications and explanations provided are systematically of good quality – when this is the case for all the authorities concerned.

No. The personnel tasked with providing information, clarifications and explanations do not have sufficient knowledge and skills **and** the information, clarifications and explanations provided are not systematically of good quality – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Indicator 21.3: The functioning of the mechanism is assessed regularly

Data collection

Guidance for assessment

Review if a system is in place to monitor, on a regular basis, the mechanism by which legal and procedural information is provided to applicants.

Review if such a system is effectively operational.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding the establishment and functioning of a case monitoring mechanism.

Directly observe the functioning/operationalisation of information provision monitoring to check if they allow to monitor if information is being provided in an efficient manner.

Survey staff of authorities in charge of the examination asking about the functioning of the mechanism for monitoring of information provision.

Rating system

Yes. A system which monitors the efficiency of the provision of legal and procedural information to the applicants exists **and** is effectively operational in a way that the efficiency of information provision is regularly assessed – **when** this is the case for all the authorities concerned.

No. No monitoring system that allows to monitor the efficiency of information provision exists **or** such a system exists but is not being used in a way that allows to regularly assess the efficiency of information provision.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 21.4: Possible deficiencies in the functioning of the mechanism are promptly addressed.

Data collection

Review if a system is in place to ensure that any identified shortcomings concerning the information provision and the efficiency thereof are immediately addressed.

Review if the concerned authorities promptly and effectively implement the required followup measures.

Rating system

Yes. Possible deficiencies in the functioning of the information provision mechanism are addressed **and** this is done promptly – **when** this is the case for all the authorities concerned.

No. Possible deficiencies in the functioning of the information provision mechanism are not





Tools

Survey managers of relevant authorities asking them how they ensure that any deficiencies detected in the information provision mechanism are addressed and that this is done in a prompt manner.

Consult guidance documents (such as guidelines or SOPs) regarding the adoption of follow-up measures and the timing thereof.

Shadow relevant personnel to determine how potential deficiencies are acted upon.

Survey staff responsible for information provision, asking them about how they handle potential deficiencies, in particular what follow-up actions they would take (e.g. escalate information, what follow-up measures are available at their level) and the applicable timelines.

addressed **or** this is not done in a prompt manner— **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

STANDARD 22: Ensure that information about the procedure and their individual case can be understood by the applicant.

Indicator 22.1: Where the information is provided in writing, the message is expressed in a clear and non-technical way and where possible in a language the applicant understands.

Data collection

Guidance for assessment

Review if written information (printed or online) provided to applicants is expressed in a way that is comprehensible to all applicants and translated, at a minimum, into the most relevant languages (in relation to the caseload).

Review written information to determine if it avoids terminology that is excessively technical or unclear.

Review if guidance is available for personnel on the development and translation of written information.

Rating system

Yes. Written information is systematically provided in a clear and non-technical way in languages relevant to the caseload – **when** this is the case for all the authorities concerned.

No. Written information is not systematically provided in a clear and non-technical way **or** is not provided in languages relevant to the





Tools

Survey managers tasked with organising the translation of information materials, asking them about the selection criteria for the translation of material (including continued monitoring of the caseload for new language needs), the availability of translated materials and potential gaps in this respect.

Consult guidance documents (such as guidelines or SOPs) for personnel in charge of information provision regarding the distribution of translated materials to applicants.

Consult translated materials and statistical data on applicants' languages to determine if the languages into which materials are translated are the most relevant languages in relation to the caseload.

Consult information material available to applicants, including translated material, to determine the clarity of the information provided, the quality of translation and the availability of materials in the relevant languages.

Directly observe the availability of relevant information in relevant languages in the form of translated materials and their dissemination to applicants in relevant locations.

caseload – **when** this is the case for one or more of the authorities concerned.

Partially. Written information is systematically provided in a clear way and in languages relevant to the caseload in all the authorities concerned **but** some of this information is too technical or unclear on some non-key aspects – **when** this is the case for one or more of the authorities concerned.

N/A. Information is not provided in writing.





Indicator 22.2: Where necessary, the information is also provided orally in a language the applicant understands.

Data collection

Guidance for assessment

Review if, where information is normally provided in writing, there is guidance for relevant personnel describing how to provide the information orally when the applicant cannot read or if the authorities already know that the applicant's special needs or personal circumstances are likely to make written communication ineffective.

Review if guidance ensures that relevant staff provide verbal information in a language understood by the applicant, with the assistance of an interpretation service, when necessary.

Review if relevant staff are aware of and follow available guidance.

Tools

Survey personnel managing interpretation services asking them about the planning of, availability of and potential gaps in interpretation services for information provision.

Consult documents (such as guidelines or SOPs) concerning the language used when providing information verbally and concerning the use of terminology / interpreter assistance when providing information verbally.

Consult individual case files to check if information was provided orally to the applicant in a language they understand.

Directly observe during a visit to the authorities regarding verbal information provided and interpretation used.

Shadow relevant personnel providing verbal information.

Rating system

Yes. Processes are in place to ensure that, when necessary, information is systematically provided orally in a language the applicant understands – **when** this is the case for all the authorities concerned.

No. There are no processes in place to ensure that, when necessary, information is systematically provided orally in a language the applicant understands — **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Indicator 22.3: When information is given orally, the authority ensures that the applicant has understood the information given.

Data collection

Guidance on information collection

Review if, where information is provided verbally, processes are in place and personnel are instructed to ensure that the applicant has understood the information by asking the applicant to confirm, verbally and by means of a signed confirmation, that they have understood the information.

Review if relevant personnel are aware of and follow available guidance.

Tools

Consult guidance (guidelines and SOPs) regarding verification of an applicant's understanding of the verbal information provided and how to identify that the assistance of an interpreter is required.

Consult templates of relevant forms used at different stages of information provision regarding confirmation of applicants' understanding (e.g. forms have a dedicated space where the applicant signs to confirm).

Survey relevant staff asking them how they explain procedural information verbally and how they make sure that it is explained in a language the applicant understands.

Rating system

Yes. Processes are in place to ensure that the applicant has understood the information given **and** they are systematically being implemented in practice – **when** this is the case for all the authorities concerned.

No. There are no processes in place to ensure that the applicant has understood the information given **or** they are being implemented non-systematically or not at all – **when** this is the case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Indicator 22.4: Information is provided in a manner taking into account the special needs and individual circumstances of applicants.

Data collection

Guidance on information collection

Review if, when the special needs or personal circumstances of the applicant (e.g. children, persons who are illiterate or have a low level of education, elderly persons, persons with cognitive difficulties or impairments and persons who suffer from trauma) mean that the method of providing information is not effective, the authority adapts the method to suit the applicant's needs (e.g. child-friendly language for minor applicants, interpreter for sign language, interpreter of a specific gender for a victim of sexual violence).

Review if there is guidance for relevant personnel on how to adapt information to the level of understanding of the applicant and if personnel are aware of and follow available guidance. Review, if the authority records applicants' special needs, if these needs will be met in subsequent instances of information provision.

Tools

Survey managers of relevant authorities asking them about measures taken to adapt information provision material and communication techniques, including the dissemination of guidance to the personnel in charge of information provision.

Consult written information provision materials to determine if they are adapted to the age and level of understanding of applicants with special needs (e.g. specific leaflets for minors, use of illustrate materials for illiterate applicants).

Consult guidance documents (such as guidelines or SOPs) regarding the needs-based adaption of relevant information.

Survey staff in charge of information provision asking them how they adapt their communication to the person's special needs and personal circumstances.

Shadow staff in charge of information provision at different stages of the procedure.

Consult individual case files of applicants with special needs at the end of the procedure, if subsequent instances of information provision were recorded.

Rating system

Yes. Processes are in place and are implemented to ensure that information is systematically provided in a manner that takes into account the special needs and individual circumstances of applicants – **when** this is the case for all the authorities concerned.

No. There are no processes in place to ensure that information is systematically provided in a manner that takes into account the special needs and individual circumstances of applicants – **when** this is the case for one or more of the authorities concerned.

Partially. There are processes in place to ensure that information is provided in a manner that takes into account the special needs and individual circumstances of the applicants in all the authorities concerned, but this cannot be systematically implemented for objective reasons (e.g. non-availability of interpreter of the requested gender) in one or more of the authorities concerned.





Right to legal assistance and representation in the asylum procedure

STANDARD 23: Information on the possibilities to access legal assistance and representation is provided to the applicant upon request.

Indicator 23.1: The information contains the conditions under which free of charge legal assistance and representation is provided and the steps to be followed to request legal assistance.

Data collection

Guidance for assessment

Review if information provided to the applicants exhaustively enumerates and explains the conditions under which applicants can request free-of-charge legal assistance and representation; the information should be available in writing or, where written information cannot be understood by the applicant (e.g. illiterate applicants), made available orally, with the assistance of an interpreter, if needed.

Review if the information provided clearly explains the specific steps the applicant has to follow to submit a request for such legal assistance.

Tools

Consult documents (such as SOPs or guidelines) on information provision regarding access to free legal assistance.

Consult written information provision materials (brochures, leaflets, posters, authority's website) available to applicants on access to free legal assistance regarding the conditions to be met and steps to be followed.

Consult templates of relevant documents (such as registration and lodging forms) to see if they include checklists that attest to the fact that the applicant has been provided with information on the conditions to be met to qualify for free legal assistance and the steps to follow to request free legal assistance.

Rating system

Yes. The information provided systematically includes clear and detailed information on the conditions under which free-of-charge legal assistance is provided and how it can be requested — **when** this is the case for all the authorities concerned.

No. The information provided does not systematically include either the conditions under which free-of-charge legal assistance is provided or how it can be requested **or** the information is inaccurate or entirely unclear – **when** this is case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Shadow relevant personnel to check if the information they provide in relation to legal assistance includes the conditions to be met and steps to follow to request it.

Indicator 23.2: The information includes an overview of the actors that can provide legal assistance and representation according to national law.

Data collection

Guidance on information collection

Review if the information provided to applicants includes an exhaustive overview (list) of all actors (both governmental and non-governmental) that provide legal assistance and representation, broken down by geographical location, where necessary, based on national law.

Tools

Consult national law to identify all actors who can provide legal assistance and representation, based on national law.

Consult documents (such as SOPs or guidelines) on information provision regarding actors who can provide legal assistance.

Consult written information provision materials (brochures, leaflets, posters, authority's website) available to applicants on access to free legal assistance regarding the conditions and steps to be followed.

Consult templates of relevant documents (such as registration and lodging forms) to determine if they include checklists that attest to the fact that the applicant has been provided with an overview of the actors that can provide legal assistance.

Shadow relevant personnel to check what type of information they provide in relation to legal assistance.

Rating system

Yes. The information provided systematically includes an overview of the actors who can provide legal assistance, in accordance with national law — **when** this is the case for all the authorities concerned.

No. The information provided does not systematically include an overview of the actors who can provide legal assistance, in accordance with national law, **or** the information is inaccurate or entirely unclear – **when** this is case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Indicator 23.3: Information on the possibility to contact providers of legal assistance is provided in a timely manner for the applicant to exercise their right to an effective remedy.

Data collection

Guidance on information collection

Review if applicants receive the information that they can contact legal assistance providers.

Review if applicants receive this information in a timely manner, meaning as soon as possible or at least without unreasonable delay, depending on applicable timelines at different stages of the procedure (e.g. in time to be assisted during a lodging interview, or leaving enough time for legal counsel to prepare the appeal with their client).

Tools

Consult documents (such as SOPs or guidelines) on information provision regarding information on the option to contact providers, and when this information is provided.

Consult written information provision materials (brochures, leaflets, posters, the authority's website) available to applicants regarding the possibility of contacting providers.

Consult templates of relevant documents (such as registration and lodging forms) to see if they include checklists that attest to the fact that the applicant has been provided with information about the option to contact providers.

Shadow relevant staff to check what type of information they provide in relation to the option of contacting providers and when this information is provided.

Survey providers of legal assistance asking them about their clients' experiences with the provision of this type of information and about any concerns in this regard (e.g. legal representatives are regularly contacted with undue delay because applicants were not informed in time).

Rating system

Yes. Applicants are systematically informed in a timely manner that they have the option to contact legal assistance providers and can therefore exercise their right to an effective remedy – **when** this is the case for all the authorities concerned.

No. The applicants are not systematically informed that they have the possibility of contacting legal assistance providers **or** they do not systematically receive this information in time – **when** this is case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





STANDARD 24: Free legal assistance and representation is not arbitrarily restricted.

Indicator 24.1: Rules for the processing of requests for free legal assistance and representation are clear and accessible to the applicant, according to the national law.

Data collection

Guidance on information collection

Review if rules on processing requests for free legal assistance provided to applicants are clear (i.e. free from ambiguity) and easily accessible.

Tools

Consult national law to identify the provisions that regulate the processing of requests for free legal assistance and representation.

Survey managers and personnel tasked with processing requests for legal assistance asking them about the rules on processing requests and how they are applied in practice.

Consult documents (such as guidelines or SOPs) regarding the clarity of rules on processing requests.

Consult written information provision materials (brochures, leaflets, posters, the authority's website) available to applicants regarding rules communicated to the applicant on processing requests for free legal assistance and representation.

Shadow relevant personnel to observe how information is provided to applicants regarding rules on processing requests for free legal representation and assistance.

Rating system

Yes. Rules on processing requests for free legal assistance and representation are systematically clear **and** accessible to applicants – **when** this is the case for all the authorities concerned.

No. The rules on processing free legal assistance are not systematically clear **or** not systematically accessible to the applicant – **when** this is case for one or more of the authorities concerned.

Partially. The rules on requesting free legal assistance and representation are systematically accessible and generally clear to the applicant in all the authorities concerned but they lack specificity on some non-key aspects – when this is the case for one or more of the authorities concerned.





STANDARD 25: The legal advisor or other counsellor admitted or permitted as such under national law, who assists or represents an applicant, has timely access to the information in the case file on which the decision is based.

Indicator 25.1: Rules are in place to regulate access to relevant information in the file.

Data collection

Guidance for assessment

Review if there are rules, set out in writing, at the level of each competent authority, that clearly define how requests for access are to be submitted, received and processed; in particular, check that the conditions to be met to grant access to the information in the case files on which the decision is based are clearly stipulated to legal advisors or other counsellors.

Review if there are rules in place to ensure that access is granted in a timely manner.

Review if there is guidance for relevant personnel regarding who can access case files, and if the guidance makes clear that access should be granted to legal advisors or counsellors permitted by national law to access case files, as well as to those who assist or represent the applicant; the criteria to be met for access to case files be granted (and to which information in the case files access is granted); and the timeline for examining the requests and providing a reply.

Review if relevant personnel are aware of and follow available guidance.

Tools

Consult national law to identify the provisions that regulate access to case files.

Survey managers and staff tasked with processing requests for access to case files, asking them about the rules on processing requests, eligibility and applicable timelines.

Consult guidance documents (such as guidelines or SOPs) regarding the clarity of rules on processing requests for access to case files.

Rating system

Yes. There exist clear rules defining who can access case files, and such rules make clear that legal advisors or counsellors admitted or permitted to do so by national law and those who assist or represent the applicant are to be granted access and these rules contain criteria to be met for access to casefiles to be granted and these rules are systematically followed in practice and therefore ensure timely access to the applicant's case file – when this is the case for all the authorities concerned.

No. There are no rules that define who can access case files **or** criteria based on which access can be granted *or* rules exist but they lack clarity **or** they exist but are followed nonsystematically or only with undue delay – **when** this is case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Consult written materials (e.g. authority's website) available to relevant stakeholders (including applicants and legal representatives) regarding rules on regulating access to applicants' case files.

Survey legal representatives asking them about their experience of requesting access to their clients' case files.

Indicator 25.2: These rules are clear and publicly accessible.

Data collection

Guidance for assessment

Review if the rules that define how to request information in the case files, and the conditions to grant access to the files, are formulated in an unambiguous way and can be accessed by the public.

Tools

Consult national law to identify the provisions that regulate access to the case files to check how clear these rules are.

Consult other publicly available material (e.g. authority's website) to see if the rules that regulate access to the case files are mentioned and check how clearly these rules are formulated.

Survey legal representatives asking them about their experiences of requesting access to their clients' case files.

Rating system

Yes. The rules on accessing case files are clear **and** they are accessible by the public – **when** this is the case for all the authorities concerned.

No. The rules on accessing case files are not clear **or** they are not accessible by the public – *when* this is case for one or more of the authorities concerned.

Partially. This is not an option for this indicator.





Training and support

STANDARD 26: A training programme for relevant personnel of the determining authority on knowledge and skills regarding asylum matters is in place.

Indicator 26.1: Personnel have been trained in international human rights and refugee law and the asylum acquis of the European Union, including specific legal standards and case-law.

Data collection

Guidance for assessment

Review if training on relevant international human rights and refugee law and the asylum *acquis* of the EU, including specific legal standards and case-law, is provided to all relevant personnel working for the authorities in charge of examining the applications, including new personnel (prior to or upon the start of their assignment) and experienced personnel (in the form of refresher training).

Review if specialised training is offered with regularity, in line with the responsibilities and tasks of personnel and in view of the results of any assessment of previous learning, training needs assessment and/or quality reviews.

Review if all training offered takes due account of and/or includes, the relevant modules of the European Asylum Curriculum and/or relevant guidance developed by EUAA.

Tools

Survey staff of the relevant authority responsible for training and continuous professional development (e.g. HR department, training unit) asking them about their training policy (including monitoring of training needs).

Consult existing training material (including agenda, table of contents, actual content, syllabi, learning outcomes, other handouts and supporting learning materials or publications).

Rating system

Yes. All relevant personnel of the determining authority systematically receive induction training, which includes elements of international human rights and refugee law and the asylum acquis of the EU, including specific legal standards and case-law relevant to handling international protection claims and specialised training is in place and offered with regularity, in line with officials' responsibilities and tasks and with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

No. Personnel of the authority in charge of examining the applications (the determining authority) do not systematically receive induction training **or** specialised training is not systematically offered to relevant personnel.

Partially. All relevant personnel of the determining authority systematically receive



Consult training plans and records.

Consult training needs assessments.

Consult other material related to the assessment of learning that has taken place (including quality review reports).

induction training, which includes elements of international human rights and refugee law and the EU asylum *acquis*, including specific legal standards and case-law relevant to handling international protection claims **and** specialised training is in place and is offered with regularity **but** is not entirely in line with the responsibilities and tasks of the personnel or with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

N/A. This is not an option for this indicator.

Indicator 26.2: Specialised personnel are trained in issues related to handling the asylum applications of children and persons with special needs.

Data collection

Guidance for assessment

Review if specialised personnel tasked with handling applications (for international protection) by children and persons with special needs are systematically trained on relevant issues, such as child-friendly interviewing techniques and interviewing techniques for vulnerable applicants.

Review if the training provided is in line with the responsibilities and tasks, and with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

Review if all training takes due account of and/or includes modules of the European Asylum Curriculum and/or guidance developed by EUAA relevant to examining applications by children and persons with special needs.

Rating system

Yes. Specialised training on aspects related to handling applications by children and persons with special needs is in place **and** offered with regularity, in line with the responsibilities and tasks of personnel and with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

No. There is no specialised training on aspects related to handling the applications of children and persons with special needs place **or** the training offered is not offered with





Tools

Survey the staff of the relevant authority responsible for training and continuous professional development (e.g. HR department, training unit) asking them about their training policy (including monitoring of training needs).

Consult existing training material (including agenda, table of contents, actual content, syllabi, learning outcomes, other handouts and supporting learning materials or publications).

Consult training plans and records.

Consult any training needs assessment reports.

Consult other material related to the assessment of learning that has taken place (including quality review reports).

regularity **or** is not at all in line with the responsibilities and tasks of personnel or with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

Partially. Specialised training on aspects related to handling the applications of children and persons with special needs is in place **and** is offered with regularity **but** is not entirely in line with the responsibilities and tasks of personnel or with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

N/A. This is not an option for this indicator.

Indicator 26.3: Personnel have been trained in interview techniques, thereby acquiring general knowledge of the circumstances and experiences that could adversely affect an applicant's ability to be interviewed.

Data collection

Guidance for assessment

Review if personnel tasked with conducting interviews during the examination process have been systematically trained in interviewing techniques and have acquired general knowledge of the circumstances and experiences that could adversely affect an applicant's ability to be interviewed.

Review if the training provided is in line with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

Rating system

Yes. All personnel systematically receive training on interview techniques, which includes elements related to the circumstances and experiences that could adversely affect an applicant's ability to be interviewed and offered with regularity, in line with the responsibilities and tasks of the personnel and with the results of any assessment of previous learning, ongoing





Review if this training takes due account of and/or includes modules of the European Asylum Curriculum and/or other relevant guidance developed by EUAA in relation to interview techniques.

Tools:

Survey staff responsible for training and continuous professional development (e.g. HR department, training unit) asking them about their training policy (including monitoring of training needs).

Consult existing training material (including agenda, table of contents, actual content, syllabi, learning outcomes, other handouts and supporting learning materials or publications).

Consult training plans and records.

Consult training needs assessment reports.

Consult other material related to the assessment of learning that has taken place (including quality review reports).

training needs assessment and/or quality reviews.

