



Practical guide on the welfare of asylum and reception staff

Part I: Standards and policy

EASO Practical Guides Series

September 2021



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ABOUT THE GUIDE

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

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

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

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

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

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

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

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ABBREVIATIONS

| | |
|----------------------|---|
| EASO | European Asylum Support Office |
| EU | European Union |
| EU-OSHA | European Agency for Safety and Health at Work |
| EU+ countries | Member States of the European Union and associated countries |
| HR | human resources |
| QD (recast) | Directive 2011/95/EU of the European Parliament and of the Council of 13 December 2011 on standards for the qualification of third-country nationals or stateless persons as beneficiaries of international protection, for a uniform status for refugees or for persons eligible for subsidiary protection, and for the content of the protection granted (recast) |
| Member State | Member State of the European Union |
| SOP | standard operating procedure |
| SWS | staff welfare standard |
| TFEU | Treaty on the Functioning of the European Union |

BACKGROUND

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

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

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

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

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

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

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

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



1. INTRODUCTION

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

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

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



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

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

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

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

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

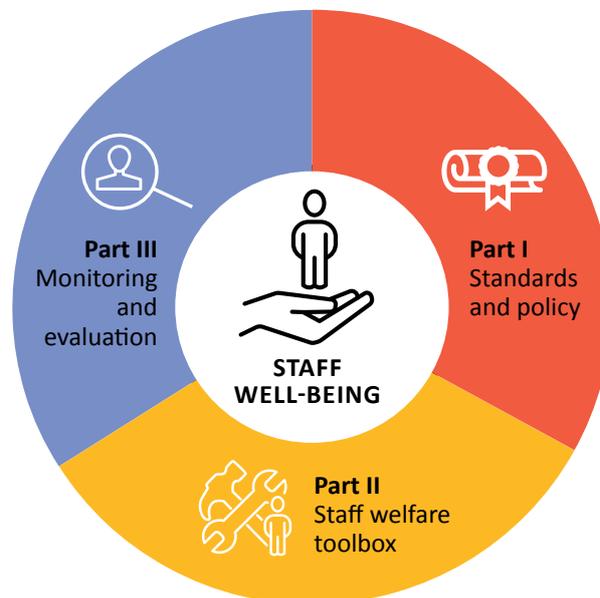
(5) Mezomo, D. S. and de Oliveira, T. S., 'Stress prevention and management program for public security professionals', in Rossi, A. M., Meurs, J. A. and Perrewé P. L. (eds), *Stress and Quality of Working Life – Interpersonal and occupation-based stress*, Information Age Publishing Inc., Charlotte,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

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

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

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

FIGURE 1. Holistic approach to staff welfare



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

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

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

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

1.1. WHY IS A FOCUS ON STAFF WELFARE IMPORTANT?

In 2017, the European Commission adopted an important communication on health and safety at work ⁽⁸⁾, which highlighted the importance of preventing psychosocial risks and musculoskeletal disorders. European workers report these two issues as the main causes of work-related ill health. A practical guide ⁽⁹⁾ published by EU-OSHA in 2017 details and addresses these two issues ⁽¹⁰⁾.

In the context of asylum and reception, hygiene, violent incidents in reception facilities, emotionally demanding interview situations and lack of resources are potential factors that affect the personal well-being of staff. As the findings of the EASO staff welfare mapping exercise indicate, when employees, who are generally committed to their work, feel they are not supported, safe and cared for, short- and longer-term health and mental health concerns can emerge.



‘As health is not merely the absence of disease or infirmity but a positive state of complete physical, mental and social well-being (WHO, 1986), a healthy working environment is one in which there is not only an absence of harmful conditions but an abundance of health-promoting ones.’⁽⁷⁾

(7) World Health Organization, ‘Work, Organization and Stress’, 2004.

(8) Commission communication, *Safer and healthier work for all – Modernisation of the EU occupational safety and health legislation and policy*, COM(2017) 12 final.

(9) Refer to EU-OSHA, *E-Guide to Managing Stress and Psychosocial Risks*, 2021.