No. Personnel tasked with interviewing applicants do not systematically receive training on interview techniques or this training does not include knowledge of circumstances and experiences that could adversely affect an applicant's ability to be interviewed or the training offered is not offered with regularity or is not at all in line with the responsibilities and tasks of the personnel or with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

Partially. All personnel systematically receive training on interview techniques, which includes elements related to the circumstances and experiences that could adversely affect an applicant's ability to be interviewed and such training is offered with regularity but is not entirely in line with the responsibilities and tasks of the personnel or with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.





STANDARD 27: Necessary and appropriate support for the personnel has been put in place.

Indicator 27.1: Each officer has a thorough and timely introduction to their role, including on the applicable code of conduct.

Data collection

Guidance for assessment

Review if all personnel have received a thorough and timely introduction to their role (i.e. before or at the start of their assignment).

Review if the introduction is based on their expected tasks and responsibilities and job descriptions and if it covers topics linked to a code of conduct and ethical and professional standards, including the confidentiality principle.

Tools

Survey staff responsible for training and continuous professional development (e.g. HR department, training unit) asking them about their policy in relation to general introduction training.

Survey new staff on how they experienced their induction training, what they learned and if there felt adequately trained and informed to carry out their tasks.

Consult existing material used during introduction sessions or training (including agenda, table of contents, actual content, syllabi, learning outcomes, other handouts and supporting learning materials or publications).

Consult training plans and records on introduction training/sessions.

Rating system

Yes. All personnel are systematically provided with an induction before or at the start of their assignment, based on their expected tasks and responsibilities / job descriptions / terms of reference and the induction provided covers all aspects related to the applicable code of conduct and ethical and professional standards, including the confidentiality principle.

No. Not all personnel are provided with an induction before or at the start of their assignment, based on their expected tasks and responsibilities / job descriptions / terms of reference **or** the induction provided does not cover the applicable code of conduct and ethical and professional standards.

Partially. This is not an option for this indicator.





Indicator 27.2: Core training is given immediately upon recruitment and before the case officer begins conducting interviews.

Data collection

Guidance for assessment

Review if case officers tasked with conducting personal interviews systematically receive training immediately upon recruitment or at least before conducting any interviews.

Review if this training takes due account of and/or includes core parts of the European Asylum Curriculum developed by EUAA.

Tools

Survey staff responsible for training and continuous professional development (e.g. HR department, training unit) asking them about their training policy (including monitoring of training needs).

Consult existing training material (including agenda, table of contents, actual content, syllabi, learning outcomes, other handouts and supporting learning materials or publications).

Consult training plans and records.

Rating system

Yes. Case officers tasked with conducting personal interviews systematically receive training immediately upon recruitment or at least before conducting any interviews.

No. Case officers tasked with conducting personal interviews do not receive core training before they begin conducting interviews.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 27.3: Refresher trainings and specialised training are provided in a regular manner and depending on the needs.

Data collection

Guidance on information collection

Review if personnel receive refresher training and if specialised training is provided in a regular manner and when the need emerges.

Review if there is a system in place to monitor training needs (taking into account quality feedback, changes in allocated caseload, etc.).

Review if the training provided is in line with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

Rating system

Yes. Personnel receive refresher training and specialised training and such training sessions are offered with regularity, in line with the responsibilities and tasks of the personnel and with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.





Review if training takes due account of and/or includes core parts of the European Asylum Curriculum developed by EUAA.

Tools

Survey staff responsible for training and continuous professional development (e.g. HR department, training unit) asking them about their training policy (including monitoring of training needs).

Consult existing training material (including agenda, table of contents, actual content, syllabi, learning outcomes, other handouts and supporting learning materials or publications).

Consult training plans and records.

Consult training needs assessment reports.

Consult other material related to the assessment of learning that has taken place (including quality review reports).

No. Personnel either do receive only refresher training or specialised training sessions or neither, or such training sessions are not offered with regularity or are not at all in line with the responsibilities and tasks of the personnel or with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

Partially. Personnel receive refresher training and specialised training and such training sessions are offered with regularity, but they are not entirely in line with the responsibilities and tasks of the personnel and with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

N/A. This is not an option for this indicator.

Indicator 27.4: Personnel have the possibility to seek advice, whenever necessary, from experts on particular issues, such as medical, cultural, religious, child-related or gender issues.

Data collection

Guidance for assessment

Review if there is a process that enables personnel dealing with applications for international protection to ask for and obtain relevant advice from subject matter experts (in-house or external) on particular issues, such as medical, cultural, religious, child-related or gender issues, and if there is guidance on the circumstances under which personnel can or should reach out to experts.

Rating system

Yes. There is a process in place enabling personnel to seek advice, whenever necessary, from experts on particular issues, such as medical, cultural, religious, child-related or gender issues, and it is systematically implemented in practice.





Review if the pool of available experts is relevant and sufficient in relation to the need arising from the caseload.

Review if there is guidance that establishes clear workflows, responsibilities and timelines regarding consulting experts, receiving feedback and the written recording of this process.

Review if relevant personnel are aware of and follow available guidance.

Tools

Consult guidance documents (such as guidelines or SOPs) on how to consult experts on different subjects, including when to reach out, how to contact the expert, how and when feedback is provided and how this workflow is recorded.

Survey relevant staff asking them under what circumstances they would reach out to an external expert, what they know about the process of doing so and what experience they had with getting an answer allowing them to move forward with a case.

Survey external experts asking them about their experiences of being consulted by personnel.

Consult individual case files where specific circumstances would have required expert advice to see if experts were consulted.

No. There is no process in place enabling personnel to seek advice, whenever necessary, from experts on particular issues, such as medical, cultural, religious, child-related or gender issues **or** it is not systematically implemented in practice.

Partially. There is a process in place enabling personnel to seek advice, whenever necessary, from experts on particular issues and it is systematically implemented in practice but some areas of expertise are not covered (e.g. they can seek advice from a medical expert but they do not have the option of consulting an expert on gender or religious issues).





Examination of the application

Translation of relevant documents

STANDARD 28: Rules on translation of documents are established and communicated to the applicants, indicating clearly what is expected from them and what will be provided by the authorities.

Indicator 28.1: Where the onus is on the applicant to translate the documents, this obligation is included in the information given to the applicant on the asylum procedure before or upon the lodging of the application.

Data collection

Guidance for assessment

Review if rules or guidelines place the onus on the applicant to translate documents.

Review if the information on the asylum procedure given to applicants before or upon lodging includes the obligation to translate documents, in the circumstances that the onus is on the applicant.

Review the information provision material, script or template to check if it includes information on the obligation to translate documents, expressed in clear and non-technical terminology.

Review if this is the case for all translations of the material, script or template.

Tools

Consult existing information provision templates, materials, scripts or forms (in all their translations) used by all authorities that are competent to provide information on the asylum procedure before or upon lodging with respect to the obligation by the applicant to translate documents.

Consult guidance documents (such as guidelines or SOPs) regulating the submission of documents and translations by the applicant.

Rating system

Yes. The information on the asylum procedure given to applicants before or upon lodging systematically includes the obligation to translate documents when the onus to do so is on the applicant.

No. The information on the asylum procedure given to applicants before or upon lodging does not systematically include the obligation to translate documents when the onus is on the applicant.

Partially. This is not an option for this indicator.

N/A. Based on guidelines, the onus to translate the documents is never on the applicant.





Consult guidance documents (such as guidelines or SOPs) regulating the provision of information on the asylum procedure with respect to the obligation by the applicant to translate documents.

Survey staff of the authority in charge of designing and issuing the information provision material to applicants asking about the information included therein concerning the obligation to translate documents.

Survey the staff in charge of providing the relevant information to applicants asking about the information provided to applicants on the obligation to translate documents.

Survey applicants asking the content of the information received on the obligation to translate documents.

Directly observe information provision sessions to check the information given on translation of documents.

Indicator 28.2: If a timeframe is set for providing documents/translations, this should be clearly communicated to the applicant.

Data collection

Guidance for assessment

Review if rules, guidelines or SOPs establish time frames or deadlines for the submission of documents and their translation.

Review if the information on the asylum procedure given to applicants before or upon lodging an application includes the time frame for submission of documents and their translations, and if such information is clear.

Review the information provision material, script or template to check if it includes information on the obligation to translate documents, expressed in clear and non-technical terminology. Review if this is the case for all translations of the material, script or template.

Rating system

Yes. Before or upon lodging an application, applicants are systematically given clear information on the asylum procedure that includes the time frame for submission of documents and their translations.

No. Information on the time frame for submission of documents and their translations is not systematically given to applicants before or upon lodging an application *or* the information given is not clear.





Tools

Consult existing information provision templates, materials, scripts or forms (in all their translations) used by all authorities that are competent to provide information on the asylum procedure before or upon lodging an application, with respect to the information on the timeframe for providing documents/translations.

Consult guidance documents (such as guidelines or SOPs) regulating the submission of documents and translations by the applicant regarding the time frame for submission.

Consult guidance documents (such as guidelines or SOPs) regulating the provision of information on the asylum procedure regarding the provision of information on the timeframe for providing documents/translations.

Survey the staff of the authority in charge of designing and issuing the information provision material to applicants and the staff in charge of providing the relevant information to the applicant, asking about the content of the information included and on the timeframe for providing documents/translations.

Survey applicants asking the information provided to them on the timeframe for providing documents/translations.

Directly observe of information provision sessions to check the information given on the timeframe for providing documents/translations.

Partially. This is not an option for this indicator.

N/A. No time frame is set for submitting documents/translations.

Indicator 28.3: Translation turnaround times have been indicated in the rules to avoid unnecessary delays in the procedure.

Data collection

Guidance for assessment

Review if reasonable time frames for translation turnaround (i.e. the time to complete the translation process), to avoid unnecessary delays in the procedure, have been clearly indicated in writing in internal guidelines or SOPs.

Rating system

Yes. Reasonable time frames for translation turnaround, to avoid unnecessary delays in the procedure, are indicated in writing in guidelines or SOPs.





Tools

Consult guidance documents (such as guidelines or SOPs) on the submission of documents and translations by the applicant regarding the turnaround times for translations.

Survey staff of the authority in charge of lodging and examination of applications asking about the inclusion in written rules of the translation turnaround times.

No. Reasonable time frames for translation turnaround, to avoid unnecessary delays in the procedure, are not indicated in writing in guidelines or SOPs.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Case file management system

STANDARD 29: All information concerning the case is transmitted to the responsible case officer properly and in a timely manner to ensure that they have all the relevant information at their disposal before the personal interview and before the decision.

Indicator 29.1: A case file management system is in place that allows any (new) piece of information to be correctly linked to the case file, including the ability to immediately locate the relevant case file and/or identify the responsible case officer.

Data collection

Guidance for assessment

Review if a (physical or electronic) case file management system is established in authorities in charge of registering, lodging and examining applications for international protection.

Review if the system allows all the following: receipt of (new) pieces of information relating to asylum cases from the applicant or other sources; recording of the submission; and linkage of that information to the case file in a timely manner, including by locating the relevant case file and/or identifying the responsible case officer.

Review if the system is used effectively, in particular in relation to the following: if there is a workflow that is accessible and which is systematically followed for the receipt of (new)

Rating system

Yes. A case file management system is established that allows the authority to receive (new) pieces of information relating to asylum cases from the applicant or other sources and to record the submission and to link that information to the case file in a timely manner, including by locating the relevant case file and/or identifying the responsible case officer, and the needed actions are





pieces of information from applicants or other sources; if the information is recorded systematically, and in a timely manner; and if the files are updated systematically, and in a timely manner.

Tools

Consult guidance documents (such as guidelines or SOPs) regulating the case file management system in authorities in charge of registering, lodging and examining applications for international protection.

Survey staff of authorities in charge of the examination, including case officers, staff in charge of receiving or recording newly submitted information and staff in charge of case file management asking about the relevant steps and element of the workflow for the receipt and recording of information, and about its implementation.

Directly observe of the workflow for the submission of (new) pieces of information and the recording of such information in the case files.

Review individual case files to check the implementation of the system to receive and record (new) pieces of information.

systematically taken by the relevant personnel.

No. There is no case file management system in place *or* the established system does not allow the authority to receive (new) pieces of information relating to asylum cases from the applicant or other sources **or** to record the submission *or* to link that information to the case file in a timely manner, including by locating the relevant case file and/or identifying the responsible case officer **or** the needed actions are not systematically taken by the relevant personnel.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 29.2: The time between the receipt of any (new) piece of information and the moment that it reaches the responsible case officer can be monitored.

Data collection

Guidance for assessment

Review if the case file management system of the authorities in charge of registering, lodging and examining applications for international protection allows them to monitor the time between the receipt of any (new) piece of information and the time when this information reaches the case officer responsible for the file (or when the information is recorded/inserted in the file, if a case officer has not been assigned yet).

Rating system

Yes. The case file management system allows the authority to monitor the time between the receipt of a (new) piece of information and the time when the information reaches the case officer responsible for the file (or is inserted in the file, if a case officer has not been assigned





Review if the system allows all the following: recording of the date when a (new) piece of information is received by the authority and of the date when the piece of information is shared with the case officer assigned to the relevant case and/or inserted in the relevant case file.

Review if the system is used effectively, in particular if the time between the receipt of information and the insertion of information in the case file and/or sharing of information with the case officer is systematically recorded and accessible to those in charge of monitoring.

Tools

Consult guidance documents (such as SOPs or guidelines) regulating the case file management system with respect to the workflow for the receipt, recording and filing of new pieces of information.

Survey staff of authorities in charge of lodging and examination, including case officers; staff in charge of receiving, recording or filing newly submitted information on asylum cases; and staff in charge of case file management, asking about the timeframe between the receipt of pieces of information and when they reach the competent case officer.

Directly observe of the workflow for the receipt, recording and filing of new pieces of information, particularly in reference to the timeframe between the receipt of pieces of information and when they reach the competent case officer.

Review individual case files to check the timeframe between the receipt of pieces of information and when they reach the competent case officer/are recorded in the case file.

yet) **and** the system is used effectively and systematically by the relevant personnel.

No. The case file management system does not allow the authority to monitor the time between the receipt of a (new) piece of information and the time when the information reaches the case officer responsible for the file (or is inserted in the file, if a case officer has not been assigned yet) or the system is not effectively and systematically used by relevant personnel.

Partially. This is not an option for this indicator.





STANDARD 30: The case file management system ensures the confidentiality of the information contained in the personal file of the applicant, in line with GDPR.

Indicator 30.1: Access to the personal file (both electronic and physical) is tracked and monitored, to ensure that only relevant staff may access the file on a need-to-know basis, which may include the need to consult case files with similar profiles and/or decisions for instructive purposes.

Data collection

Guidance for assessment

Review if the case file management system includes measures to systematically track access made to any file and to restrict access to personnel who need to access case files (need-to-know basis).

Review if the case file management system includes clear and established criteria defining who has the right to access a file, established on a need-to-know basis (which can include the need to consult case files with similar profiles and/or decisions for instructive purposes), and provisions to record when a case file is accessed, and by whom.

Review if the system is used effectively and if access to individual case files is tracked and monitored.

Tools

Consult guidance documents (such as SOPs or national guidance) defining the workflow for accessing individual case files.

Survey staff of authorities in charge of lodging and examination, including registration officers, case officers and their supervisors, staff in charge of case file management, data protection officers and other relevant actors that manage and track access to files, asking about how the access to case files is granted, tracked and monitored.

Directly observe the case file management system or databases.

Rating system

Yes. Any access to case files is systematically tracked and monitored **and** access is effectively restricted to personnel who need to access case files (need-to-know basis).

No. Access to case files is not systematically tracked and monitored **or** access is not effectively restricted to personnel who need to access case files (need-to-know basis).

Partially. This is not an option for this indicator.





Consult documents that record access to individual files to see how access is granted and tracked.

Review individual case files to check how access is granted and tracked.

Indicator 30.2: Clear internal rules have been established and made available to all relevant staff on how to respond to requests for access to the file by the applicant, family members or representatives, in accordance with the national legislation.

Data collection

Guidance for assessment

Review if a workflow, with clear rules, on how to receive requests for access to files (by the applicant, family members or representatives) is in place and the conditions to be met to grant access to the files are in accordance with relevant national legislation.

Review if the rules clearly define all the following: who can have access to the case file, through which mode and to what extent; the criteria based on which access will be granted (and to which information access will be granted); how the request can be made; the timeline for examining the requests and providing a reply; and through which means the response to the applicant can be given (e.g. by email, telephone).

Review if the workflow is known to all the personnel tasked with implementing it and effectively followed.

Tools

Consult relevant national legislation.

Consult guidance documents (such as SOPs or guidelines) that regulate how to respond to requests for access to the file by the applicant, family members or representatives.

Review the templates, forms or other methods in use for requesting access to files and for responding to such requests.

Rating system

Yes. A workflow, with clear rules, that defines how to receive requests for access to files (by the applicant, family members or representatives) is in place and the conditions to be met to grant access to the files are in accordance with relevant national legislation and such rules have been made available to all relevant staff.

No. No workflow, with clear rules, that defines how to receive requests for access to files (by the applicant, family members or representatives) is in place **or** the conditions to be met to grant access to the files are not in accordance with relevant national law *or* the rules do not define clearly the conditions to grant access to the files to applicants, their family members or their representatives *or* such rules have not been made available to all relevant staff.





Survey staff of authorities in charge of lodging and examination, including case officers, staff in charge of receiving requests for access to files from externals (i.e. applicants and others), staff in charge of managing the files and other relevant actors, asking about the rules on responding to request for access to case files and their implementation (if they have been established and made available).

Directly observe the relevant workflow and the case file management system to check how rules on how to respond to request for accessing case files have been made available and implemented.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Country of origin information

STANDARD 31: Ensure case officers have access to relevant and up-to-date country of origin information.

Indicator 31.1: Necessary technical arrangements are made for the case officers to have access to national COI platforms and/or any other relevant platforms or webpages, etc. needed for their daily work.

Data collection

Guidance for assessment

Review if technical arrangements are in place for case officers to access the national country of origin information (COI) platforms and/or any other relevant platforms or web pages, COI compilations or databases, etc., needed for their daily work.

Review if the technical arrangements in place effectively allow case officers to access the national COI platforms and/or any other relevant platforms or web pages, COI compilations or databases, etc., needed for their daily work.

Tools

Consult in-house COI databases or platforms.

Rating system

Yes. The necessary technical arrangements for case officers to access the national COI platforms and/or any other relevant platforms or web pages, COI compilations or databases, etc., needed for their daily work are in place.

No. No technical arrangements for case officers to access the national COI platforms and/or any other relevant platforms or web pages, COI compilations or databases, etc., needed for their daily work are in place.





Directly observe technical equipment and software accessible to case officers that enables them to access COI platforms or webpages, etc.

Consult COI guery forms available to case officers.

Survey case officers and/or their supervisors, and staff of the COI unit (if existing) or other relevant actors, asking about the technical arrangements available to case officer for accessing COI.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 31.2: Overview of appropriate COI references for specific asylum topics/claims is available to case officers and it is updated on a regular basis.

Data collection

Guidance for assessment

Review if overview of appropriate COI references for specific asylum topics/claims exists and case officers have access to them.

Review if such COI references are updated regularly and as needed based on developments in the countries of origin.

Tools

Consult in-house COI databases or platforms.

Consult available overviews of COI references.

Consult national COI reports and/or country guidance documents.

Survey case officers and/or their supervisors, and staff of the COI unit (if it exists) or other relevant actors, asking about the availability of regularly updated overview of appropriate COI references.

Rating system

Yes. Case officers systematically have access to an overview of appropriate COI references for specific asylum topics/claims and such COI references are updated regularly and as needed based on developments in the countries of origin.

No. Case officers do not systematically have access to COI references for specific asylum topics/claims **or** such COI references are not updated regularly and as needed based on developments in the countries of origin.

Partially. This is not an option for this indicator.





Indicator 31.3: A system is in place to assist the case officer to obtain relevant advice and, when necessary, further research on COI topics.

Data collection

Guidance for assessment

Review if a system has been established that enables all case officers to ask for and obtain relevant advice on COI and, when necessary, further research on COI topics.

Review if the system includes a clear workflow and establishes clear responsibilities and a time frame for the provision of advice or feedback.

Review if the workflow is known to the personnel who can make a request and those who are tasked with providing advice or feedback.

Tools

Consult guidance documents (such as guidelines or SOPs) setting out the system and defining the relevant workflow for requests for and provision of advice or further research on COI topics.

Consult documents defining the COI query procedure.

Survey case officers, their supervisors, staff of the COI unit (if it exists) and any other relevant actors, asking about the existence and functioning of a workflow allowing case officers to obtain advice and research on COI.

Rating system

Yes. A clear workflow is in place that enables case officers to ask for and obtain relevant advice on COI and, when necessary, further research on COI topics and the necessary actions are systematically carried out by the relevant personnel to provide advice or feedback.

No. No workflow is in place that enables case officers to ask for and obtain relevant advice on COI and, when necessary, further research on COI topics **or** the needed actions are not systematically carried out by the relevant personnel tasked with providing advice or feedback.

Partially. The workflow that is in place allows case officers only to ask for and obtain relevant advice on COI or only to request and obtain further research on COI topics.





Indicator 31.4: When a new COI report or an answer to a query is issued or published, it is communicated to the personnel responsible for examining applications and making decisions.

Data collection

Guidance for assessment

Review if a workflow exists that provides for and ensures that any new COI report or answer to a query is systematically communicated to the case officer in a timely manner.

Review if the workflow establishes clear pathways for communication, responsibilities and time frames.

Review if the workflow is known to the staff who need to implement it and is effectively implemented.

Tools

Consult guidance documents (such as guidelines or SOPs) with respect to the relevant aspects of the workflow for informing case officers of the publication of new COI reports or answers to queries.

Survey case officers, their supervisors, staff of the COI unit (if it exists) or any other relevant actor, asking about the workflow for informing case officers of the publication of new COI reports or answers to queries (if clear pathways exist, if responsibilities and timeframes are defined, if workflow is effectively implemented).

Consult documents defining the COI query procedure.

Consult or observe communication channels (e.g. SharePoint, common database).

Rating system

Yes. When a new COI report or an answer to a query is issued or published, it is systematically communicated, in a timely manner, to the personnel responsible for examining applications and making decisions.

No. There is no systematic and timely transmission of new COI reports or answers to queries to the personnel responsible for examining applications and making decisions.

Partially. This is not an option for this indicator.





STANDARD 32: Case officers are trained on how to access and use the information needed.

Indicator 32.1: The case officer is trained on how to effectively search for, select and take into account relevant COI from various accurate sources.

Data collection

Guidance for assessment

Review if case officers are systematically trained on how to effectively search for, select and take into account relevant COI from various accurate sources.

Review if this training takes due account of relevant guidance developed by the EUAA and/or of the modules of the European asylum curriculum, developed by the EUAA, related to COI.

Review if such training is provided to all case officers, including both new personnel, prior to or upon the start of their assignment, and experienced personnel, in the form of refresher training.

Review if specialised training is offered with regularity, in line with the responsibilities and tasks of the personnel and in view of the results of any assessment of previous learning, training needs assessment and/or quality reviews.

Tools

Consult training plans and records (including formal training, coaching sessions and on-the-job training) to check if they take due account of EUAA guidance and the relevant modules of the European Asylum Curriculum, to check if there is a plan to systematically train case officers on search and use of COI, and to check the content of the training.

Survey staff of the COI and/or training units (if they exist) and/or of the HR unit, asking about the training planned, and delivered on COI.

Survey case officers and their supervisors, asking about the training on COI attended by case officers.

Rating system

Yes. Case officers are systematically trained on how to effectively search for, select and take into account relevant COI from various accurate sources and training is offered with regularity, in line with the responsibilities and tasks of the personnel and with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

No. Case officers are not systematically trained on how to effectively search for, select and take into account relevant COI from various accurate sources.

Partially. Case officers are systematically trained on how to effectively search for, select and take into account relevant COI from various accurate sources and training is offered with regularity and specialised training is in place and is offered with regularity but is not entirely in line with the responsibilities and tasks of the personnel or with the results of any assessment of





previous learning, ongoing training needs
assessment and/or quality reviews.
N/A. This is not an option for this indicator.

Personal interview

STANDARD 33: Where the applicant receives an invitation for a personal interview the information about the personal interview provided to the applicant is direct, clear and accurate.

Indicator 33.1: The written personal invitation shall include at least information as to the date, time and place of the personal interview.

Data collection

Guidance for assessment

Review if invitations that are being sent out by the competent authority are in written form and include clear mention of all the following elements: the date, time and place of the personal interview.

Tools

Consult guidance documents (such as guidelines or SOPs) with respect to the form and content of the invitation to the personal interview.

Consult existing invitation templates or forms used by all authorities competent to issue invitations to the personal interview to check their content.

Survey relevant staff of the authority in charge of issuing invitations, asking about the form of the invitation and if they contain systematically indication of date, time and place of interview.

Review a sample of written invitations for personal interview to check if information on the date, time and place of the interview was included.

Rating system

Yes. Invitations are sent out in written form **and** include clear mention of all the following elements: the date, time and place of the personal interview.

No. Invitations are not in written form *or* if in written form they do not include clear indication of the date **or** of the time *or* of the place of the interview.

Partially. This is not an option for this indicator.





STANDARD 34: A careful study of the case file precedes the conduct of the personal interview as much as possible.

Indicator 34.1: The case file is available to the case officer a sufficient time before the interview to allow for the preparation of the interview.

Data collection

Guidance for assessment

Review if SOPs or guidelines prescribe that the case file be made available to the case officer prior to the interview.

Review if the workflow in place effectively allows for the transmission of the individual case file to the relevant case officer prior the personal interview.

Review if the time between when the case file is made accessible to the case officer and the personal interview is adequate for the case officer to effectively be able to prepare the interview.

Tools

Consult guidance documents (such as guidelines or SOPs) defining the workflow that includes the assignment and transmission of case files with respect to the timeframe by which the case files in made available to the case officer.

Consult information in the available tracking / file management system that records the time when the file is made available to the case officer and the date of the personal interview.

Survey case officers, their supervisors and staff responsible for file management or scheduling interviews, asking the length of time when case files are made available o case officers.

Review of individual case files, including any document that records the transfer of the file to the case officer and the date of the interview.

Rating system

Yes. Case files are systematically made available to case officers a sufficient length of time before the interview that allows effective interview preparation.

No. Case files are not systematically made available to case officers a sufficient length of time before the interview that allows effective interview preparation.

Partially. This is not an option for this indicator.





Indicator 34.2: Whenever possible, preparation takes into account all the elements that could influence the conducting of the interview, including any requests made for a specific gender of the interviewer and/or interpreter.

Data collection

Guidance for assessment

Review if SOPs or guidelines define how to address elements that could influence the personal interview identified before the interview, including the need for special procedural guarantees.

Review if SOPs or guidelines specify that such information is shared prior to the interview with personnel responsible for taking relevant actions before the interview, to allow for adequate preparation.

Review if SOPs or guidelines specifically prescribe how to manage requests for a specific gender of the interviewer or interpreter prior to the interview.

Review what elements are considered by the personnel of the determining authority in preparation for the interview, particularly with respect to special procedural guarantees and how they are addressed in the interview preparation phase (e.g. unaccompanied children have a representative present and the seating and room arrangements are child friendly, practical arrangements are made for persons with disabilities).

Tools

Consult guidance documents (such as SOPs or guidelines) defining how to address elements that could influence the conducting of the interview, for example the need for special procedural guarantees, including the workflow that covers the assignment of case officers and interpreters to the case.

Survey case officers, their supervisors and staff in charge of assigning case officers and interpreters to interviews, asking about the workflow for sharing information that could influence the interview, and the elements considered during the preparation phase.

Rating system

Yes. Interview preparation systematically takes into account all elements that could influence the conducting of the interview, including any requests made for a specific gender of the interviewer and/or interpreter.

No. Interview preparation does not systematically take into account all elements that could influence the conducting of the interview, including any requests made for a specific gender of the interviewer and/or interpreter.

Partially. This is not an option for this indicator.





Review individual case files, including any document that records the preference expressed by the applicant for the gender of the interpreter and/or interviewer, or other special procedural guarantees.

Indicator 34.3: Preparation takes into account all the elements that are relevant for the assessment of the claim.

Data collection

Guidance for assessment

Review if all the elements that are relevant to the claim are being considered by the case officers in preparation for the interview.

Tools

Consult guidance documents (such as guidelines) with respect to the guidance to case officers on what elements to consider when preparing the personal interview.

Survey case officers and their supervisors asking about the elements considered during the preparation phase.

Directly observe of the interview preparation to check which elements are considered by case officers.

Rating system

Yes. Interview preparation systematically takes into account all the elements that are relevant for the assessment of the claim.

No. Interview preparation does not systematically take into account all the elements that are relevant for the assessment of the claim **or** interview preparation takes into account only some elements relevant for the assessment of the claim.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 34.4: The case officer consults relevant Country of Origin Information (COI) that applies to the case, prior to the interview.

Data collection

Guidance for assessment

Review if, prior to each interview, case officers systematically consult COI documentation that is relevant to the case at stake in terms of the topic, geographical scope and timeframe, based on the information available to them in the case file.

Rating system

Yes. Case officers systematically consult relevant COI documentation that applies to the case prior to the interview.





Tools

Consult guidance documents (such as guidelines or SOPs) with respect to the interview preparation or conducting COI research as preparation for the personal interview.

Survey case officers and their supervisors asking if case officers systematically consult relevant COI prior to the interview.

Directly observe the interview preparation to check if case officers consult relevant COI prior to the interview.

No. Case officers do not systematically consult COI documentation that applies to the case prior to the interview.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

STANDARD 35: The personal interview takes place in a language the applicant understands.

Indicator 35.1: There is system in place to ensure that appropriate and a sufficient number of interpreters can be made available.

Data collection

Guidance for assessment

Review if the system in place ensures that the asylum administrations conducting personal interviews have at their disposal a sufficient number of interpreters of relevant languages such that the personal interview can be conducted in a reasonable time frame after the lodging of an application.

Tools

Surveys relevant personnel of authorities that oversee scheduling personal interviews and/or coordination of interpreters. This is particularly useful for this indicator, as other tools can offer information on only proxy (aspects of the) indicator.

Consult data available on the time from lodging the application to the interview and the reasons behind possible delays to identify cases where this was due to lack of interpretation.

Rating system

Yes. There is an effective system in place to ensure that appropriate, and a sufficient number of, interpreters can be made available to allow the personal interview to be conducted within a reasonable time frame after the lodging of an application.

No. There is no system to (or the system does not) ensure that appropriate, and a sufficient number of, interpreters can be made available **or** the system is not implemented effectively.

Partially. This is not an option for this indicator.





Consult the scheduling calendar and availability of interpreters (if indicated therein) to check if challenges in timely scheduling of interviews are due to a lack or shortage of (appropriate) interpreters.

Review individual case files to look at the time frame between the lodging of the application and the conduct of the personal interview and the reasons behind any delay. It is suggested that the sample of cases reviewed includes cases where the applicant speaks an uncommon language.

N/A. This is not an option for this indicator.

Indicator 35.2: There is a system in place to ensure that interpreters have the necessary knowledge and expertise to ensure appropriate communication with the applicant and/or the translation of documents.

Data collection

Guidance for assessment

Review if the system in place defines the minimum requirements for interpreters who are interpreting during personal interviews or translating relevant documents, in terms of technical competencies and qualifications (e.g. certifications, membership of a professional registry), and defines the specifics of interpretation and translation in the asylum context.

Review if the system includes quality assurance measures/mechanisms for interpretation and translation, in terms of both appropriate communication and the quality of interpretation/translation.

Review if the system provides training on interpretation and translation in the asylum context.

Review if the system allows for feedback/evaluation of interpretation and translation services delivered.

Tools

Consult documents detailing the minimum required qualifications for interpreters (such as the tender documentation, if interpretation is provided by a service provider / contractor, or the job description, if there is an internal interpretation service).

Rating system

Yes. There is an effective system in place to ensure that interpreters have the necessary knowledge and expertise to guarantee appropriate communication with applicants and/or the accurate translation of documents.

No. There is no system to (or the system does not) ensure that interpreters have the necessary knowledge and expertise to guarantee appropriate communication with the applicant and/or the translation of documents **or** the system is not implemented effectively.

Partially. This is not an option for this indicator.





Consult training modules and plans available for interpreters.

Consult guidance documents (such as guidelines or SOPs) describing or regulating the quality assurance mechanisms or the first-instance process or the feedback/evaluation mechanism for interpreters.

Survey staff in charge of managing/coordinating interpreters, and case officers and/or their supervisors asking about the knowledge and expertise of interpreters on appropriate communication with the applicant and translation of documents.

STANDARD 36: The interview rooms are appropriate to conduct personal interviews in full respect of confidentiality and security.

Indicator 36.1: Internal guidelines are established for the setup of an interview room, in particular taking into account those applicants with special needs.

Data collection

Guidance for assessment

Review if internal guidelines exist that establish the set-up of the interview room, including, among other things, the seating arrangement, necessary equipment, security measures and measures to ensure confidentiality.

Review if internal guidelines take into account the requirements of applicants with special needs (including, for example, access ramps for applicants with limited mobility, a child-friendly space).

Review if the guidelines are known to the personnel tasked with implementing them.

Rating system

Yes. Internal guidelines exist that establish the set-up of the interview room taking into account applicants with special needs.

No. Internal guidelines that establish the setup of the interview room do not exist *or* they do not take into account applicants with special needs.

Partially. This is not an option for this indicator.





Tools

Consult guidance documents (such as guidelines or SOPs) defining the set-up of interview rooms.

Survey staff in charge of setting up the interview rooms and case officers and/or their supervisors, asking about the relevant aspects of the set-up of interview rooms, including on whether it takes into account special needs of applicants.

Indicator 36.2: Specific guidelines have been established on security and emergency situations during the interview.

Data collection

Guidance for assessment

Review if internal guidelines exist that establish security measures relating to interview rooms and emergency interview situations, including, among others, preventive and responsive measures (e.g. security measures to be used in the case of an emergency, such as panic buttons and emergency exits, and preventive measures concerning physical safety and security in relation to the technical equipment used).

Review if the guidelines are known to the personnel who need to implement them.

Tools

Consult guidance documents (such as guidelines or SOPs) with respect to the various security measures relating to interview rooms and emergency interview situations.

Surveys staff in charge of setting up interview rooms, staff in charge of security, case officers and interpreters, asking about the implementation of the guidelines on security measures for interview rooms and emergency interview situations.

Rating system

Yes. Internal guidelines exist that establish security measures relating to interview rooms and emergency interview situations.

No. Internal guidelines on security measures relating to interview rooms and emergency interview situations do not exist.

Partially. This is not an option for this indicator.





Indicator 36.3: The interview is conducted in a separate room where the applicant cannot be seen by the public.

Data collection

Guidance for assessment

Review if the guidelines in place provide for the interview to take place in a separate room where the applicant cannot be seen (or heard) by the public.

Review if such guidelines are effectively implemented in practice and if all interview rooms meet the requirement.

Tools

Consult guidance documents (such as guidelines or SOPs) with respect to the set-up of interview rooms.

Survey staff in charge of setting up interview rooms, staff in charge of security, case officers and/or their supervisors, and interpreters, asking about the rooms where interviews are conducted.

Directly observe interview rooms and related premises.

Shadow of personal interviews to check the characteristics of interview rooms.

Rating system

Yes. The interviews are systematically conducted in a separate room where the applicant cannot be seen by the public.

No. The interviews are not systematically conducted in a separate room where the applicant cannot be seen by the public.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 36.4: Internal rules have been established to ensure that the interview is not unnecessarily interrupted.

Data collection

Guidance for assessment

Review if internal guidelines that regulate access to the interview premises and rooms exist.

Review if the internal guidelines include provisions or measures regulating access to the interview rooms that ensure that the interview is not interrupted (e.g. signs placed on the door that signal that an interview is ongoing / 'do not disturb' signs or measures that restrict physical access to the premises where interview rooms are located).

Rating system

Yes. Internal rules exist and include measures to ensure that interviews are not unnecessarily interrupted.

No. Internal guidelines that include measures to ensure that interviews are not unnecessarily interrupted do not exist.





Review if the guidelines are known to the personnel who need to implement them.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding access to the interview premises and rooms.

Survey staff in charge of setting up the interview rooms and case officers and/or their supervisors, asking about the provisions and measures in place to ensure that the interviews are not interrupted.

Shadow of personal interviews to see what happens during interviews (to assess effective implementation of the rules).

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

STANDARD 37: At the opening of the interview, the purpose and the context of the interview are explained to the applicant.

Indicator 37.1: The interviewer introduces themselves to the applicant as well as the other persons in the interview room and clarifies the role of each person present.

Data collection

Guidance for assessment

Review if the internal guidelines provide that, in the opening phase of the interview, interviewers introduce themselves and any other persons in the interview room to the applicant and clarifies the role of each person present for the applicant's benefit.

Review if the internal guidelines are known and effectively implemented by the case officers / interviewers.

Tools

Consult guidance documents (such as guidelines or SOPs) with respect to provisions on the opening phase of the interview.

Rating system

Yes. Case officers / interviewers systematically introduce themselves and the other persons present in the interview room to the applicant **and** they clarify to the applicant the role of each person present.

No. Case officers / interviewers do not systematically introduce themselves and the other persons present in the interview room to the applicant **or** they do not clarify the role of each person present.





Consult existing interview templates to check the information provide to the applicant in the opening of the interview and if it includes introduction of who is present and the explanation of their roles.

Survey case officers / interviewers and their supervisors, and interpreters asking if case officers systematically introduce themselves and those presents at the interview to the applicant and explain everyone's role.

Review individual case files, particularly the interview records/transcripts.

Shadow personal interviews to check if case officers introduce themselves and those presents at the interview to the applicant and explain everyone's role.

Consult content of training modules and materials delivered or available to case officers on the conduct of the interview to check information included on obligation for case officers to introduce themselves and other persons present at the interview to the applicant and explain everyone's role.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 37.2: The necessary information given to the applicant is included at the opening of the interview including: the purpose of the interview, the principle of confidentiality, the possibility of breaks, the obligations of the applicant, the possibility to lodge relevant documents, and the procedure to be followed including the way the interview will be recorded or reported.

Data collection

Guidance for assessment

Review if the internal guidelines set out that all the necessary information is given to the applicant in the opening of the interview, including all the following: the purpose of the interview; the principle of confidentiality; the possibility of breaks; the obligations of the applicant; the option to lodge relevant documents; and the procedure to be followed, including the way in which the interview will be recorded or reported.

Review if the internal guidelines set out that all the necessary information is being provided to the applicant prior to the interview and the case officer verifies at the beginning of the interview the applicant's understanding of the following: the purpose of the interview; the

Rating system

Yes. In the opening phase of the interview, all the necessary information is systematically given to the applicant, including information on the following: the purpose of the interview; the principle of confidentiality; the possibility of breaks; the obligations of the applicant; the option to lodge relevant documents; and the procedure to be followed, including the way in which the interview will be recorded or reported **or** all the necessary information has





principle of confidentiality; the possibility of breaks; the obligations of the applicant; the option to lodge relevant documents; and the procedure to be followed, including the way in which the interview will be recorded or reported. When the information is provided prior to the interview, it should be provided in appropriate time so that the applicants understand the procedures, their rights and obligations during the personal interview. Review if the guidelines are known by and effectively implemented by the case officers / interviewers.

Tools

Consult guidance documents (such as guidelines or SOPs) with respect to information provisions at the opening phase of the personal interview or prior to the personal interview. **Consult** existing interview templates to check the content of the standard information meant to be provided to the applicant or to be verified at the opening of the interview.

Survey case officers / interviewers and their supervisors, and interpreters asking their awareness of relevant guidelines and the elements included in the information provision or verification at the opening of the interview.

Survey applicants asking if the information provision or verification at the opening stage included all necessary elements.

Review individual case files, including interview records/transcripts to check if the information provision or verification at the opening stage included all necessary elements.

Shadow personal interviews to see if the information provision or verification at the opening stage included all necessary elements.

Consult content of training modules and materials delivered or available to case officers on the conduct of the interview.

been provided to the applicant prior to the personal interview and the case officer verifies at the beginning of the interview the applicant's understanding of the purpose of the interview; the principle of confidentiality; the possibility of breaks; the obligations of the applicant; the possibility to lodge relevant documents; and the procedure to be followed including the way the interview will be recorded or reported.

No. In the opening phase of the interview, the applicant is not given all the necessary information on the purpose of the interview; the principle of confidentiality; the possibility of breaks; the obligations of the applicant; the option to lodge relevant documents; and the procedure to be followed, including the way in which the interview will be recorded or reported or the necessary information has been provided to the applicant prior to the personal interview but the case officer does not verify at the beginning of the interview the applicant's understanding of the purpose of the interview; the principle of confidentiality; the possibility of breaks; the obligations of the applicant; the possibility to lodge relevant documents; and the procedure to be followed including the way the interview will be recorded or reported.

Partially. This is not an option for this indicator.





Indicator 37.3: After the introductory stage of the personal interview, the mutual understanding of the applicant and the interpreter is verified.

Data collection

Guidance for assessment

Review if the internal guidelines provide that, after the introductory stage of the interview, and still in the opening phase, the mutual understanding of the applicant and the interpreter is verified by the case officer / interviewer.

Review if the guidelines are known by and effectively implemented by the case officers / interviewers.

Tools

Consult guidance documents (such as guidelines or SOPs) with respect the personal interview to check if they provide for the case officer to check the mutual understanding of applicant and interpreter.

Consult existing interview templates to check if they include questions to verify the mutual understanding of applicant and interpreter.

Survey case officers / interviewers and their supervisors, and interpreters asking if the mutual understanding of applicant and interpreter is verified.

Survey applicants asking if the mutual understanding of applicant and interpreter was verified during their interviews.

Review individual case files, including interview records/transcripts to check if mutual understanding of applicant and interpreter is verified.

Shadow personal interviews to see if the mutual understanding of applicant and interpreter is verified.

the conduct of the interview.

Rating system

Yes. After the introductory stage of the interview, the mutual understanding of the applicant and the interpreter is systematically verified by the interviewer.

No. After the introductory stage of the interview, the mutual understanding of the applicant and the interpreter is not systematically verified by the interviewer. Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Consult content of training modules and materials delivered or available to case officers on





STANDARD 38: Conditions for conducting an adequate interview are put in place.