(10) EU-OSHA, *Healthy Workers, Thriving Companies – A practical guide to well-being at work: Tackling psychosocial risks and musculoskeletal disorders in small businesses*, 2017.

A lack of motivation to work, feeling physically unwell (potentially leading to an increase in sick leave), high turnover of staff, burnout ⁽¹¹⁾ and resignations come with a price. These factors have an impact on the functioning of the authority to fulfil its objectives and targets.

1.2. MAIN TARGET GROUPS AND HOW TO USE THIS PRACTICAL GUIDE

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

- senior and middle managers,
- team leaders,
- coordinators working in the field of asylum and reception.

Part I concerns those responsible for designing and enforcing policy at the level of the organisation/authority but also those managing and coordinating a team of first-line officers in regular contact with applicants for international protection.

The **target group of Part I** is encouraged to also use the other two parts to complement efforts, since they are interlinked and meant to function as a practical set of tools to:

- formulate and roll out a **staff welfare policy** (Part I) by using agreed-upon standards;
- find an effective and **appropriate response** that is detailed in a clearly formulated staff welfare action plan and tailored to a particular situation (Part II);
- **evaluate progress** made on staff welfare by using relevant tools linked to the standards set and activities proposed in the staff welfare action plan (Part III).

When senior management sees a need to invest in staff welfare and the well-being of staff and makes a commitment to keep employees safe and sound, the impact will benefit first-line officers.

Furthermore, managers also face challenging situations that could adversely affect their health and therefore they need to be provided with coping strategies. Leadership skills and professional development are crucial elements promoting a healthy and dynamic work environment ⁽¹²⁾. Staff in organisations are affected by the behaviour and decisions of management. However, managers can suffer from a lack of self-awareness regarding their own stress levels and behaviours resulting from this stress ⁽¹³⁾. It is for this reason that the guide refers to strategies and offers leadership-focused measures. Staff working

(11) Refer to [Annex 1 'Definitions'](#) for definitions used throughout the guidance.

(12) Maellaro, R. and Whittington, J. L., 'Management development for well-being and survival: developing the whole person', in Cooper, C., Campbell Quick, J. and Schabracq, M. J. (eds), *International Handbook of Work and Health Psychology*, 3rd edition, Wiley-Blackwell, Chichester, 2009, p. 298.

(13) Kets de Vries, M., Guillén Ramo, L. and Korotov, K., 'Organisational culture, leadership, change and stress', in Cooper, C., Campbell Quick, J. and Schabracq, M. J. (eds), *International Handbook of Work and Health Psychology*, 3rd edition, Wiley-Blackwell, Chichester, 2009, p. 415.

in HR and health management, safety and security officers, and trainers within an authority are also addressed to some extent by this guidance. This is because these departments are responsible for executing some of the proposed measures.

The standards and policy proposed are based on good practices shared by participants in the EASO mapping exercise and are combined with input received by experts from EU+ countries, who supported the development of this guide. The interventions and good practices listed are examples rather than exhaustive.

1.3. LEGAL FRAMEWORK

1.3.1. GENERAL PRINCIPLES

In the EU ⁽¹⁴⁾, employers are required, as part of their statutory ‘duty of care’, to adequately provide for the health and safety of their employees. Occupational healthcare aims not only to keep employees healthy but also to bring about improvements in health protection in the workplace. By means of occupational healthcare, an employer can demonstrate that they are meeting their ‘duty of care’ responsibilities, provided that the healthcare is provided by qualified specialists under quality-controlled conditions and the results are appropriately documented.

In order to fulfil the obligation of their ‘duty of care’, employers and managers should be aware of the legal framework. Responding to needs should not be reactive. Instead, an employer can show commitment and duty of care first and foremost by ensuring preventative measures are in place, as laid down in Article 6 of the occupational health and safety framework directive ⁽¹⁵⁾:

The employer shall implement the measures referred to in the first subparagraph of paragraph 1 on the basis of the following general principles of prevention:

- *avoiding risks;*
- *evaluating the risks which cannot be avoided;*
- *combating the risks at source.*

When it comes to labour legislation and safety, there are pieces of legislation at national level, as well as some common EU frameworks. This part of the guide focuses on the latter, providing a brief overview of the most important legislation and describing the notion of the duty of care.