Indicator 38.1: Sufficient time is foreseen for the interview to allow the applicant to submit all the elements needed to substantiate the claim.

Data collection

Guidance for assessment

Review if the system allows for an interview of sufficient duration so that applicants are able to submit all elements relevant to their claim and case officers / interviewers can explore all relevant elements of the claim.

Review if the system allows flexibility in the duration of the interview and for the duration of the interview to be adapted according to need, including by allowing the possibility of conducting complementary interviews or otherwise extending the duration of the interview, if needed, to enable all necessary elements to be sufficiently explored.

Review if the system is implemented accordingly and effectively.

Tools

Consult guidance documents (such as guidelines or SOPs) with respect to provisions on the scheduling, duration and conduct of the personal interview.

Survey case officers / interviewers and their supervisors asking if the system allows for sufficient duration of interviews and for flexibility in case of need.

Review individual case files, particularly the interview records/transcripts, to check if the duration of the interview was adequate to allow the applicant to submit all elements necessary to substantiate the claim.

Shadow personal interviews to see if duration of the interview is adequate to allow the applicant to submit all elements necessary to substantiate the claim and the case officer adapts it as needed.

Rating system

Yes. The time allowed for the interview is systematically sufficient to enable applicants to submit all the elements needed to substantiate their claim and the system allows flexibility in the duration of the interview and for the duration of the interview to be adapted according to need, including by allowing the possibility of conducting complementary interviews or otherwise extending the duration of the interview, if needed, to sufficiently explore all necessary elements.

No. The time allowed for the interview is not systematically sufficient to enable applicants to submit all the elements needed to substantiate their claim or the system does not allow any flexibility in the duration of the interview or allow the duration of the interview to be adapted based on need, including by allowing the possibility of conducting complementary interviews or otherwise extending the duration of the interview, if needed, to enable all necessary elements to be sufficiently explored.





Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 38.2: The applicant and the interpreter are encouraged to indicate any communication/comprehension issues at any stage of the personal interview.

Data collection

Guidance for assessment

Review if internal guidelines provide that case officers / interviewers, from the opening phase of the interview, encourage the applicant and the interpreter to indicate any communication/comprehension issues at any stage of the personal interview.

Review if guidelines are known and implemented, and if the case officers / interviewers, from the opening phase of the interview, systematically, explicitly and clearly encourage the applicant and the interpreter to indicate any communication/comprehension issues at any stage of the personal interview.

Tools

Consult guidance documents (such as guidelines or SOPs) with respect to provisions on the conduct of the personal interview to check if they provide that the case officers from the opening phase of the interview encourage the applicant and the interpreter to indicate any communication/comprehension issues at any stage of the personal interview.

Survey case officers / interviewers and their supervisors, interpreters and their coordinators/managers, asking if and how case officers encourage applicants and interpreters to indicate any communication/comprehension issues at any stage of the interview.

Rating system

Yes. Case officers / interviewers systematically encourage both the applicant and the interpreter to indicate any communication/comprehension issues at any stage of the personal interview.

No. Case officers / interviewers do not systematically encourage the applicant and the interpreter to indicate any communication/comprehension issues at any stage of the personal interview.

Partially. This is not an option for this indicator.





Review individual case files, particularly the interview records/transcripts, to check if case officers encouraged the applicant and the interpreter to indicate any communication/comprehension issues at any stage of the personal interview.

Shadow personal interviews to see if case officers encourage the applicant and the interpreter to indicate any communication/comprehension issues at any stage of the personal interview.

Indicator 38.3: Throughout the interview, it is verified that the questions regarding key elements have been correctly understood.

Data collection

Guidance for assessment

Review if internal guidelines provide that the case officers / interviewers verify with the applicant that all questions relating to key elements of the claim or the case have been correctly understood by the applicant.

Review if the guidelines are known and implemented, and if interviewers regularly (i.e. in all interviews), and when needed (i.e. when there is any indication that the applicant may not have understood the questions asked), verify that the applicant has correctly understood all questions asked on key elements of the claim.

Tools

Consult guidance documents (such as guidelines or SOPs) with respect to the conduct of the personal interview to check if they provide that case officers verify the understanding by the applicant of questions on key elements.

Consult existing interview templates to check if they include questions or sections whereby the case officers verify the understanding by the applicant of questions on key elements.

Survey case officers / interviewers and their supervisors, and interpreters and their coordinators/managers, asking if and how the case officers systematically verify the understanding by the applicant of questions on key elements.

Rating system

Yes. The interviewers systematically verify that the applicant has correctly understood all questions asked on key elements of the claim.

No. The interviewers do not systematically verify that the applicant has correctly understood all questions asked on key elements of the claim.

Partially. This is not an option for this indicator.





Review individual case files, particularly the interview records/transcripts to check if the case officers verified the understanding by the applicant of key questions.

Shadow personal interviews to see if the case officers verified the understanding by the applicant of key questions.

Indicator 38.4: The applicant is given the opportunity to provide explanations on any possible inconsistencies, contradictions or missing elements throughout the interview.

Data collection

Guidance for assessment

Review if internal guidelines provide that case officers / interviewers give applicants an effective opportunity to provide explanations on all possible inconsistencies, contradictions or missing elements throughout the interview.

Review if the guidelines are known and implemented, and if interviewers give applicants an effective opportunity to provide explanations on all possible inconsistencies, contradictions or missing elements throughout the interview.

Tools

Consult guidance documents (such as guidelines or SOPs) with respect to the conduct of the personal interview and the opportunity for clarifications of all inconsistencies, contradictions or missing elements to be given to the applicant during the interview.

Survey case officers / interviewers and their supervisors asking about the opportunity given by case officers to applicants to provide explanations on possible inconsistencies, contradictions or missing elements.

Review individual case files, particularly the interview records/transcripts, to check if interviewers gave applicants an effective opportunity to provide explanations on all possible inconsistencies, contradictions or missing elements throughout the interview.

Rating system

Yes. Case officers / interviewers systematically give the applicants an effective opportunity to provide explanations on all possible inconsistencies, contradictions or missing elements throughout the interview.

No. Case officers / interviewers do not systematically give applicants an effective opportunity to provide explanations on all possible inconsistencies, contradictions or missing elements throughout the interview.

Partially. This is not an option for this indicator.





Shadow personal interviews to see if interviewers give applicants an effective opportunity to provide explanations on all possible inconsistencies, contradictions or missing elements throughout the interview.

Indicator 38.5: Interviewer makes sure that the applicant has nothing more to add before closing the interview.

Data collection

Guidance for assessment

Review if internal guidelines provide that, in the closing phase of the interview, case officers / interviewers give the applicants an effective opportunity to add any element they wish.

Review if the guidelines are known and implemented, and if case officers / interviewers give applicants an effective opportunity to add any element they wish in the closing phase.

Tools

Consult guidance documents (such as guidelines or SOPs) with respect to the conduct of the personal interview and provision for the closing phase.

Consult existing interview templates to check if they include questions or a section whereby the case officers provide applicants an effective opportunity to add any element they wish.

Survey case officers / interviewers and their supervisors asking if case officers give applicant an effective opportunity to add element in the closing phase of interviews.

Review individual case files, particularly the interview records/transcripts to check if applicants were given an effective chance to add any elements before the closure of the interview.

Shadow personal interviews to see if applicants are given an effective chance to add any elements before the closure of the interview.

Rating system

Yes. Case officers / interviewers systematically give applicants an effective opportunity to add any element they wish in the closing phase of the interview.

No. Case officers / interviewers do not systematically give applicants an effective opportunity to add any element they wish in the closing phase of the interview.

Partially. This is not an option for this indicator.





STANDARD 39: The applicant is requested to confirm the content of the transcript or the report of the interview when there is no recording of the interview.

Indicator 39.1a: Sufficient time is given at the end of the interview to read over the transcript/report to allow the applicant to confirm the content, make comments and/or provide clarifications orally and/or in writing.

Data collection

Guidance for assessment

Review if internal guidelines provide that, in the closing phase of the interview, case officers / interviewers give applicants an adequate amount of time to read over the transcript/report, to confirm the content, make comments and/or provide clarifications orally and/or in writing.

Review if case officers / interviewers, in the closing phase of the interview, give applicants adequate time to read over the transcript/report, to confirm the content, make comments and/or provide clarifications orally and/or in writing.

Tools

Consult guidance documents (such as guidelines or SOPs) with respect the conduct of the personal interview, and particularly its closing phase, to check if they provide that case officers give applicants an adequate amount of time to read over the transcript/report, confirm the content, make comments and/or provide clarifications.

Consult existing interview templates to check if they include questions or sections whereby time is given to the applicant to read over the transcript/record and provide comments/clarifications.

Survey case officers / interviewers and their supervisors, asking about the time they give applicants to read over the transcript and provide comments.

Survey applicants asking about the time they were given at the end of interviews to read over the transcript and provide comments/clarifications.

Rating system

Yes. Case officers / interviewers, in the closing phase of the interview, systematically give applicants adequate time to read over the transcript/report, to confirm the content, make comments and/or provide clarifications orally and/or in writing.

No. Case officers / interviewers, in the closing phase of the interview, do not systematically give applicants adequate time to read over the transcript/report to confirm the content *or* do not systematically give applicants sufficient time to make comments and/or provide clarifications orally and/or in writing.

Partially. Case officers / interviewers, in the closing phase of the interview, systematically give applicants time to read over only the key parts of the transcript/report (i.e. the parts on which the decision is based), to confirm the content, make comments and/or provide clarifications orally and/or in writing.





Review individual case files, particularly the interview records/transcripts, to check if the time given to applicants to read over the transcript and provide comments/clarifications was adequate.

Shadow personal interviews to see if in the closing phases case officers give applicants adequate time to read over the transcript and provide comments/clarifications.

N/A. There is always a recording (audio or video) of the interview *or* applicants are given a specific and reasonable time to confirm the content or make comments and/or provide clarifications orally and/or in writing before the determining authority takes a decision (see indicator 39.1b).

OR

Indicator 39.1b: A specific and reasonable time limit is given to the applicant to confirm the content or make comments and/or provide clarifications orally and/or in writing before the determining authority takes a decision.

Data collection

Guidance for assessment

Review if internal guidelines provide that applicants and their legal representatives have a specific and reasonable amount of time to confirm the content of the interview transcripts/record and/or provide clarifications orally and/or in writing after the personal interview is concluded and before the determining authority takes a decision.

Review if a corresponding system to receive comments and clarifications by the applicant and/or their legal representative is operational.

Review if the guidelines are known to and applied by the personnel tasked with receiving oral or written contributions from the applicants outside the interview setting.

Review if applicants and their legal representatives are duly informed of the possibility to provide comments or clarifications orally or in writing and of the time frame for doing so.

Rating system

Yes. Applicants are given a specific and reasonable amount of time to confirm the content of the interview transcripts/record and/or provide clarifications orally and/or in writing after the personal interview is concluded and before the determining authority takes a decision.

No. Applicants are not given a specific and reasonable amount of time to confirm the content of the interview transcripts/record and/or provide clarifications orally and/or in writing after the personal interview is concluded and before the determining authority takes a decision *or* the amount of time given is not reasonable *or* the amount of time given is not specific.





Tools

Consult guidance documents (such as guidelines or SOPs) regarding the workflow and set timeframes to receive submissions from the applicant or their legal representative, made after the interview.

Consult existing interview templates to check which information they include to be given to applicants during the interview regarding the timeframe and modalities set for them/ their legal representatives to confirm the content or make comments/clarifications.

Directly observe the workflow for the submission and reception of comments and clarifications by the applicant/ their legal representative after the personal interview.

Survey case officers and their supervisors and any other personnel tasked with receiving oral or written contributions from the applicants and their legal representatives outside the interview setting, asking for the timeframe given to applicants/ their representative to confirm the content or make comments/clarifications and its reasonableness.

Survey applicants about the time and opportunity they were given to confirm the content or make comments/clarifications and its reasonableness.

Review individual case files to check if applicants were given opportunity to confirm the content or make comments/clarifications.

Partially. This is not an option for this indicator.

N/A. There is always a recording (audio or video) of the interview *or* applicants are given sufficient time at the end of the interview to read over the transcript/report, to confirm the content, make comments and/or provide clarifications orally and/or in writing (see indicator 39.1a).

Indicator 39.2: Any additional comment or clarification made by the applicant is integrated or attached to the transcript/report, including any refusal by the applicant to confirm the content.

Data collection

Guidance for assessment

Review if internal guidelines provide that submissions made by applicants or their legal representatives after the interview, concerning comments on or clarifications of the interview record/transcript, are integrated or attached to the record/transcript and are made known to the personnel in charge of the decision, before the decision is taken.

Rating system

Yes. Any additional comments on or clarifications of the interview transcript or report made by applicants are systematically integrated or attached to interview





Review if a corresponding system to integrate or attach comments and clarifications submitted by applicants and/or their legal representatives is operational.

Review if the guidelines are known to and applied by case officers / interviewers and/or personnel tasked with filing submissions from applicants outside the interview setting.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding the workflow for the receipt and filing of submissions from applicants or their legal representatives after the interview.

Consult guidance documents (such as guidelines or SOPs) regarding the conduct of the personal interview to check if they provide for comments or clarifications made by applicants (including any refusal by the applicant to confirm its content) to be integrated or attached to the record/transcript and made known to the personnel in charge of the decision in time.

Consult existing interview templates to check if they include room for the comments or clarifications made by applicants (including any refusal by the applicant to confirm its content).

Directly observe the functioning of the workflow for the submission, receipt and filing of comments and clarifications by applicants and their legal representatives after the personal interview.

Survey case officers and their supervisors, and any other personnel tasked with receiving and filing contributions from applicants/their legal representatives outside the interview setting, asking how the workflow functions in all its steps.

Review individual case files, in particular the interview transcript or report and its annexes to check if comments or clarifications on the interview record/transcript are integrated or attached to the record/transcript and before the decision is taken.

transcripts/reports, including any refusal by the applicant to confirm the content.

No. Additional comments or clarifications made by applicants, including any refusal by the applicant to confirm the content, are not systematically integrated nor attached to the transcript/report.

Partially. This is not an option for this indicator.

N/A. There is always a recording (audio or video) of the interview.





STANDARD 40: The applicant is appropriately informed as to the next steps of the procedure.

Indicator 40.1: The case officer makes sure that the applicant has understood the next steps of the procedure.

Data collection

Guidance for assessment

Review if internal guidelines provide that, in the closing phase of the interview, case officers / interviewers give applicants a clear explanation of the next steps in the asylum procedure, ask if the applicant has understood the information given and, if not initially understood, put in place efforts to further explain, making sure that the applicant understands.

Review if the guidelines are known by case officers and if, in practice, case officers / interviewers, in the closing phase of the interview, systematically give applicants a clear explanation of the next steps in the procedure, ask if the applicant has understood the information given and, if not initially understood, put in place efforts to further explain, making sure that the applicant understands.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding the conduct of the personal interview to check if they provide for the case officer to give applicants a clear explanation of the next steps in the procedure, making sure that the applicant understands.

Consult existing interview templates to check if they include questions/ a section whereby the case officers give applicants a clear explanation of the next steps in the procedure, leaving room for further explanation as needed if the applicants do not understand.

Survey case officers and their supervisors asking how case officers / interviewers, in the closing phase of the interview, explain the next steps in the procedure and make sure that the applicant eventually understands.

Rating system

Yes. Case officers / interviewers systematically give applicants a clear explanation of the next steps in the procedure, making sure that they have understood the information given.

No. Case officers / interviewers do not systematically give applicants a clear explanation of the next steps in the procedure **or** they do not ensure that applicants have understood the next steps in the procedure.

Partially. This is not an option for this indicator.





Survey applicants asking if they received a clear explanation of the next steps of the procedure during their interview and if they had chance to ask and receive effective clarifications if they did not understand.

Review individual case files, particularly the interview transcript, to check if case officers / interviewers gave applicants a clear explanation of the next steps in the procedure and, if needed, they further explained, making sure that the applicant eventually understands.

Shadow personal interviews to see if case officers / interviewers give applicants a clear explanation of the next steps in the procedure and, if needed, they further explained, making sure that the applicant eventually understands.

Implicit withdrawal of an application

STANDARD 41: An internal process is established to ensure the applicant is informed of the consequences of not complying with obligations and the situations that might lead to the implicit withdrawal of an application.

Indicator 41.1: Any request for submitting essential information is given in writing and/or orally, during the lodging phase or the personal interview.

Data collection

Guidance for assessment

Review if internal guidelines provide that any request made by the authorities to the applicant to submit essential information is given clearly, in writing or orally, during the lodging phase or at the personal interview.

Review if internal guidelines are known and applied by the officers in charge of lodging or of conducting personal interviews and if the request for submitting essential information is given in a clear manner either during the lodging phase or at the personal interview.

Rating system

Yes. Requests by the authorities to the applicant to submit essential information are systematically given in writing or orally, during the lodging phase or at the personal interview.

No. Requests by the authorities to the applicant to submit essential information are not systematically given in writing or orally, either





Tools

Consult guidance documents (such as guidelines or SOPs) regarding the lodging and the conduct of the personal interview to check if they provide that requests by the authorities to applicants to submit essential information is given in writing or orally, during the lodging phase or at the personal interview.

Consult existing templates or forms for the (information provision at) lodging phase and for the personal interview to check the content and clarity of the information provided to applicants with respect to submission of essential elements.

Survey officers in charge of lodging and their supervisors, and case officers and their supervisors, asking the content and form of the information provided to applicants on submission of essential elements.

Survey applicants asking the content and form (including the clarity) of the information they received at the lodging and at the personal interview phase on submission of essential elements.

Review individual case files, in particular the lodging form and interview transcript to check the content and form (including the clarity) of the information given to applicants on submission of essential elements.

Shadow lodging and personal interviews to see the content and form (including the clarity) of the information given to applicants on submission of essential elements.

during the lodging phase or at the personal interview.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 41.2: The information about the obligation to cooperate and to submit information essential to the asylum application should also include the consequences of not adhering to these obligations.

Data collection

Guidance for assessment

Review if internal guidelines provide that information is systematically and clearly given to applicants on their obligation to cooperate and to submit essential information and that the

Rating system

Yes. Information on the obligation to cooperate and to submit essential information **and** of the consequences of not adhering to these





information given to applicants should include the consequences of not adhering to these obligations.

Review if internal guidelines are known and applied by the officers in charge of lodging applications and of conducting personal interviews, and if they provide the relevant information to applicants in a complete and clear manner.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding the lodging and the conduct of the personal interview, and/or information provision to check if they provide that information is given to applicants on their obligation to cooperate and to submit essential information, including the consequences of not doing so.

Consult existing templates or forms for information provision, lodging and for the personal interview to check if they include content on information to be provided to applicants with respect to obligation to cooperate and submit essential information and consequences of not doing so.

Survey officers in charge of lodging and their supervisors, and case officers and their supervisors, asking about the content of the information provided to applicants on obligation to cooperate and submit essential elements.

Survey applicants asking the information they received on obligation to cooperate and submit information essential to the asylum application and the consequences of not abiding.

Review individual case files to check any record of the information given to applicants concerning their obligation to cooperate and submit essential elements.

Shadow lodging and personal interviews or information provision sessions to see which information is provided to applicants on the obligation to cooperate and submit essential elements and the consequences of not adhering.

obligations is systematically and clearly given to applicants.

No. Information on the obligation to cooperate and to submit essential information **or** of the consequences of not adhering to these obligations is not systematically and clearly given to applicants.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 41.3: An invitation for the personal interview is given to the applicant in writing. The invitation specifies the consequences of not appearing for the personal interview without a timely and valid explanation, in line with national law or practice.





Data collection

Guidance for assessment

Review national law or practice regarding the consequences of not appearing for the personal interview without a timely and valid explanation.

Review if it is clearly defined which conditions must be met for the explanation to be considered valid and to have been submitted in a timely manner.

Review if invitations for personal interviews that are being sent out by (all) the competent authorities are in written form.

Review if the invitations for personal interviews clearly specify the consequences of not appearing for the personal interview without a timely and valid explanation, in line with national law or practice, including when an explanation is considered (not) timely and (not) valid.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding the form (whether in writing or orally) and content of the invitation to the personal interview.

Consult guidance documents (such as guidelines or SOPs) to check there is a clear definition of which conditions must be met for the explanation for not appearing to the personal interview to be considered valid and to have been timely submitted.

Consult existing templates or forms used by the competent authorities for the invitation to the personal interview to check if they include mention of the consequences of not appearing for the personal interview without a timely and valid explanation.

Survey competent staff of the authorities in charge of issuing invitations to personal interviews asking about the content of the invitation letter with respect to the consequences of not appearing for the personal interview without a timely and valid explanation.

Rating system

Yes. The invitations that are sent out by the competent authority are in written form **and** clearly specify the consequences of not appearing for the personal interview without a timely and valid explanation.

No. The invitations that are sent out by the competent authority are not in written form **or** they do not specify the consequences of not appearing for the personal interview without a timely and valid explanation.

Partially. This is not an option for this indicator.





Survey applicants asking about the form, content and clarity of the information provided in the invitation letters on the consequences of not appearing for the personal interview without a timely and valid explanation.

Review a sample of invitation letters sent by all competent authorities to check if they clearly specify the consequences of not appearing for the personal interview without a timely and valid explanation and include an explanation as to what is considered (not) timely and (not) valid.

Indicator 41.4: As applicable, the applicant has been properly informed, orally and/or in writing, of the consequences of absconding, or leaving the place where they lived or were held without authorisation, or of not complying with reporting duties or other obligations to communicate a change of address.

Data collection

Guidance for assessment

Review if internal guidelines provide that, during the asylum procedure, applicants are systematically, and in in a timely manner, given clear information – either orally or in writing – on the consequences of absconding from, or leaving without authorisation, the place where they live or are held, and of not complying with reporting duties or other obligations to communicate a change of address.

Review if, in practice, such information is given in a complete, clear and timely manner.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding the lodging or the conduct of the personal interview and/or with respect to information provision to check if they provide for the applicants to be informed clearly and in a timely manner on the consequences of absconding from, or leaving without authorisation, the place where they live or are held, and of not complying with reporting duties or other obligations to communicate a change of address.

Rating system

Yes. Clear and timely information is systematically given to applicants on the consequences of absconding from, or leaving without authorisation, the place where they live or are held **and** of not complying with reporting duties or other obligations to communicate a change of address.

No. Clear and timely information is not systematically given to applicants on the consequences of absconding from, or leaving without authorisation, the place where they live or are held **or** of not complying with reporting duties or other obligations to communicate a change of address.

Partially. This is not an option for this indicator.





Consult existing templates or forms used by the competent authorities for lodging or the personal interview to check if they include information to the applicant on the consequences of absconding from, or leaving without authorisation, the place where they live or are held, and of not complying with reporting duties or other obligations to communicate a change of address, and to check if the information included is clear.

Consult existing information provision materials or scripts to check if they include information to the applicant on the consequences of absconding from, or leaving without authorisation, the place where they live or are held, and of not complying with reporting duties or other obligations to communicate a change of address, and to check if the information included is clear.

Survey competent staff of the authorities in charge of lodging or the personal interview, or of information provision asking if and how they inform applicants on the consequences of absconding from, or leaving without authorisation, the place where they live or are held, and of not complying with reporting duties or other obligations to communicate a change of address.

Survey applicants asking what information they received and when on the consequences of absconding from, or leaving without authorisation, the place where they live or are held, and of not complying with reporting duties or other obligations to communicate a change of address, and if the information was clear.

Review individual case files to check the content of written communications to the applicant on the consequences of absconding from, or leaving without authorisation, the place where they live or are held, and of not complying with reporting duties or other obligations to communicate a change of address.

Shadow lodging interviews or personal interviews or information provision session to see if and at which stage of the process applicant are given clear information on the consequences of absconding from, or leaving without authorisation, the place where they live or are held, and of not complying with reporting duties or other obligations to communicate a change of address.





STANDARD 42: Safeguards have been established before the determining authority discontinues the examination or rejects the application.

Indicator 42.1: Before the discontinuation or rejection is issued, the applicant has been given a reasonable time, defined by the determining authority, during which they can demonstrate that failure to comply was due to circumstances beyond their control.

Data collection

Guidance for assessment

Review if internal guidelines provide a defined time frame for applicants to demonstrate that their failure to comply with obligations or terms that led to the rejection of the application or to the discontinuation of the examination was due to circumstances beyond their control.

Review if the time frame is adequate for applicants to have an effective possibility to demonstrate the reasons behind their failure to comply.

Review if the guidelines are known by the staff tasked with implementing them and if the relevant workflow is effectively applied.

Review if applicants are systematically given a reasonable time during which they can demonstrate that failure to comply was due to circumstances beyond their control, before the decision of discontinuation or rejection is issued.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding the workflow for reaching and issuing a decision of discontinuation of the examination or a rejection of the application based on failure to comply and the timeframe during which applicants can demonstrate that failure to comply was due to circumstances beyond their control.

Survey competent staff of the authorities in charge of the examination asking about the practice on giving applicants a reasonable time during which they can demonstrate that failure to comply was due to circumstances beyond their control, before issuing a decision.

Rating system

Yes. Applicants are systematically given time to demonstrate that failure to comply was due to circumstances beyond their control before the discontinuation or rejection is issued **and** the time given to do so is reasonable.

No. Applicants are not systematically given time to demonstrate that failure to comply was due to circumstances beyond their control before the discontinuation or rejection is issued **or** the time given to do so is not reasonable.

Partially. This is not an option for this indicator.





Survey applicants asking if they were given a reasonable time demonstrate that failure to comply was due to circumstances beyond their control.

Review individual case files to check documentation indicating whether applicants were given a reasonable time to demonstrate that failure to comply was due to circumstances beyond their control.

Indicator 42.2: The decision includes an examination of the justification provided by the applicant for their failure to comply.

Data collection

Guidance for assessment

Review if internal guidelines provide that decisions to discontinue the examination or reject the application must include a reasoned examination of the justification provided by applicants for their failure to comply.

Review if guidelines are known by personnel tasked with implementing them and if, in practice, the decisions systematically include an examination of the justification provided by applicants for their failure to comply.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding provisions as to the form and content of decisions of withdrawal to check if they include a reasoned examination of the justification provided by applicants.

Consult existing decision templates or forms used by all competent authorities to issue decisions of withdrawal to check if they include a section for the examination of the justification provided by applicants.

Survey competent staff of the authorities in charge of issuing decisions of withdrawal asking about the examination of the reasons provided by the applicant for not complying.

Review individual case files to check documentation indicating whether decisions of withdrawal included a reasoned examination of the justification provided by applicants.

Rating system

Yes. Decisions to discontinue the examination or reject the application systematically include an examination of the justification provided by the applicant for their failure to comply.

No. Decisions to discontinue the examination or reject the application do not systematically include an examination of the justification provided by the applicant for their failure to comply.

Partially. This is not an option for this indicator.





Concluding the examination as soon as possible

STANDARD 43: Every stage of the first instance asylum procedure is followed without any undue delay.

Indicator 43.1: There is a clear description of the workflow and activities to meet the time limits. The workflow is reviewed/adjusted regularly.

Data collection

Guidance for assessment

Review if the internal guidelines outline a workflow covering every stage of the first-instance asylum procedure.

Review if the workflow is clearly defined and describes activities to be carried out at the different stages of the procedure to meet the time limits to issue a decision.

Review if the workflow is regularly reviewed and adjusted as needed.

Review if the personnel tasked with implementing the activities described in the workflow are familiar with them and implement them in a timely manner.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding the first-instance procedure to check if they clearly describe a workflow and activities to be carried out at the different stages of the procedure to meet the time limits to issue a decision.

Directly observe all the various stages of the workflow and related activities.

Survey competent staff of the authorities tasked with the various activities of the first-instance examination workflow asking about the clarity of the workflow and of its revision/update.

Rating system

Yes. A workflow exists that is clearly defined and describes the activities to be carried out at the different stages of the first-instance procedure to meet the time limits to issue a decision and the workflow is regularly reviewed and adjusted.

No. No workflow exists outlining the activities to be carried out at the different stages of the procedure to meet the time limits to issue a decision **or** the workflow or activities are not clearly defined and described *or* the workflow is not regularly reviewed and adjusted.

Partially. This is not an option for this indicator.





Review individual case files to check the timeline of the key stages of the procedure to see if they meet the time limits.

Indicator 43.2: Internal guidance has been established indicating the expected timeframe for the different steps of the procedure.

Data collection

Guidance for assessment

Review if the internal guidelines outline a workflow that clearly defines the expected time frames for the different steps in the procedure and related activities.

Review if the expected time frames for the various steps and activities are known to the personnel tasked with implementing them and the relevant workflow is applied.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding the time frames for the various steps in the workflow for the first-instance procedure.

Directly observe all the various stages of the workflow and related activities.

Survey competent staff of the authorities tasked with the various activities of the first-instance examination workflow asking about the expected timeframe for the various steps of the procedure.

Rating system

Yes. There is internal guidance that establishes the expected time frames for the different steps in the procedure.

No. There is no internal guidance establishing the expected time frames for the different steps in the procedure **or** the guidelines are not implemented in a timely manner.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

STANDARD 44: The personal interview is organised in a way that prevents unnecessary delays.

Indicator 44.1: The personal interview is scheduled as soon as possible (in accordance with national law) after the lodging of the application and taking into consideration Standard 33.

Data collection

Guidance for assessment

Review relevant national law.

Rating system

Yes. The personal interview is systematically scheduled as soon as possible after lodging.





Review if the workflow provides for the personal interview to be scheduled as soon as possible after lodging of the application.

Review if the personal interview is systematically scheduled as soon as possible after lodging, taking into consideration the earliest availability of interpreters, case officers, legal representatives or other persons who need to be present at the interview; the earliest availability of interview rooms; and relevant circumstances on the applicant's side, including the need for special procedural guarantees.

Tools

Consult relevant national law.

Consult guidance documents (such as guidelines or SOPs) regarding the scheduling of the personal interview.

Consult the file management or file tracking system that records when the lodging of an application and the personal interview took place.

Survey competent staff of the authorities tasked with scheduling the personal interview and case officers or their supervisors.

Review individual case files, including any document that record the time between lodging and personal interview.

No. The personal interview is not systematically scheduled as soon as possible after lodging.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 44.2: Measures are taken to ensure that the interview can take place as soon as possible in the case of any unforeseen circumstances on the part of the determining authority.

Data collection

Guidance for assessment

Review if the internal guidelines include measures to ensure that the personal interview takes place as soon as possible in the event of any unforeseen circumstances on the part of the determining authority.

Review if the guidelines are effectively implemented so that the personal interview is scheduled as soon as there is a suitable slot available after the unforeseen circumstances have been resolved or cease to have an impact.

Rating system

Yes. Measures are systematically taken to ensure that the personal interview takes place as soon as possible in the event of any unforeseen circumstances on the part of the determining authority.

No. Measures are not systematically taken to ensure that the personal interview takes place as soon as possible in the event of any





Tools

Consult guidance documents (such as guidelines or SOPs) regarding the scheduling of the personal interview to check if they include measures to ensure that the personal interview takes place as soon as possible in the event of any unforeseen circumstances on the part of the determining authority.

Survey competent staff of the authorities tasked with scheduling the personal interview and case officers or their supervisors asking how they ensure that the personal interviews are (re)scheduled as soon as there is a suitable slot available after the unforeseen circumstances have been resolved or cease to have an impact.

Consult the file management or file tracking system that records the scheduling of the personal interview and possibly include information on unforeseen circumstances on the part of the determining authority that affected it.

Review individual case files, including any document that records the time between lodging and the personal interview.

unforeseen circumstances on the part of the determining authority.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 44.3: Any known issues with the language of interpretation for the personal interview are identified and dealt with in advance of the personal interview to find appropriate alternatives.

Data collection

Guidance for assessment

Review if the system provides for measures to identify issues with interpretation prior to the personal interview.

Review if the guidelines define the workflow to follow and the actions to take in order to find appropriate alternatives when an issue with the language of interpretation is identified (e.g. when there is no interpreter available for the language or dialect that the applicant speaks, or there is no interpreter of the language that is of the gender for which the applicant expressed a preference).

Rating system

Yes. Issues with the language of interpretation are systematically identified **and** effectively addressed in advance of the personal interview, to allow time to find appropriate alternatives.

No. Issues with the language of interpretation are not systematically identified **or** they are not effectively addressed in advance of the





Review if the workflow clearly defines who needs to take actions.

Review if, in practice, the system and related workflow allow for issues with interpretation to be addressed and solved prior to the personal interview with appropriate alternatives.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding the scheduling of the personal interview, the identification of the language for the personal interview and the identification of the interpreter.

Survey staff of authorities conducting personal interviews and/or their supervisors, to personnel tasked with assigning interpreters to personal interviews and to interpreters' coordinators/managers.

Review individual case files.

personal interview, to allow time to find appropriate alternatives.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 44.4: Any necessary arrangements for special procedural guarantees are made soon after the registration and before the personal interview, including considerations for the most appropriate time for the interview.

Data collection

Guidance for assessment

Review if internal guidelines provide that the authorities conducting registration and/or lodging identify and record the need for any special procedural guarantees and ensure that the information is made available to the authorities and personnel in charge of scheduling and conducting the personal interview.

Review if internal guidelines provide that the authority in charge of scheduling the interview considers any relevant special procedural guarantees when scheduling and determining the (appropriate) time of the interview.

Review if internal guidelines provide that the authority in charge of setting up and conducting the personal interview takes any necessary arrangements to ensure that the required special procedural guarantees are implemented.

Rating system

Yes. Any necessary arrangements for special procedural guarantees are systematically made soon after registration and before the personal interview, including considerations for the most appropriate time for the interview.

No. Necessary arrangements for special procedural guarantees are not systematically made soon after registration and before the personal interview **or** they do not include considerations for the most appropriate time for the interview.





Review if the guidelines are known by the personnel tasked with implementing them and if, in practice, any necessary arrangements for special procedural guarantees are made soon after the registration and before the personal interview, including considerations for the most appropriate time for the interview.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding registration and lodging; the filing and recording of information, including vulnerabilities and special needs; the scheduling of the personal interview; and the conduct of the interview and examination of the application.

Survey staff of authorities in charge of registration or lodging (including registration officers) asking how they identify, record and transmit information on the need for special procedural guarantees.

Survey staff in charge of scheduling of the personal interview asking about the information they receive on previously identified needs and the considerations they make when scheduling interviews particularly with respect to the provision of special procedural guarantees and the determination of the (appropriate) time for the interview.

Survey staff in charge of conducting the interview / examination (including case officers and their supervisors), asking whether scheduling of the interview, determination of the time for the interview, and setting up of the interview took into consideration all the needs for special procedural guarantees.

Review individual case files, including registration or lodging forms, interview transcripts and any documents that record special needs or referrals relating to special needs that call for the implementation of special procedural guarantees.

Consult the file management or file tracking system that records vulnerabilities and needs for special procedural guarantees, and that records the times when the lodging and the personal interview took place.





Shadow lodging and personal interviews to see how arrangements were made for special procedural guarantees.

Directly observe the interview scheduling system to check when and how the needs for special procedural guarantees come into play and are considered.

Indicator 44.5: Postponement of the planned interview upon the request of the applicant is accepted, in accordance with the national legislation, only upon the presentation of a valid justification.

Data collection

Guidance for assessment

Review if internal guidelines provide that the personal interview, once scheduled, can be postponed at the request of the applicant upon presentation of a valid justification.

Review that internal guidance clearly defines what conditions must be met for the justification to be considered valid and who is responsible to assess and take the decision.

Review if the system allows for requests by applicants to be received, recorded and transmitted to those in charge of scheduling the interviews and that internal guidelines define the workflow to do so.

Review if the guidelines are in line with the relevant national legislation.

Review if the internal guidelines are known to the personnel tasked with implementing them and if, in practice, the postponement of a scheduled interview at the request of the applicant is accepted (only) upon the presentation of a valid justification.

Tools

Consult national legislation with respect to the postponement of personal interviews.

Consult guidance documents (such as guidelines or SOPs) regarding the scheduling of the personal interview to check if they include the possibility postponement of the personal interview upon the applicant's request, if they clearly define the conditions under which the

Rating system

Yes. The personal interviews, once planned, are systematically postponed at the request of the applicant (only) upon presentation of a valid justification.

No. The personal interviews are not systematically postponed at the request of the applicant upon presentation of a valid justification **or** the personal interview, once planned, is postponed at the request of the applicant upon presentation of an invalid justification *or* without justification.

Partially. This is not an option for this indicator.





requests/justifications are to be considered valid, and who is responsible for implementing; and regarding the receipt and management of requests by applicants (in relation to postponement of personal interviews).

Survey the staff of authorities in charge of the scheduling of the personal interview asking about the system in place for the receipt, recording and transmission of requests by applicants for postponing the interview; and asking how requests are considered and decided upon.

Directly observe interview scheduling system and workflow.

Review individual case files, including any document that records requests made by applicants for the postponement of the interview.

STANDARD 45: The pending cases are closely monitored and properly managed.

Indicator 45.1: An internal mechanism is developed for monitoring pending cases where and how long they have been pending in the different steps of the procedure.

Data collection

Guidance for assessment

Review if an internal case monitoring mechanism exists and is operational and allows the authority to track and monitor how long and where individual cases have been pending since lodging and at each stage of the examination.

Tools

Consult guidance documents (such as guidelines or SOPs) regarding the establishment and functioning of a case monitoring mechanism.

Rating system

Yes. A case monitoring mechanism that allows the authority to monitor how long **and** where the cases have been pending since lodging, **and** at any given step of the examination, exists and is effectively operational.

No. No case monitoring mechanism that allows the authority to monitor how long and where cases have been pending since lodging, and at any given step of the examination, exists **or** such a mechanism exists but is not effectively





Directly observe the functioning/operationalisation of case tracking and case monitoring mechanisms or databases to check if they allow to monitor where and how long cases have been pending in the different steps of the procedure.

Survey staff of authorities in charge of the examination asking about the functioning of the mechanism for monitoring pending cases.

operational *or* allows the authority to monitor only when or only where a case has been pending *or* does not allow the authority to monitor when and where a case is pending at all the different steps of the procedure.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 45.2: Based on the result of the monitoring, necessary measures are taken to reduce the number of pending cases.

Data collection

Guidance for assessment

Review if the necessary measures are taken by the authority to reduce the number of pending cases.

Review if these measures have been identified and designed based on the results of monitoring. Note that these measures should not compromise the quality of the process, including the implementation of special procedural guarantees and rights.

Tools

Consult guidance documents (such as plans of actions, guidelines or SOPs) regarding the measures to reduce the number of pending cases.

Survey staff of authorities in charge of examining international protection applications asking about measures taken to reduce the number of pending cases and the impact on the quality of the process.

Rating system

Yes. Measures are identified by the authority and implemented to reduce the number of pending cases **and** such measures are based on the results of monitoring.

No. Measures to reduce the number of pending cases are not applied **or** they are not based on the results of the monitoring.

Partially. This is not an option for this indicator.

N/A. Monitoring reveals a limited number of pending cases and no particular measures to reduce this number are considered necessary.





Decision

STANDARD 46: A quality assurance mechanism has been established to ensure that all decisions are soundly motivated both in fact and in law.

Indicator 46.1: Support tools have been made accessible to assist the case officer on how to formally motivate the decision (e.g. checklists, guidelines, etc.).

Data collection

Guidance for assessment

Review if there are tools (e.g. checklists, guidelines) available to assist the case officer in reaching the first-instance decision.

Review if the reasoning refers to the main elements of the decision, particularly the credibility assessment, the risk assessment and the legal analysis.

Review if the tools on how to motivate a decision are made accessible to the case officers.

Tools

Consult existing tools on how to motivate a decision and the existing channels for the distribution of these tools to case officers.

Review a sample of case files and check if the support tools have been used to formally motivate a decision.

Survey case officers and case officers' supervisors on the accessibility and the use of the tools and case officers' ease of access to them.

Survey personnel who are responsible for the drafting of these tools on the content of the tools.

Rating system

Yes. There are tools available on how to motivate a decision **and** they are accessible to the case officers **and** they are systematically applied.

No. There are no tools available on how to reach a decision **or** tools are available **but** are not accessible to case officers **or** tools are available and accessible to case officers **but** are not systematically applied.

Partially. There are tools available on how to motivate a decision **but** they cover only part of the reasoning for a decision.





Survey personnel who are responsible for disseminating the tools on the ways the tools are disseminated to the case officers.

Indicator 46.2: Decision templates(s) are available to the case officer.

Data collection

Guidance for assessment

Review if decision templates are available to case officers. These templates should cover the different kinds/types of decision on admissibility and on merits, as well as examples of positive and negative decisions.

Tools

Consult available decision templates.

Review a sample of case files and check if the templates are being used.

Survey case officers on the availability and the use of decision templates and, in particular, why they are not used in case they are available.

Rating system

Yes. Decision templates on all existing procedures are available to case officers **and** are systematically used.

No. Decision templates are not available **or** they are available, **but** they are not systematically used.

Partially. Decision templates are available and systematically used, **but** not for all kinds/types of decision on admissibility and on merits.

N/A. This is not an option for this indicator.

Indicator 46.3: A quality control system is put in place to regularly review the interviews and decisions, including the provision of feedback to the case officer.

Data collection

Guidance for assessment

Review if a quality control system is in place. This system should include the regular review of personal interviews and first instance decisions and the provision of feedback to case officers. The outcome of the implementation of this system should be reflected in reports.

Review if there is a plan in place for the quality control system and the way it is implemented.

Rating system

Yes. A quality control system for the review of interviews and decisions is in place, including the provision of feedback to case officers, **and** is applied regularly.





Tools

Consult guidance documents (such as guidelines or SOPs) for the quality control system, their implementation, the plan for the implementation of the system and the provision of feedback.

Consult the records of individual feedback provided to case officers.

Consult the reports that are the outcome of the implementation of the quality control system.

Survey developers of the system and of the guidelines/SOPs that describe the system and its implementation on the structure, content and implementation of the system.

Survey staff responsible for the implementation of the system asking about the implementation of the system.

No. No quality control system is in place **or** there is a quality control system is place, but no feedback is provided to case officers.

Partially. A quality control system in place but is only for decisions or for interviews and/or a quality control system is in place but is not implemented regularly and/or a quality control system is in place but feedback to case officers is not provided regularly.

N/A. This is not an option for this indicator.