(14) Article 5, [Council Directive of 12 June 1989](#) on the introduction of measures to encourage improvements in the safety and health of workers at work (89/391/EEC), OJ L 183, 29.6.1989, p. 1: ‘The employer shall have a duty to ensure the safety and health of workers in every aspect related to the work.’

(15) [Council Directive of 12 June 1989](#) on the introduction of measures to encourage improvements in the safety and health of workers at work (89/391/EEC), OJ L 183, 29.6.1989.

EU labour legislation consists of primary and secondary law, which complements national legislation in this field. It aims for the improvement and harmonisation of living and working conditions of employees and has evolved over time. One of the founding treaties of the EU, the treaty establishing the European Economic Community ⁽¹⁶⁾, included articles referring to labour equality, which were followed by social agreements in the Treaty of Amsterdam ⁽¹⁷⁾. The EU legal framework on labour legislation provides a common ground for directives and other related documents paying particular attention to these topics ⁽¹⁸⁾. Enactment of EU law at national level is enforced by incorporating it into the national legislation of the Member State.

1.3.2. CURRENT LEGISLATION

The main legal act is the Treaty on the Functioning of the European Union (TFEU) ⁽¹⁹⁾ with its general principles detailed in Article 153. Based on Article 153, the European Parliament and European Council can issue directives, which are binding but not directly applicable as they require Member States to incorporate them through ‘transposition’ into national legislation ⁽²⁰⁾. Article 153 requires the EU to complement national legislation in the following relevant fields: health and security in workplaces ⁽²¹⁾; working conditions (contracts); social security and social protection; and security of tenure, information, advocacy, equal opportunities, etc. ⁽²²⁾. TFEU, Article 10, also lays down the aim to combat discrimination in many forms, including on the basis of sex, race, origin, religion, disability and age. Some further directives have evolved based on TFEU, Article 10, for example with regard to gender equality ⁽²³⁾.

(16) The Treaty establishing the European Economic Community was signed in Rome on 25 March 1957 and came into force on 1 January 1958. This treaty has evolved and is now the Treaty on the Functioning of the European Union.

(17) Treaty of Amsterdam amending the Treaty on European Union, the Treaties establishing the European Communities and certain related acts. This was signed in Amsterdam on 2 October 1997 and came into force on 1 May 1999.

(18) For example, the [Community Charter of Fundamental Social Rights of Workers](#) of 30 May 1989, COM(89) 248 final; the [safety and health framework directive](#) (89/391/EEC) and [Directive 2003/88/EC](#) of the European Parliament and of the Council of 4 November 2003 concerning certain aspects of the organisation of working time, OJ L 299, 18.11.2003. For an extensive review of related EU law: Reisenhuber, K., *European Employment Law – A systematic exposition*, Intersentia Publishing, Cambridge, Antwerp, Portland, 2012; Thüsing, G., *European Labor Law*, C.H. Beck, Munich, 2017, pp. 9ff (in German).

(19) Consolidated version of the [Treaty on the Functioning of the European Union](#), OJ C 326, 26.10.2010.

(20) Thüsing, G., *European Labor Law*, C.H. Beck, Munich, 2017, p. 4 (in German).

(21) [Consolidated version of the Treaty on the Functioning of the European Union, Part Three – Union Policies and Internal Actions Article 153 \(ex Article 137 TEC\)](#), OJ C 202, 7.6.2016: ‘(a) improvement in particular of the working environment to protect workers’ health and safety; (b) working conditions; (c) social security and social protection of workers’.

(22) Franzen, M., Gallner, I. and Oetker, H., *Commentary on European Labor Law*, C.H. Beck, Munich, 2019, p. 135 (in German).

(23) Thüsing, G., *European Labor Law*, C.H. Beck, Munich, 2017, p. 13 (in German).

Working hours and paid leave

Directive 2003/88/EC of 4 November 2003⁽²⁴⁾ lays down several minimum provisions. This includes minimum daily rest of 11 hours, maximum average weekly working time of 48 hours, minimum paid annual leave of 4 weeks and some further regulations for shift workers. The directive principally applies to the private and public sectors; however, there are some exemptions, for example law enforcement officials, seafarers, flight crews and pregnant women⁽²⁵⁾.