STANDARD 47: Where an application is lodged on behalf of the applicant's minor child, the determining authority pays particular attention to any specific grounds that could be applicable to the child on an individual basis.

Indicator 47.1: Specific internal guidance is provided to the case officers on how to take into account the situation of accompanied children.

Data collection

Guidance for assessment

Review if case officers are provided with specific internal guidance on how to take into account the situation of accompanied children, where an application is lodged on behalf of an applicant's minor child. This guidance aims to support case officers in exploring any specific ground that could be applicable to the child on an individual basis.

Review of the ways that this guidance is provided/disseminated to case officers.

Rating system

Yes. Specific internal guidance is provided to case officers on how to take into account the situation of accompanied children, where an application is lodged on behalf of an applicant's minor child, and the guidance is systematically implemented.

No. No specific internal guidance is provided to the case officers on how to take into





Tools

Consult guidance documents (such as guidelines or SOPs) on how to take into account the situation of accompanied children.

Review a sample of case files and check if the guidance on how to take into account the situation of accompanied children, where an application is lodged on behalf of an applicant's minor child, was taken into consideration.

Survey case officers and their supervisors who implement the guidance on how the guidance supports them to take into account the situation of accompanied children.

account the situation of accompanied children, where an application is lodged on behalf of the applicant's minor child, **or** there is specific internal guidance **but** it is not systematically implemented.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

STANDARD 48: The decision is properly notified to the applicant.

Indicator 48.1: A workflow has been put in place by the determining authority to ensure that the applicant is notified of the decision within a reasonable timeframe.

Data collection

Guidance for assessment

Review if a workflow has been put in place to ensure that applicants are notified of the decision within a reasonable time frame after the issuing of the decision.

Review if a tracking system allows for the timeframe of the notification to be recorded.

Tools

Consult guidance documents (such as guidelines or SOPs) where the workflow is described. **Consult** the tracking system / record of the notifications and compare it with the date of the issuing of the decisions.

Review a sample of case files to compare the date of the notification with the date of the issuing of the decisions.

Survey personnel who notify the decision to the applicants on the timeframe according to which the notifications take place.

Rating system

Yes. A workflow has been put in place by the determining authority to ensure that applicants are systematically notified of the decision within a reasonable time frame.

No. No workflow is in place to ensure that the

applicant is notified of the decision within a reasonable time frame **or** there is a workflow in place **but** applicants are not systematically notified within a reasonable time frame.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.





STANDARD 49: The applicant is informed of the decision in a language that they understand.

Indicator 49.1a: Where the applicant is notified of the decision by post, electronic courier or through an intermediary, it is accompanied by a document, in a language the applicant understands, that informs of the decision.

Additional remark. In cases where a legal adviser or other counsellor represents the applicant, the decision can be notified either to the legal adviser or other counsellor or to the applicant.

Data collection

Guidance for assessment

Review if the document that accompanies the notification is available in the different languages that are used by applicants. If this document is not available/suitable (e.g. it is not available in the language of the applicant or notification by document does not meet the special needs of the applicant), then the administration can proceed with oral notification (see indicator 49.1b).

Review if the document that accompanies the decision, available in different languages, avoids terminology that is excessively technical or unclear.

If the applicant is represented by a legal adviser or other counsellor, review if the authority notifies them of the decision.

Tools

Consult samples of notifications and the documents that accompany them.

Consult templates of the notification and accompanying documents in the various languages available

Directly observe or shadow notifications done by the authority, including the preparation and posting of the documents.

Survey personnel who prepare and send the notifications on the document that accompanies the notifications.

Rating system

Yes. The documents that accompany notifications are written in a clear and non-technical way and they are systematically available in a language that the applicant understands.

No. The documents that accompany decisions are not written in a clear and non-technical way systematically available and/or in a language that the applicant understands.

Partially. The documents that accompany notifications are written in a clear and non-technical way and are systematically available in a language that the applicant understands but some of this information is too technical or unclear on some non-key aspects

N/A. The decision is notified only to the legal adviser or other counsellor who represents the applicant **or** the notification is done orally.





OR

Indicator 49.1b: Where the applicant is notified of the decision in person, they are informed of the result in a language that they understand.

Additional remark. In cases where a legal adviser or other counsellor represents the applicant, the decision can be notified either to the legal adviser or other counsellor or to the applicant.

Data collection

Guidance for assessment

Review if applicants are notified of the decision in a language that they understand.

Review cases in which the applicant was represented by a legal adviser or other counsellor to determine if the legal adviser or other counsellor was notified of the decision by the authority.

Tools

Consult the record of notifications and note the languages that have been used for notifications.

Directly observe or shadow the way in which the authority notifies applicants of the decision and the languages that are used.

Survey personnel who notify the applicant on the language that they use for the notifications.

Survey applicants asking if they were notified of the decision in a language they understand.

Rating system

Yes. Applicants are systematically informed of the decision in a language that they understand.

No. Applicants are not systematically informed of the decision in a language that they understand.

Partially. This is not applicable for this indicator.

N/A. The decision is notified only to the legal adviser **or** other counsellor who represents the applicant.





STANDARD 50: In the event of a negative decision, the applicant receives accurate and precise information on how to challenge the decision.

Indicator 50.1: The applicant is provided in writing with information on how to challenge a negative decision, including the name and address of the competent court or tribunal to assess the appeal and the applicable time limits to appeal against the negative decision, in accordance with national law.

Additional remark. Information should be provided in clear and non-technical language.

Additional remark. Information should be provided orally in the case of illiteracy or in cases where the person does not understand the written information provided.

Data collection

Guidance for assessment

Review if applicants are provided with information on how to challenge a negative decision. This information must include the name and the address of the court or tribunal competent to assess the appeal and the applicable time limit by which to appeal against the negative decision.

Review if the written information about challenging a negative decision that is provided to the applicants is written in clear and non-technical language.

Review if the information that is provided to applicants about how to challenge a negative decision is provided orally in the case of illiterate applicants or applicants who are unable to understand the written information provided.

Tools

Consult the document that the applicant receives on how to challenge a negative decision to check its content.

Consult the source (document, SOPs) that includes the information that the staff provide to the applicant on how to challenge a negative decision orally in the case of illiteracy or if the person does not understand the written information provided.

Rating system

Yes. Applicants are systematically provided, in writing, with information on how to challenge a negative decision and given all the information necessary to do so: the name and address of the court or tribunal competent to assess the appeal and the applicable time limits by which to appeal against the negative decision. The information is provided in clear and non-technical language. The same information is provided orally in the case of illiterate applicants or applicants who are unable to understand the written information provided.

No. Applicants are not systematically provided with information, in writing, on how to challenge a negative decision, including the name and address of the court or tribunal competent to assess the appeal and the applicable time limits to appeal against the negative decision **or** this





Shadow competent staff communicating orally with illiterate applicants or applicants who cannot understand written information to provide them with information on how to challenge a negative decision.

Survey staff who are responsible for providing the written and/or oral information to applicants on what this information includes and how it is provided.

information is not provided orally in the case of illiterate applicants or applicants who are unable to understand the written information provided **or** this information does not include the name and the address of the court or tribunal competent to assess the appeal **or** the applicable time limits to appeal against the negative decision **or** this information is not provided in clear and non-technical language.

Partially. Applicants are provided, in writing, with information on how to challenge a negative decision and the applicable time limits to appeal against the negative decision **but** this information includes only the name of the authority **or** only the address of the court or tribunal competent to assess the appeal.

N/A. This is not an option for this indicator.

Indicator 50.2: Information on the suspensive effect of the appeal is provided to the applicant, including information on how to request the suspension of any removal measure in accordance with national law.

Data collection

Guidance for assessment

Review if information on the suspensive effect of the appeal is provided to applicants. This information must include information on how to request the suspension of any removal measure.

Tools

Consult the legal provision on the appeal and if suspensive effect is automatic by the appeal.

Rating system

Yes. Information on the suspensive effect of the appeal is systematically provided to applicants, including information on how to request the suspension of any removal measure.





Consult the information that is provided to applicants on the suspensive effect of the appeal, if it is written down.

Consult guidance documents (guidelines or SOPs) that include the information that is provided to applicants, if this information is provided orally.

Directly observe this information being provided orally to applicants.

Survey personnel who provide the information on the suspensive effect of the appeal on what kind of information is provided.

No. Information on the suspensive effect of the appeal is not systematically provided to applicants.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

Indicator 50.3: Information on how to challenge a negative decision is provided together with the notification of the negative decision where the applicant has not been provided with this information at an earlier stage.

Additional remark: Information on how to challenge a negative decision can be included systematically in the decision or in a separate document attached to the decision.

Data collection

Guidance for assessment

Review if information on how to challenge a negative decision is provided to the applicant together with the notification of the negative decision, where the applicant has not been provided with this information at an earlier stage. This information can either be included in the decision or be provided in a separate document attached to the decision.

Tools

Consult the template of the negative decision, if the information on how to challenge a negative decision is included systematically in the negative decision, or of the document containing the information on how to challenge a negative decision that is attached to the negative decision.

Review a sample of case files and check if negative decisions include the information on how to challenge a negative decision, if the information on how to challenge a negative decision is included systematically in the negative decision.

Rating system

Yes. Information on how to challenge a negative decision, is provided systematically together with the notification of the negative decision.

No. Information on how to challenge a negative decision, is not provided systematically together with the notification of the negative decision.

Partially. This is not an option for this indicator.

N/A. The applicants are systematically informed on how to challenge a negative decision at earlier stages of the procedure preceding the notification.





Survey personnel who provide the information on how to challenge a negative decision on what kind of information is provided.

Indicator 50.4: The special needs of the applicant are taken into account when providing information on how to challenge the negative decision.

Data collection

Guidance for assessment

Review if the special needs of applicants are taken into account when providing information on how to challenge a negative decision.

Tools

Consult guidance documents (such as guidelines or SOPs) that describe how the special needs of applicants are to be taken into account when providing information on how to challenge a negative decision.

Survey personnel who provide the information on how to challenge a negative decision on how special needs are taken into account when this information is provided.

Directly observe the information that is being provided to applicants, to check if special needs are taken into account.

Rating system

Yes. The special needs of the applicants are systematically taken into account when providing information on how to challenge a negative decision.

No. The special needs of the applicants are not systematically taken into account when providing information on how to challenge a negative decision.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.





STANDARD 51: Clarification on the reasons for a negative decision at first instance are given at the request of the applicant.

Indication 51.1: The applicant has access to staff of the competent authorities or other actors, who can clarify the reasons for the negative decision in a non-technical way.

Data collection

Guidance for assessment

Review if and how applicants can request clarification regarding the reasons for the negative decision and how the feedback is provided to them.

Review if applicants have access to staff who can clarify the reasons for a negative decision in a non-technical way.

Tools

Consult guidance documents (such as guidelines or SOPs) that describe if and how applicants have access to staff of the competent authorities or other actors who can clarify the reasons for the negative decision in a non-technical way and how they receive feedback.

Survey personnel who are responsible for providing clarification to applicants on the reasons for a negative decision on the content of the clarifications that are provided and the language that is used.

Survey applicants on clarifications they receive on the reasons for a negative decision, on the content of the clarifications that are provided and the language that is used.

Rating system

Yes. Applicants systematically have access to staff who can clarify the reasons for a negative decision and this clarification is provided in a non-technical way.

No. Applicants do not systematically have access to staff who can clarify the reasons for a negative decision in a non-technical way **or** the clarification is not systematically provided **or** the clarification is not provided in a non-technical way.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.





Information on the delay of the decision and the reason / time frame

STANDARD 52: A monitoring system allows for the identification of cases where a decision is not issued in time.

Indicator 52.1: A system is in place to track cases for which a decision cannot be taken within six months of the lodging.

Data collection

Guidance for assessment

Review if there is a system in place to track cases for which the decision cannot be taken within 6 months of the lodging.

Tools

Consult the system that is in place to track cases, the guidance document (such as guidelines or SOPs) that describes how the system works or the documents where the cases are recorded.

Survey personnel who are responsible for monitoring cases and using the tracking system on the implementation of the system.

Rating system

Yes. A system is in place to systematically track cases for which a decision cannot be taken within 6 months of the lodging.

No. A system is not in place to systematically track cases for which a decision cannot be taken within 6 months of the lodging.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

STANDARD 53: The applicant is informed when a decision has not been issued after a six-month period.

Indicator 53.1: The determining authority informs the applicant orally / in writing of the delay of the decision.

Data collection

Guidance for assessment

Review if the determining authority informs the applicant orally / in writing that the decision has been delayed.

Rating system

Yes. The determining authority systematically informs applicants of the delay of the decision in a language that the applicant understands **and** in clear, non-technical language.





Tools

Consult the information that the applicant receives of the delay of the decision, if provided in writing.

Consult guidance documents (such as guidelines or SOPs) that describe the information that the applicant receives orally of the delay of the decision.

Survey personnel who are responsible for providing the information on the kind of the information that is provided.

Directly observe this information being provided to applicants, when it is provided orally, on the kind of information is provided.

No. The determining authority does not systematically inform applicants of the delay of the decision **or** the determining authority systematically informs applicants of the delay of the decision **but** not in a language that the applicant understands.

Partially. The determining authority systematically informs applicants of the delay of the decision, **but** not in clear, non-technical language.

N/A. This is not an option for this indicator.

Indicator 53.2: Upon request, information about the reasons for the delay is given orally / in writing.

Data collection

Guidance for assessment

Review if information about the reasons for the delay is given orally / in writing.

Review if the information about the reasons for the delay is given orally / in writing at the request of the applicant.

Tools

Consult the guidance documents (such as guidelines or SOPs) that describes how applicants can request information about the reasons for the delay, what kind of information will be provided and whether the information will be provided orally or in writing. If the information is provided in writing, consult the document that applicants receive.

Survey personnel who are responsible for providing the information to the applicant about the reasons for the delay on the kind of information that is provided.

Rating system

Yes. Information about the reasons for the delay is systematically given to applicants orally / in writing, at their request, in a language that they understand **and** in a clear, non-technical way.

No. Information about the reasons for the delay is not given systematically to applicants orally / in writing, at their request **or** information about the reasons for the delay is given systematically to the applicant orally / in writing, at their request, **but** not in a language that the applicant understands.





Directly observe the information about the reasons for the delay being provided to applicants, when it is provided orally, on the kind of information that is provided.

Partially. Information about the reasons for the delay is given systematically to applicants orally / in writing, at their request, in a language that they understand, **but** the information is not provided in clear, non-technical language.

N/A. This is not an option for this indicator.

Indicator 53.3: A process is in place for the authority to identify quickly the reason for the delay.

Data collection

Guidance for assessment

Review if a process is in place for the authority to quickly identify the reason for the delay.

Tools

Consult the process that is in place for the authority to quickly identify the reason for the delay, or the guidance document (such as guidelines or SOPs) where this process is described.

Survey personnel who are responsible for applying the process and identifying the reasons for the delay on the way that the process is implemented.

Rating system

Yes. There is a process in place for the authority to systematically and quickly identify the reason for the delay.

No. No process is in place for the authority to systematically identify the reason for the delay.

Partially. There is a process in place for the authority to systematically identify the reason for the delay, **but** the identification is not done quickly.

N/A. This is not an option for this indicator.





Special procedures

STANDARD 54: Where the Member State has established accelerated procedures within its national asylum legislation, a work process and guidance are in place to enable compliance with the grounds for accelerating the procedure.

Indicator 54.1: The Member State has established a screening mechanism to identify the relevant cases.

Data collection

Guidance for assessment

Review if a screening mechanism has been established to identify relevant cases. The mechanism will support the identification of cases that can be examined under the accelerated procedure in accordance with the national legislation.

Identify who is responsible for implementing this mechanism and deciding on the channelling of cases to the accelerated procedure.

Tools

Consult the screening mechanism used to identify relevant cases or the source (guidelines, SOPs) that describes the mechanism.

Review a sample of case files that were examined under the accelerated procedure and check if the screening mechanism was applied.

Survey personnel who are responsible for implementing the mechanism and deciding on the cases to be channelled to the accelerated procedure on the implementation of the mechanism.

Rating system

Yes. A screening mechanism to systematically identify cases that are to be examined under the accelerated procedure has been established.

No. There is no screening mechanism to identify cases that are to be examined under the accelerated procedure **or** there is a screening mechanism **but** the relevant cases are not systematically identified.

Partially. This is not an option for this indicator.

N/A. No accelerated procedure is in place.

Indicator 54.2: The Member State has developed, where necessary, internal guidelines on how to apply the grounds that are described in the national law.

Data collection Rating system





Guidance for assessment

Review if internal guidelines on how to apply the grounds for the accelerated procedure that are described in the national law have been developed. These guidelines might not be necessary if there is relevant legislation or other legal documents (e.g. decrees, circulars) that detail how to apply the grounds for accelerated procedure that are described in the law.

Tools

Consult the guidelines that have been developed on how to apply the grounds for accelerated procedure that are described in the national law.

Review a sample of case files that were examined under the accelerated procedure and check if the internal guidelines on how to apply the grounds were applied.

Survey staff who apply the guidelines (case officers) on the way the guidelines are implemented.

Yes. Internal guidelines on how to apply the grounds for accelerated procedure as described in the national law have been developed **and** are systematically applied.

No. Internal guidelines on how to apply the grounds for accelerated procedure as described in the national law have not been developed **or** they have been developed but they are not systematically applied.

Partially. Internal guidelines on how to apply the grounds for accelerated procedure have been developed and they are systematically applied, **but** not for all the grounds that are described in the national law.

N/A. No accelerated procedure is in place **or** it is not necessary to develop internal guidelines because there are other sources that provide guidelines on how to apply the grounds that are described in the national law.

Indicator 54.3: The Member State does not apply or ceases to apply the accelerated procedure when it cannot provide adequate support to applicants in need of special procedural guarantees.

Data collection

Guidance for assessment

Review if the authority provides adequate support to applicants in need of special procedural guarantees and what kind of support is provided.

Rating system

Yes. The accelerated procedure is systematically not applied or ceases to apply to applicants in need of special procedural guarantees when adequate support cannot be provided.





Review if the accelerated procedure is not applied or ceases to apply to applicants in need of special procedural guarantees when adequate support cannot be provided.

Tools

Consult guidance documents (such as law, guidelines or SOPs) to check if the accelerated procedure is not applied or ceases to apply to applicants in need of special procedural guarantees when adequate support cannot be provided.

Review a sample of the cases that were examined under the accelerated procedure and check if adequate support was provided to applicants in need of special procedural guarantees.

Survey personnel who are responsible for channelling cases to the accelerated procedure on how they deal with cases of applicants in need of special procedural guarantees and the adequate support that is provided.

Survey staff who examine the cases under the accelerated procedure (case officers) on how they deal with cases of applicants in need of special procedural guarantees and the adequate support that is provided.

No. The accelerated procedure is systematically applied or does not cease to apply to applicants in need of special procedural guarantees when adequate support cannot be provided either because such provision does not exist or there is relevant provision but, in practice, applicants in need of special procedural guarantees are examined under the accelerated procedure without adequate support.

Partially. This is not an option for this indicator.

N/A. There is no accelerated procedure for applicants in need of special procedural guarantees.

STANDARD 55: Where the Member State has established accelerated procedures for unaccompanied children within its national asylum legislation, a work process and guidance are in place to enable the respect of the best interest of the child under these conditions.

Indicator 55.1: The Member State has established a screening mechanism to identify unaccompanied children within the accelerated procedures.

Data collection

Guidance for assessment

Review if a screening mechanism to identify unaccompanied children within the accelerated procedure has been established.

Rating system

Yes. A screening mechanism to systematically identify unaccompanied children within the accelerated procedure has been established.





Tools

Consult guidance documents (guidelines, SOPs) that explain and describe the screening mechanism to identify unaccompanied children within the accelerated procedure.

Review a sample of the case files of unaccompanied children who were examined under the accelerated procedure to check if the screening mechanism was applied.

Survey personnel who are responsible for implementing the mechanism and deciding on the channelling of cases of unaccompanied minors to the accelerated procedure on the implementation of the mechanism.

No. A screening mechanism to identify unaccompanied children within the accelerated procedure has not been established **or** a screening mechanism to identify unaccompanied children within the accelerated procedure has been established **but** it is not systematically implemented.

Partially. This is not an option for this indicator.

N/A. No accelerated procedure **or** no accelerated procedure for unaccompanied minors is in place.

Indicator 55.2: Where necessary, the Member State has developed specific internal guidelines on how to apply each ground for accelerating the procedure to an unaccompanied child.

Data collection

Guidance for assessment

Review if internal guidelines on how to apply each ground for the accelerated procedure to an unaccompanied child have been developed. These guidelines might not be necessary if there is relevant legislation or other legal documents (e.g. decrees, circulars) that detail how to apply each ground for accelerated procedure to an unaccompanied minor.

Tools

Consult the guidelines that have been developed on how to apply each ground for the accelerated procedure to an unaccompanied minor.

Review a sample of the case files of unaccompanied children who were examined under the accelerated procedure and check if the guidelines were applied.

Rating system

Yes. Specific internal guidelines on how to apply each ground for accelerating the procedure to an unaccompanied child have been developed and are systematically applied.

No. Specific internal guidelines on how to apply each ground for accelerating the procedure to an unaccompanied child have not been developed **or** they have been developed but are not systematically applied.