Transparency and proof of working conditions for employees

Directive (EU) 2019/1152 of 20 June 2019⁽²⁶⁾ requires every employee to have an express, legal contract in written form. The directive promotes the improvement of working conditions for all workers in the EU by making them transparent and comparable. Through this, employees are empowered to know their rights and obligations, and provided with legal certainty. Above all, the directive ensures the harmonisation and applicability of European employment contracts⁽²⁷⁾.

Safety and health in the workplace

Directive 89/391/EEC of 12 June 1989⁽²⁸⁾ sets standards for the prevention of occupational risks and the protection of health and safety in the workplace. It defines obligations for both employers and employees, defines responsibilities and access to information, and provides instructions. For example, issues such as access to medical examinations, fire protection and use of personal protective equipment in particular working environments⁽²⁹⁾ are covered under this directive⁽³⁰⁾.

(24) [Directive 2003/88/EC](#) of the European Parliament and of the Council of 4 November 2003 concerning certain aspects of the organisation of working time, OJ L 299, 18.11.2003.

(25) Thüsing, G., *European Labor Law*, C.H. Beck, Munich, 2017, pp. 263ff.

(26) [Directive \(EU\) 2019/1152](#) of the European Parliament and of the Council of 20 June 2019 on transparent and predictable working conditions in the European Union, OJ L 186, 11.7.2019, p. 105

(27) Thüsing, G., *European Labor Law*, C.H. Beck, Munich, 2017, pp. 297–298.

(28) [Council Directive of 12 June 1989](#) on the introduction of measures to encourage improvements in the safety and health of workers at work (89/391/EEC), OJ L 183, 29.6.1989, p. 1.

(29) The detailed personal protective equipment provisions are laid down in [Regulation \(EU\) 2016/425](#) of the European Parliament and of the Council of 9 March 2016 on personal protective equipment and repealing Council Directive 89/686/EEC, OJ L 81, 31.3.16, p. 51.

(30) The requirements for training are laid out in Articles 11 and 12 of [Directive \(EU\) 2019/1152](#) of the European Parliament and of the Council of 20 June 2019 on transparent and predictable working conditions in the European Union, OJ L 186, 11.7.2019, p. 105.

Notion of the duty of care

This is a well-known notion, often used to express the obligation of employers to take care of and be responsible for the well-being and protection of their staff. The term 'duty of care' is not explicitly mentioned in EU legislation. It is, however, part of some national legal acts in Member States. The concept of duty of care can nevertheless be deduced from certain terms mentioned in Regulation No 31 (EEC), 11 (EAEC)⁽³¹⁾, as it contains references to principles of good administration and support, healthcare and social care⁽³²⁾.

In conclusion, EU legislation provides a framework for labour protection law in the national legal systems. This framework varies from topic to topic regarding depth of detail and regulatory content. The same applies to the duty of care of employers and persons with responsibility for personnel. In some national legislation, there is a clear definition of the notion of the duty of care, which results in a direct obligation for managers. Meanwhile, at EU level this is not explicitly the case. Managers⁽³³⁾ should always look closely at national law and jurisdiction in the field of labour protection to be aware of their responsibilities and obligations.

(31) [Regulation No 31 \(EEC\), 11 \(EAEC\)](#), laying down the staff regulations of officials and the conditions of employment of other servants of the European Economic Community and the European Atomic Energy Community, OJ P 045, 14.6.1962, p. 1385.

(32) Reithmann, U., *The duty of care under the service law in the case law of the court for the civil service of the European Union*, Nomos, Baden-Baden, 2019, pp. 111ff.

(33) Article 5, [Council Directive of 12 June 1989](#) on the introduction of measures to encourage improvements in the safety and health of workers at work (89/391/EEC), OJ L 183, 29.6.1989, p. 1: 'The employer shall have a duty to ensure the safety and health of workers in every aspect related to the work.'