Partially. Specific internal guidelines on how to apply each ground for accelerating the procedure to an unaccompanied child have been developed **but** they do not cover all the grounds.





Survey personnel who are responsible for applying the guidelines (case officers) on how to apply each ground for accelerating the procedure to an unaccompanied child on the implementation of the guidelines.

N/A. No accelerated procedure **or** no accelerated procedure for unaccompanied children is in place.

Indicator 55.3: A control mechanism is established to ensure that accelerated procedures are not applied to unaccompanied children where adequate support to meet the special needs cannot be provided in the framework of accelerated procedures.

Data collection

Guidance for assessment

Review if the authority provides adequate support to unaccompanied children and what type of support is offered.

Review if a control mechanism to ensure that accelerated procedures are not applied to unaccompanied children where adequate support to meet special needs cannot be provided in the framework of accelerated procedures has been established.

Tools

Consult guidance documents (guidelines, SOPs) that explain and describe the control mechanism to ensure that accelerated procedures are not applied to unaccompanied children where adequate support to meet the special needs cannot be provided in the framework of accelerated procedures.

Review a sample of the case files of unaccompanied children who were examined under the accelerated procedure and check if adequate support to meet special needs was provided.

Survey personnel who are responsible for implementing the mechanism and deciding on the channelling of cases of unaccompanied minors to the accelerated procedure on the implementation of the mechanism.

Rating system

Yes. A control mechanism to systematically ensure that accelerated procedures are not applied to unaccompanied children where adequate support to meet the special needs cannot be provided in the framework of accelerated procedures has been established.

No. A control mechanism to ensure that accelerated procedures are not applied to unaccompanied children where adequate support to meet the special needs cannot be provided in the framework of accelerated procedures has not been established *or* has been established but is not systematically applied.

Partially. Not an option for this indicator.

N/A. No accelerated procedures or no accelerated procedure for unaccompanied children is in place.





STANDARD 56: Where the Member State has established accelerated procedures within its national asylum legislation, mechanisms are put in place to enable the respect of the time limits as defined in the national law.

Indicator 56.1: The reasonable time limits laid down by the Member State are shorter than six months, except when otherwise provided in the national law.

Data collection

Guidance for assessment

Review if time limits for the accelerated procedures are laid down in the national law and if they are shorter than 6 months.

Tool

Consult guidance documents (law, guidelines or SOPs) where the time limits are laid down.

Rating system

Yes. The time limits laid down by the Member State are up to 6 months

No. No time limits are laid down by the Member State.

Partially. This is not an option for this indicator.

N/A. National law provides for time limits in excess of 6 months **or** no accelerated procedures have been established.

Indicator 56.2: The Member State keeps track of and monitors the lead times in the accelerated procedures.

Data collection

Guidance for assessment

Review if there is a system that keeps track of and monitors lead times in the accelerated procedures.

Tools

Consult the source (guidelines, SOPs) that describes the system that keeps track of and monitors lead times in the accelerated procedures.

Review a sample of cases that were examined under the accelerated procedure to check if lead times were recorded.

Survey personnel who are responsible for keeping track of and monitoring lead times in the accelerated procedures on the way the keep tack and monitor lead times.

Rating system

Yes. There is a system that systematically keeps track of and monitors lead times in the accelerated procedures.

No. There is no system that keeps track of and monitors lead times in the accelerated procedures **or** there is a system but lead times are not systematically tracked.

Partially. This is not an option for this indicator. **N/A.** No accelerated procedures are in place.





STANDARD 57: Where the Member State has established admissibility procedures within its national asylum legislation, a work process is in place to enable the grounds for deciding that an application is inadmissible.

Indicator 57.1: The Member State has established a screening mechanism to identify the relevant cases.

Data collection

Guidance for assessment

Review if a screening mechanism to identify relevant cases has been established. The mechanism will support the identification of cases that can be examined under the admissibility procedures in accordance with the national legislation.

Identify who is responsible for implementing this mechanism and deciding which cases should be channelled to the admissibility procedures.

Tools

Consult the screening mechanism used to identify relevant cases or the guidance document (such as guidelines or SOPs) that explains and describes the mechanism.

Review a sample of the cases that were examined under admissibility procedures to check if the screening mechanism was applied.

Survey personnel who are responsible for implementing the mechanism and deciding on the channelling of cases to admissibility procedures on the implementation of the mechanism.

Rating system

Yes. A screening mechanism to systematically identify cases that are to be examined under the admissibility procedures has been established.

No. There is no screening mechanism to identify cases that are to be examined under the admissibility procedures **or** there is a screening mechanism but relevant cases are not systematically identified.

Partially. This is not an option for this indicator.

N/A. No admissibility procedure is in place.

Indicator 57.2: The Member State has developed the necessary internal guidelines on how to apply the grounds that are defined in the national law.

Data collection

Guidance for assessment

Review if internal guidelines have been developed on how to apply the grounds for the admissibility procedures that are defined in the national law. These guidelines might not be

Rating system

Yes. Internal guidelines on how to apply the grounds for admissibility procedures as defined





necessary if relevant legislation or other legal documents (e.g. decrees, circulars) provide details on how to apply the grounds for admissibility procedures that are defined in the law.

Tools

Consult the guidelines that have been developed on how to apply the grounds for admissibility procedures that are defined in the national law.

Review a sample of the cases that were examined under admissibility procedures to check if the guidelines were applied.

Survey staff who apply the guidelines (case officers) on the grounds for admissibility on the implementation of the guidelines.

in the national law have been developed **and** are systematically applied.

No. Internal guidelines on how to apply the grounds for admissibility procedures as defined in the national law have not been developed *or* they have been developed **but** they are not systematically applied.

Partially. Internal guidelines on how to apply the grounds for admissibility procedures have been developed and they are systematically applied, but not for all the grounds that are defined in the national law.

N/A. No admissibility procedures are in place **or** it is not necessary to develop internal guidelines because other sources provide guidelines on how to apply the grounds that are defined in the national law.

Indicator 57.3: A work process has been established to verify if another Member State has already granted international protection.

Data collection

Guidance for assessment

Review if a work process has been established to verify if another Member State has already granted international protection.

Rating system

Yes. A work process to verify if another Member State has already granted international protection has been established **and** is systematically applied.

No. A work process to systematically verify if another Member State has already granted international protection has not been





Tools

Consult guidance documents (such as guidelines or SOPs) that describe the work process that has been established to verify if another Member State has already granted international protection.

Survey personnel who are responsible for applying the work process to verify if another Member State has already granted international protection on the implementation of the work process.

established **or** has been established but is not systematically applied.

Partially. This is not an option for this indicator.

N/A. No admissibility procedures are in place.





STANDARD 58: Provisions are made to allow the applicants to present their views regarding the admissibility grounds.

Indicator 58.1: The applicant is informed of the fact that the application is examined under the admissibility procedure and on which grounds.

Data collection

Guidance for assessment

Review if applicants are informed of the fact that their application is being examined under the admissibility procedure, and on which grounds. The grounds are those that are laid out in the legislation.

Tools

Consult the information that applicants receive regarding the examination of their application under the admissibility procedure and the source of this information (lodging form if this information is provided during the lodging stage, or interview template if this information is provided during the personal interview, or any other source of information).

Review a sample of cases that were examined under the admissibility procedure and check if and how the information was provided.

Directly observe the information to applicants when their case is examined under the admissibility procedure on the kind of the information that is being provided.

Survey personnel who are responsible for providing the information that the applicant is examined under the admissibility procedure; registration officers, case officers or other staff, on the information that is provided.

Rating system

Yes. Applicants are systematically informed of the fact that their application is being examined under the admissibility procedure, **and** on which grounds.

No. Applicants are not systematically informed of the fact that their application is being examined under the admissibility procedure.

Partially. Not an option for this indicator

N/A. No admissibility procedure is in place.





Indicator 58.2: A personal interview is organised during which specific questions on the inadmissibility criteria are asked to the applicant, taking into account the specific exceptions for subsequent applications.

Data collection

Guidance for assessment

Review if a personal interview is organised and during this interview the applicant is asked specific questions on the inadmissibility criteria. Subsequent applications may be exempted from interview, and the case examined instead solely on the basis of a written submission.

Tools

Consult the interview template to check the specific questions on the inadmissibility criteria that are addressed to the applicant during the personal interview.

Consult guidance documents (such as guidelines or SOPs) regarding the admissibility procedure and content of the related personal interview

Review a sample of cases that were examined under the admissibility procedure to check the specific questions on the inadmissibility criteria that were addressed to the applicant during the interview.

Shadow personnel carrying out interviews to assess admissibility to check that during the interview applicants are asked specific questions on the inadmissibility criteria.

Survey staff (case officers) who are conducting the interviews on admissibility on the questions on the admissibility during the personal interview.

Rating system

Yes. A personal interview is systematically organised and during this interview the applicant is asked specific questions on the inadmissibility criteria.

No. A personal interview during which the applicant is asked specific questions on the inadmissibility criteria is not systematically organised **or** a personal interview is systematically organised **but** the applicant is not asked specific questions on the inadmissibility criteria.

Partially. This is not an option for this indicator.

N/A. No admissibility procedure is in place.





STANDARD 59: When the personal interview on the admissibility of the application is conducted by authorities other than the determining authority, the personnel conducting the personal interview are appropriately trained for this task.

Indicator 59.1: The personnel have completed necessary basic training, in particular with respect to international human rights law, the European Union asylum acquis and interview techniques, organised by their national authority or by the EUAA.

Data collection

Guidance for assessment

Review if training plans exist regarding available training on international human rights law, the EU asylum acquis and interview techniques and if this training takes into account core parts of the European asylum curriculum developed by the EUAA.

Review if training records exist regarding the number of training sessions delivered and number of relevant staff who effectively participated in these training sessions.

Review if there is training documentation such as training modules, syllabi, overview of learning outcomes and documents related to the content, etc.

Tools

Consult the existing training material programmes (including agenda, table of contents, actual content, syllabi, learning outcomes, other handouts and supporting learning materials or publications)

Consult the training plans and records.

Consult training needs assessment reports.

Consult methods and other material related to the assessment of learning that has taken place (including quality review reports).

Survey personnel who are responsible for conducting interviews to determine the admissibility of the application on the training they have received.

Rating system

Yes. All relevant personnel of authorities other than the determining authority that conduct admissibility interviews receive an induction / basic training, which includes elements of international human rights and refugee law and the asylum *acquis* of the EU, including the personal interview method.

Partially. All relevant personnel of authorities other than the determining authority that conduct admissibility interviews receive induction training, which includes elements of international human rights and refugee law and the EU asylum acquis, including specific legal standards and case-law relevant to handling international protection claims and specialised training including the personal interview method is in place and is offered with regularity but is not entirely in line with the responsibilities and tasks of personnel or with the results of any assessment of previous learning, ongoing training needs assessment and/or quality reviews.

No. All relevant personnel of authorities other than the determining authority that conduct





admissibility interviews receive neither an induction / basic training nor specialised training.

N/A. No admissibility procedure is in place or the personal interview to determine the admissibility of the application is not conducted by authorities other than the determining authority.

STANDARD 60: When the personal interview on the admissibility of the application is conducted by authorities other than the determining authority, the Member State has developed internal guidelines on how to conduct a personal interview on the admissibility of the application.

Indicator 60.1: The interview guidelines are accessible to and applied by the relevant staff.

Data collection

Guidance for assessment

Review if there are interview guidelines accessible to and applied by the relevant staff on how to conduct a personal interview to determine the admissibility of the application, when the personal interview to determine the admissibility of the application is conducted by authorities other than the determining authority.

Tools

Consult the interview guidelines and ascertain how these guidelines are disseminated to the relevant staff.

Review a sample of cases that were examined under the admissibility procedure to check if the guidelines were applied.

Survey personnel who are responsible for developing the interview guidelines and disseminating them to the relevant staff on the way the guidelines are disseminated. **Survey** personnel who conduct the interviews to determine admissibility on the way they have access to the guidelines.

Rating system

Yes. There are interview guidelines, the staff have access to them, **and** they are systematically applied.

No. There are no interview guidelines **or** there are interview guidelines, but the staff do not have access to them **or** there are interview guidelines but they are not systematically applied.

Partially. There are interview guidelines, **but** the staff do not have easy access to them.

N/A. No admissibility procedure is in place or the personal interview to determine the admissibility of the application is not conducted by authorities other than the determining authority.





STANDARD 61: A process has been established in order to ensure that the subsequent application is examined taking into account the examination of the previous applications.

Indicator 61.1: The case officer responsible for the examination of the subsequent application has access to all the elements of the file of the previous examinations.

Data collection

Guidance for assessment

Review if the case officer who is responsible for the examination of the subsequent application has access to all the elements of the file on the previous examinations. This can include registration form(s); interview template(s); any documents(s) that was (were) submitted by the applicant or was (were) obtained by the authority; the negative decision(s); in the case of appeal, the relevant documents; and any other document(s) related to the previous examinations.

Tools

Consult guidance documents (such as guidelines or SOPs) that specify that case officers should have access to the case files and describes how they can access the files.

Review a sample of case files of subsequent applications to check if all the elements of the file on the previous examinations are included in the new file.

Survey personnel responsible for examining subsequent applications (case officers) on their access to case files.

Rating system

Yes. The case officer responsible for the examination of the subsequent application systematically has access to all the elements of the file on the previous examinations.

No. The case officer responsible for the examination of the subsequent application does not have access to all the elements of the file on the previous examinations *or* access is provided **but** the file on the new case does not systematically include all the elements of the file on the previous examinations.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.





STANDARD 62: A procedure for preliminary examination has been established.

Indicator 62.1: Internal guidelines are in place on what can be considered as new elements or findings that significantly add to the likelihood of the applicant qualifying as a beneficiary of international protection, unless already sufficiently detailed in the national law.

Data collection

Guidance for assessment

Review if it is sufficiently detailed in the law what can be considered as new elements or findings that significantly add to the likelihood of an applicant qualifying as a beneficiary of international protection in the event of a subsequent application.

Review if internal guidelines are in place on what can be considered as new elements or findings that significantly add to the likelihood of an applicant qualifying as a beneficiary of international protection in the event of a subsequent application.

Tools

Consult the internal guidelines on what can be considered as new elements or findings that significantly add to the likelihood of an applicant qualifying as a beneficiary of international protection.

Review a sample of case files on subsequent applications to check if the internal guidelines on what can be considered as new elements or findings that significantly add to the likelihood of an applicant qualifying as a beneficiary of international protection were implemented.

Survey personnel (case officers) who examine subsequent applications on the implementation of the guidelines.

Survey personnel who are responsible for developing/updating the internal guidelines on the development/ updating the guidelines

Rating system

Yes. Internal guidelines are in place on what can be considered as new elements or findings that significantly add to the likelihood of the applicant qualifying as a beneficiary of international protection and are systematically implemented.

No. Internal guidelines are not in place on what can be considered as new elements or findings that significantly add to the likelihood of an applicant qualifying as a beneficiary of international protection or internal guidelines are in place on what can be considered as new elements or findings that significantly add to the likelihood of an applicant qualifying as a beneficiary of international protection but are not systematically implemented.

Partially. This is not an option for this indicator.

N/A. It is sufficiently detailed in the law what can be considered as new elements or findings that significantly add to the likelihood of an applicant qualifying as a beneficiary of international protection.





Indicator 62.2: A personal interview is organised, unless national law permits the preliminary examination to be conducted on the sole basis of written submissions, except in the cases referred to in Article 40(6).

Data collection

Guidance for assessment

Review if the national law permits, in the case of a subsequent application, the preliminary examination to be conducted on the sole basis of written submissions.

Review if, in the case of a subsequent application, a personal interview is organised when the national law does not permit the preliminary examination to be conducted on the sole basis of written submissions.

Tools

Consult the source (law, guidelines, SOPs) that specifies that a personal interview should be organised during the preliminary examination in the case of a subsequent application.

Review a sample of case files of subsequent applications to check if a personal interview was conducted during the preliminary examination.

Survey personnel (case officers) who examine cases of subsequent applications on the organisation of personal interview.

Rating system

Yes. A personal interview is systematically organised during the preliminary examination of subsequent applications when national law does not permit the preliminary examination to be conducted on the sole basis of written submissions.

Partially. This is not an option for this indicator.

No. A personal interview is not systematically organised during the preliminary examination of subsequent applications when national law does not permit the preliminary examination to be conducted on the sole basis of written submissions.

N/A. National law permits, in the case of a subsequent application, the preliminary examination to be conducted on the sole basis of written submissions.





Indicator 62.3: The Member State informs the applicant of the outcome of the preliminary examination.

Data collection

Guidance for assessment

Review if applicants are informed of the outcome of the preliminary examination. This information can be provided in writing or orally.

Identify the way in which the information of the outcome of the preliminary examination is provided (written or orally).

Tools

Consult the guidance document (guidelines, SOPs) that describes the information that applicants receive regarding the outcome of the preliminary examination and the ways in which this information can be provided.

Consult the written information that is provided.

Directly observe the information that is provided to applicants regarding the outcome of the preliminary examination, when the information is provided orally.

Survey personnel who are responsible for providing information regarding the outcome of the preliminary examination on the information that is provided.

Rating system

Yes. Applicants are systematically informed of the outcome of the preliminary examination in a clear, non-technical way and in a language that they can understand.

No. Applicants are not systematically informed of the outcome of the preliminary examination **or** applicants are systematically informed of the outcome of the preliminary examination in a clear, non-technical way but in a language that they cannot understand.

Partially. Applicants are systematically informed of the outcome of the preliminary examination in a language that they can understand, **but** not in a clear, non-technical way.

N/A. This is not an option for this indicator.

Indicator 62.4: A work process has been established, according to which the admissible subsequent application is further examined through the relevant procedure.

Data collection

Guidance for assessment

Review if a work process has been established according to which the admissible subsequent application is further examined through the relevant procedure.

Rating system

Yes. A work process has been established according to which the admissible subsequent application is systematically further examined through the relevant procedure.





Tools

Consult guidance documents (such as guidelines or SOPs) that describe the work process according to which the admissible subsequent application is further examined through the relevant procedure.

Review a sample of case files of admissible subsequent applications to check if these cases were further examined through the relevant procedure.

Survey personnel who are responsible for applying the work process on the way the system is implemented.

No. A work process has not been established according to which the admissible subsequent application is further examined through the relevant procedure **or** a work process has been established according to which the admissible subsequent application is further examined through the relevant procedure **but** it is not systematically implemented.

Partially. This is not an option for this indicator.

N/A. This is not an option for this indicator.

STANDARD 63: Where the Member State has established restrictions to the right to remain in case of a subsequent application within its national asylum legislation, a work process is established to ensure compliance with the principle of non-refoulement.

Indicator 63.1: A screening mechanism is in place to identify the relevant cases.

Data collection

Guidance for assessment

Review if the national legislation restricts the right to remain in the event of a subsequent application.

Review if a screening mechanism is in place to identify relevant cases. The mechanism should identify subsequent applications where restrictions on the right to remain apply.

Tools

Consult guidance documents (such as guidelines or SOPs) where the mechanism used to identify relevant cases is described.

Rating system

Yes. There is a screening mechanism to systematically identify relevant cases.

No. There is no screening mechanism to identify relevant cases **or** there is a screening mechanism to identify relevant cases but it is not systematically applied.

Partially. This is not an option for this indicator.





Review a sample of case files where restrictions to the right to remain in the case of a subsequent application were imposed to check if the screening mechanism was applied.

Survey personnel who are responsible for applying the mechanism to identify relevant cases on the implementation of the mechanism.

N/A. No restrictions on the right to remain in the event of a subsequent application have been established in the national asylum legislation.

Indicator 63.2: Internal guidelines on each ground have been established.

Data collection

Guidance for assessment

Review on which grounds the national legislation restricts the right to remain in the event of a subsequent application.

Review if internal guidelines on each ground for restriction on the right to remain in the event of a subsequent application have been established.

Tools

Consult the internal guidelines on each ground for restriction on the right to remain in the case of a subsequent application.

Review a sample of case files of subsequent applications where restrictions to the right to remain were applied to check if the internal guidelines on the ground for the restriction were implemented.

Survey personnel who are responsible for applying the guidelines on each ground for restriction on the right to remain in the event of a subsequent application on the implementation of the guidelines.

Rating system

Yes. Internal guidelines on each ground for restriction on the right to remain in the event of a subsequent application have been established and are systematically implemented.

No. Internal guidelines on each ground for restriction on the right to remain in the event of a subsequent application have not been established **or** internal guidelines on each ground for restriction on the right to remain in the event of a subsequent application have been established but are not systematically implemented.

Partially. This is not an option for this indicator.

N/A. No restrictions on the right to remain in the event of a subsequent application within the national asylum legislation have been established.





Indicator 63.3: Measures have been put in place to ensure that the principle of non-refoulement is respected.

Data collection

Guidance for assessment

Review the measures that have been put place to ensure that the principle of *non-refoulement* is respected if restrictions on the right to remain in the event of a subsequent application have been established in the national asylum legislation.

Tools

Consult guidance documents (such as law, guidelines, SOPs) that describe the measures to ensure that the principle of *non-refoulement* is respected.

Review a sample of case files of subsequent applications where restrictions on the right to remain were applied to check if measures were put in place to ensure that the principle of *non-refoulement* was respected.

Survey personnel who are responsible for developing the measures that ensure that the principle of *non-refoulement* is respected on the development of the measures.

Survey personnel who are responsible for implementing the measures that ensure that the principle of *non-refoulement* is respected on the implementation of the measures.

Rating system

Yes. Measures have been put in place to ensure that the principle of *non-refoulement* is respected if restrictions on the right to remain in the event of a subsequent application have been established in the national asylum legislation **and** are systematically applied.

No. Measures have not been put in place to ensure that the principle of *non-refoulement* is respected if restrictions on the right to remain in the case of a subsequent application have been established in the national asylum legislation **or** measures have been put in place to ensure that the principle of *non-refoulement* is respected, **but** they are not systematically applied.

Partially. This is not an option for this indicator.

N/A. No restrictions on the right to remain in the case of a subsequent application have been established in the national asylum legislation.





STANDARD 64: Where the Member State has established border procedures within its national asylum legislation, a work process has been established to enable the proper grounds for applying the border procedure.

Indicator 64.1: A screening mechanism to identify the relevant cases has been established.

Data collection

Guidance for assessment

Review if a screening mechanism has been established to identify relevant cases. The mechanism will support the identification of cases that can be examined under the border procedure in accordance with the national legislation.

Identify who is responsible for implementing this mechanism and deciding which cases should be channelled to the border procedure.

Tools

Consult the screening mechanism to identify relevant cases or the guidance document (such as guidelines or SOPs) that describes the screening mechanism.

Review a sample of case files that were examined under the border procedure and **check** if the screening mechanism was applied.

Survey personnel who are responsible for implementing the screening mechanism and deciding which cases to channel to the border procedures on the implementation of the mechanism.

Rating system

Yes. A screening mechanism to systematically identify cases that are examined under the border procedure has been established.

No. There is no screening mechanism to identify cases that can be examined under the border procedure **or** there is a screening mechanism **but** relevant cases are not systematically identified.

Partially. This is not an option for this indicator.

N/A. No border procedure is in place.

Indicator 64.2: The Member State does not apply or ceases to apply the border procedure when it cannot provide adequate support to applicants in need of special procedural guarantees.

Data collection

Guidance for assessment

Rating system

Yes. The border procedure is systematically not applied or ceases to apply to applicants in need





Review if the border procedure is not applied or ceases to apply to applicants in need of special procedural guarantees when adequate support cannot be provided.

Tools

Consult guidance documents (law, guidelines, SOPs) that state that the border procedure is not applied or ceases to apply to applicants in need of special procedural guarantees when adequate support cannot be provided.

Review a sample of cases that were examined under the border procedure and **check** if adequate support was provided to applicants in need of special procedural guarantees.

Survey personnel who are responsible for deciding which cases to channel to the border procedure on the way the decision is being made.

Survey personnel who examine the cases under the border procedure (case officers) on the examination of applicants in need of special procedural guarantees when it cannot provide adequate support to them.

of special procedural guarantees when adequate support cannot be provided.

No. The border procedure is systematically applied or does not cease to apply to applicants in need of special procedural guarantees when adequate support cannot be provided because such provision does not exist or there is relevant provision but, in practice, applicants in need of special procedural guarantees are systematically examined under the border procedure without adequate support.

Partially. This is not an option for this indicator.

N/A. No border procedure has been established **or** no border procedure has been established for applicants in need of special procedural guarantees.

STANDARD 65: Where the Member State has established border procedures for unaccompanied children within its national asylum legislation, a work process is in place to enable the respect of the best interest of the child.

Indicator 65.1: The Member State has established a screening mechanism to identify unaccompanied children within the border procedure.

Data collection

Guidance for assessment

Review if a screening mechanism has been established to identify unaccompanied children within the border procedure.

Rating system

Yes. A screening mechanism to systematically identify unaccompanied children within the border procedure has been established.





Identify who is responsible for implementing this mechanism and for identifying unaccompanied children within the border procedure.

Tools

Consult the screening mechanism used to identify unaccompanied children within the border procedure or the guidance document (such as guidelines or SOPs) that describes the screening mechanism.

Review a sample of the case files of unaccompanied children who were examined under the border procedure to check if the screening mechanism was applied.

Survey personnel who are responsible for implementing the mechanism and identifying unaccompanied children within the border procedure on the implementation of the mechanism.

No. A screening mechanism to systematically identify unaccompanied children within the border procedure has not been established **or** a screening mechanism to systematically identify unaccompanied children within the border procedure has been established **but** is not systematically applied.

Partially. This is not an option for this indicator.

N/A. No border procedures have been established **or** no border procedure for unaccompanied children have been established.

Indicator 65.2: Where necessary, the Member State has developed specific internal guidelines on how to apply each relevant ground of Article 25(6)(b) APD to unaccompanied children.

Data collection

Guidance for assessment

Review if internal guidelines have been developed on how to apply each ground for the border procedure to unaccompanied children. These guidelines might not be necessary if relevant legislation or other legal documents (e.g. decrees, circulars) provide the details on how to apply each ground for the border procedure to unaccompanied children.

Tools

Consult the guidelines that have been developed on how to apply each ground for border procedure to unaccompanied children.

Review a sample of the case files of unaccompanied children who were examined under the border procedure to check if the guidelines were applied.

Rating system

Yes. Specific internal guidelines on how to apply each ground for border procedure to unaccompanied children have been developed **and** are systematically applied.

No. Specific internal guidelines on how to apply each ground for the border procedure to unaccompanied children have not been developed **or** they have been developed but are not systematically applied.

Partially. Specific internal guidelines on how to apply the grounds for border procedure to





Survey personnel who developed the guidelines on the content of the guidance.

Survey personnel who are responsible for applying the guidelines (case officers) on the way of implementation.

unaccompanied children have been developed **but** they do not cover all grounds.

N/A. No border procedure has been established **or** no border procedure for unaccompanied children has been established **or** there is a relevant legislation or other legal documents (e.g. decrees, circulars) providing the details on how to apply each ground for the border procedure to unaccompanied children.

Indicator 65.3: A control mechanism is established to ensure that border procedures are not applied to children where adequate support to meet their special needs cannot be provided in the framework of border procedures.

Data collection

Guidance for assessment

Review if a control mechanism has been established to ensure that border procedures are not applied to children where adequate support to meet their special needs cannot be provided in the framework of border procedures.

Tools

Consult guidance documents (guidelines, SOPs) that describe the control mechanism to ensure that border procedures are not applied to children where adequate support to meet their special needs cannot be provided in the framework of border procedures.

Review a sample of the case files of children who were examined under the border procedure and **check** if adequate support was provided.

Survey personnel who are responsible for implementing the mechanism and deciding which cases to channel to the border procedures on the implementation of the mechanism.

Rating system

Yes. A control mechanism has been established to systematically ensure that border procedures are not applied to children where adequate support to meet their special needs cannot be provided in the framework of border procedures.

No. A control mechanism has not been established to ensure that border procedures are not applied to children where adequate support to meet their special needs cannot be provided in the framework of border procedures or a control mechanism has been established but is not systematically applied.

Partially. This is not an option for this indicator. **N/A.** No border procedures have been established **or** no border procedures for unaccompanied children are in place.





STANDARD 66: Where the Member State has established border procedures within its national asylum legislation, mechanisms are in place to enable the respect of the time limits as defined in the national law.

Indicator 66.1: The Member State has laid down reasonable time limits in their national law for border procedures.

Data collection

Guidance for assessment

Review if the national law lays down time limits for the border procedure.

Tool

Consult the law that lays down the time limits for the border procedure.

Rating system

Yes. The law lays down time limits for the border procedure.

No. The law does not lay down time limits for the border procedure.

Partially. This is not an option for this indicator.

N/A. Border procedures have not been established.

Indicator 66.2: The reasonable time limits laid down by the Member State are shorter than four weeks.

Data collection

Guidance for assessment

Review if the time limits that are laid down in the national law for the border procedure are shorter than 4 weeks.

Tool

Consult the law that lays down the time limits for the border procedure.

Rating system

Yes. The time limits for the border procedure laid down by the Member State are shorter than 4 weeks.

Partially. This is not an option for this indicator.

No. The time limits that are laid down for the border procedure are not shorter than 4 weeks.

N/A. Border procedures have not been established **or** there are no time limits for the border procedure in the national law.





Indicator 66.3: The Member State keeps track of and monitors the lead times in the border procedure.

Data collection

Guidance for assessment

Review if there is a system that keeps track of and monitors the lead times in the border procedure.

Tools

Consult guidance documents (guidelines, SOPs) that describe the system that keeps track of and monitors lead times in the border procedure.

Review a sample of cases that were examined under the border procedure to check if the lead times were recorded.

Survey personnel who are responsible for keeping track of and monitoring the lead times in the border procedure on the tracking and the monitoring.

Rating system

Yes. A system that systematically keeps track of and monitors lead times in the border procedure is in place.

No. There is no system that keeps track of and monitors lead times in the border procedure *or* there is a system but lead times are not systematically tracked.

Partially. This is not an option for this indicator.

N/A. No border procedure is in place.

Indicator 66.4: Measures are put in place to ensure that those applicants whose application was not examined within four weeks have access to the territory of the Member State concerned.

Data collection

Guidance for assessment

Review if measures are in place to ensure that those applicants whose application was not examined within 4 weeks under the border procedure have access to the territory of the country.

Tools

Consult the measures that are in place or the guidance document (such as law, guidelines, SOPs) where the measures are provided to ensure that those applicants whose application

Rating system

Yes. There are measures in place to ensure that those applicants whose applications were not examined within 4 weeks systematically have access to the territory of the country.

No. There are no measures in place to ensure that those applicants whose applications were not examined within 4 weeks have access to the territory of the country **or** there are measures in place to ensure that those applicants whose





was not examined within 4 weeks under the border procedure have access to the territory of the country.

Consult the data/records of cases that were examined under the border procedure to check if the applicants whose applications were not examined within 4 weeks had access to the territory of the country.

Survey personnel who are responsible for applying the measure that ensures that those applicants whose applications were not examined within 4 weeks under the border procedure had access to the territory of the country on the implementation of the measures.

applications were not examined within 4 weeks have access to the territory of country **but** they are not systematically applied.

Partially. This is not an option for this indicator.

N/A. Border procedures have not been established.

STANDARD 67: Where the Member State applies prioritisation of examinations, work processes are established to ensure that relevant cases are identified and processed within the relevant procedure.

Indicator 67.1: The Member State has established a screening mechanism to identify the relevant cases.

Data collection

Guidance for assessment

Review if a screening mechanism has been established to identify cases that can be prioritised.

Identify who is responsible for implementing this mechanism and identifying cases that can be prioritised.

Tools

Consult the screening mechanism to identify cases that can be prioritised or the source (guidelines, SOPs) that describes the screening mechanism.

Review a sample of cases that were prioritised to check if the screening mechanism was applied to identify relevant cases.

Rating system

Yes. A screening mechanism to systematically identify cases that can be prioritised has been established.

No. A screening mechanism to identify cases that can be prioritised has not been established **or** a screening mechanism to identify cases that can be prioritised has been established **but** it is not systematically applied.

Partially. This is not an option for this indicator.

N/A. No prioritisation of examinations is applied.





Survey personnel who are responsible for implementing the mechanism and identifying cases that can be prioritised on the implementation of the mechanism.

Indicator 67.2: The Member State has developed the necessary internal guidelines on how prioritisation is applied within the procedure.

Data collection

Guidance for assessment

Review if internal guidelines on how prioritisation is applied have been developed. These guidelines can be related to the kinds and the characteristics of cases that can be prioritised, such as the profile of the applicant and their country of origin.

Tools

Consult the internal guidelines that have been developed on how prioritisation is applied. **Review** a sample of cases that were prioritised and **check** if the internal guidelines were applied.

Survey personnel who are responsible for applying the internal guidelines on the implementation of the guidelines.

Rating system

Yes. Internal guidelines on how prioritisation is applied have been developed and are systematically applied.

No. Internal guidelines on how prioritisation is applied have not been developed *or* have been developed but are not systematically applied.

Partially. This is not an option for this indicator.

N/A. No prioritisation is applied.

Indicator 67.3: The Member State keeps track of and monitors the lead times in the prioritised applications.

Data collection

Guidance for assessment

Review if there is a system that keeps track of and monitors lead times in prioritised applications.

Tools

Consult the source (guidelines, SOPs) that describes the system that keeps track of and monitors prioritised applications.

Review a sample of the cases that were prioritised to check if the lead times were recorded. **Survey** personnel who are responsible for keeping track of and monitoring lead times in prioritised applications on tracking and monitoring the lead times.

Rating system

Yes. There is a system that systematically keeps track of and monitors lead times in prioritised applications.

No. There is no system that keeps track of and monitors lead times in prioritised applications **or** there is a system but lead times are not systematically tracked and monitored.

Partially. This is not an option for this indicator. **N/A.** No prioritisation of applications is applied.





Withdrawal of international protection

STANDARD 68: A work process is established to identify new elements or findings that may indicate the need to reconsider the validity of the international protection that was granted.

Indicator 68.1: The determining authority has established a cooperation mechanism with other relevant national administrations and/or other Member States in order to ensure the collection of relevant new elements or findings that may indicate there are reasons to reconsider the validity of the international protection that was granted.

Data collection

Guidance for assessment

Review if a cooperation mechanism has been established with other relevant national administrations and/or other Member States in order to ensure the collection of relevant new elements or findings that may indicate that there are reasons to reconsider the validity of the international protection that was granted.

Identify who is responsible for implementing this mechanism.

Tools

Consult guidance documents (such as guidelines or SOPs) where the cooperation mechanism is described.

Review a sample of case files where the protection has been withdrawn and check if the cooperation mechanism was applied.

Interview personnel who are responsible for applying this mechanism on the implementation of the mechanism.

Rating system

Yes. A cooperation mechanism has been established with other relevant national administrations and/or other Member States in order to ensure the collection of relevant new elements or findings that may indicate that there are reasons to reconsider the validity of the international protection that was granted and this mechanism is systematically applied.

No. A cooperation mechanism has not been established with other relevant national administrations and/or other Member States in order to ensure the collection of relevant new elements or findings that may indicate that there are reasons to reconsider the validity of the international protection that was granted or such a mechanism has been established but is not systematically applied.

Partially. This is not an option for this indicator.





Indicator 68.2: Work processes are in place to ensure that precise, up-to-date and relevant COI that is related to the countries of origin of the persons concerned and obtained from various sources are available to the relevant case officers. This is in order to identify new elements or findings that may indicate that there are reasons to reconsider the validity of the international protection that was granted.

Data collection

Guidance for assessment

Review if work processes are in place to ensure the availability of precise, up-to-date and relevant COI that is related to the countries of origin of the persons concerned and obtained from various sources. Identify the staff (case officers) who are responsible for reconsidering the validity of the international protection that was granted.

Identify the staff who are responsible for sharing the COI with the case officers.

Tools

Consult guidance documents (guidelines, SOPs) that describes these work processes.

Review the ways in which the relevant COI is made available to the case officers.

Review a sample of case files where protection was withdrawn and check if precise, up-to-date and relevant COI was used.

Survey personnel who are responsible for searching for precise, up-to-date and relevant COI that is related to the countries of origin of the persons concerned on the research and collection of the information.

Survey staff (case officers) who are responsible for reconsidering the validity of the international protection that was granted about the work processes regarding the availability of relevant COI on the reconsideration of the validity.

Survey personnel who are responsible for sharing the COI with the relevant case officers on the ways the COI is being shared.

Rating system

Yes. Work processes are in place to ensure that precise, up-to-date and relevant COI that is related to the countries of origin of the persons concerned and obtained from various sources is systematically available to the relevant case officers.

No. Work processes are not in place to ensure that precise, up-to-date and relevant COI that is related to the countries of origin of the persons concerned and obtained from various sources is available to the relevant case officers **or** they are in place **but** the COI is not systematically available to the case officers.

Partially. This is not an option for this indicator.





Indicator 68.3: The Member State has established a mechanism to assess whether the new elements or findings are sufficient to start the process for reconsidering the validity of the international protection that was granted.

Data collection

Guidance for assessment

Review if a mechanism has been established to assess whether the new elements or findings are sufficient to start the process for reconsidering the validity of the international protection that was granted.

Identify who is responsible for implementing this mechanism.

Tools

Consult guidance documents (guidelines, SOPs) that describes the mechanism used to assess whether the new elements or findings are sufficient to start the process for reconsidering the validity of the international protection that was granted.

Consult a sample of case files where the protection has been withdrawn and check if the mechanism was applied.

Survey staff who are responsible for applying this mechanism and assessing whether the new elements or findings are sufficient to start the process for reconsidering the validity of the international protection that was granted on the implementation and the assessment.

Rating system

Yes. A mechanism has been established to assess whether the new elements or findings are sufficient to start the process for reconsidering the validity of the international protection that was granted **and** is systematically applied.

Partially. This is not an option for this indicator.

No. A mechanism has not been established to assess whether the new elements or findings are sufficient to start the process for reconsidering the validity of the international protection that was granted **or** a mechanism has been established **but** is not systematically applied.





STANDARD 69: A work process is established to enable the respect of the conditions for withdrawing international protection.

Indicator 69.1: The determining authority has developed, where necessary, internal guidelines on how to apply the conditions under which international protection can be withdrawn, as described in the QD, with specific attention to the general principle of confidentiality within the asylum procedure.

Data collection

Guidance for assessment

Review if internal guidelines have been developed on how to apply the conditions under which international protection can be withdrawn. The conditions for refugee status are described in Article 14 of the qualification directive (Council Directive 2004/83/EC of 29 April 2004 on minimum standards for the qualification and status of third country nationals or stateless persons as refugees or as persons who otherwise need international protection and the content of the protection granted) (QD) and those for subsidiary protection are described in Article 19 QD. These guidelines might not be necessary if relevant legislation or other legal documents (e.g. decrees, circulars) provide details on how to apply the conditions under which international protection can be withdrawn.

Tools

Consult the guidelines that have been developed on how to apply the conditions under which international protection can be withdrawn.

Review a sample of case files where the international protection was withdrawn to check if the internal guidelines were applied.

Survey staff who are responsible for applying the guidelines (case officers) on the implementation of the guidelines.

Rating system

Yes. Internal guidelines on how to apply the conditions under which international protection can be withdrawn have been developed **and** are systematically applied.

No. Internal guidelines on how to apply the conditions under which international protection can be withdrawn have not been developed **or** they have been developed **but** are not systematically applied.

Partially. This is not an option for this indicator.

N/A. There is relevant legislation or other legal documents (e.g. decrees, circulars) providing details on how to apply the conditions under which international protection can be withdrawn





STANDARD 70: Provisions are in place to allow applicants to present their views regarding reconsideration of the validity of their international protection.

Indicator 70.1: The applicant is informed in writing of the fact that the validity of their international protection is being reconsidered, and upon which new elements or findings such a reconsideration is based.

Data collection

Guidance for assessment

Review if applicants are informed in writing of the fact that the validity of their international protection is being reconsidered, and upon which new elements or findings such a reconsideration is based.

Tools

Consult the information that the applicant receives regarding the reconsideration of the validity of their international protection and the way that this information is provided to the applicant.

Review a sample of case files where the validity of their international protection was reconsidered to check if and how the information was provided.

Survey staff who are responsible for providing the information on the reconsideration to the applicant on the provision of the information.

Rating system

Yes. Applicants are systematically informed in writing of the fact that the validity of their international protection is being reconsidered, and upon which new elements or findings such a reconsideration is based, in a clear, non-technical way and in a language that they understand.

No. Applicants are not systematically informed in writing of the fact that the validity of their international protection is being reconsidered, and upon which new elements or findings such a reconsideration is based, **or** applicants are informed **but** in a language that they cannot understand.

Partially. Applicants are systematically informed in writing of the fact that the validity of their international protection is being reconsidered, and upon which new elements or findings such a reconsideration is based, in a language that they understand **but** not in a clear, non-technical way.





Indicator 70.2a: A personal interview is organised during which the beneficiary of international protection is asked specific questions on the new elements or findings.

Or

Indicator 70.2b: The beneficiary of international protection is allowed to submit statements in writing as to the reasons why their international protection status should not be withdrawn. These statements must be taken into account by the examining authority.

Data collection

Guidance for assessment

Review if there is a process, through either a personal interview or submission of written statements, that enables beneficiaries to present their opinion regarding the new elements or findings that may lead to their international protection being withdrawn.

Tools

Consult the source (law, SOPs, guidelines) that describes the process that beneficiaries follow to present their opinion regarding the new elements or findings that may lead to international protection being withdrawn.

Review a sample of case files where the validity of international protection was reconsidered to check if the beneficiaries presented their opinions regarding the new elements or findings that led to the validity of their international protection being reconsidered.

Survey staff (case officers) who are responsible for reconsidering the validity of international protection on the reconsideration of the validity.

Rating system

Yes. In the case of reconsideration of the validity of international protection, beneficiaries systematically present their opinions regarding the new elements or findings that may lead to international protection being withdrawn, either through an interview or through the submission of written statements.

No. In the case of reconsideration of the validity of international protection, beneficiaries do not systematically present their opinions regarding the new elements or findings that may lead to their international protection being withdrawn, either through an interview or through the submission of written statements.

Partially. This is not an option for this indicator.