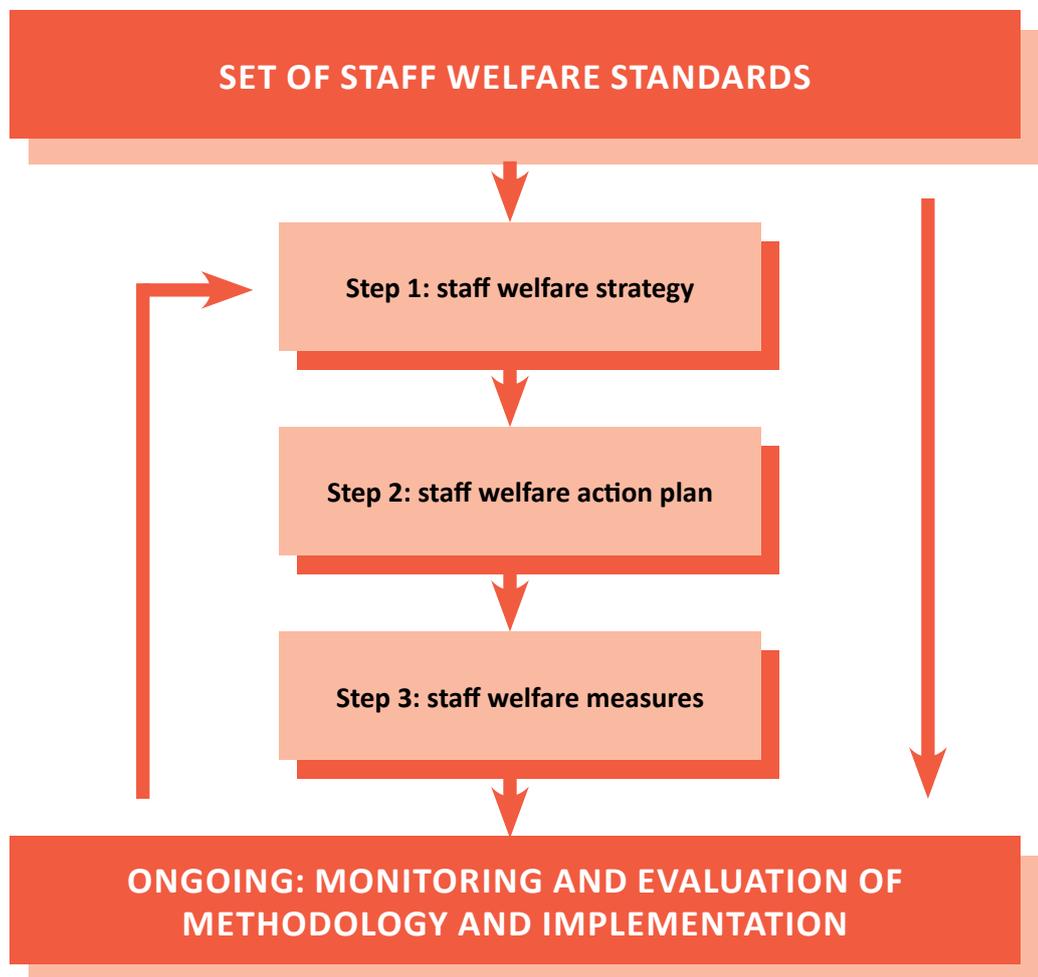
2. STAFF WELFARE POLICY DEVELOPMENT

Although well-being initiatives are part of the modus operandi of most authorities and organisations, they may often be implemented in an ad hoc manner and without sufficient attention to the actual needs of the various teams and job profiles of staff. In asylum and reception settings, such an approach may fall short of adequately addressing the well-being of staff who, in the performance of their duties within demanding work environments, often have to tolerate varying degrees of uncertainty as well as stress. Therefore, the conceptualisation and implementation of a coherent staff welfare policy in asylum and reception settings is recommended.

This policy aims to proactively address the well-being of staff throughout the full employment cycle, starting from as early as recruitment, to onboarding and throughout employment until the leaving stage. It should be designed based on regular analysis of the staff profile and needs within the authority and in line with the eight staff welfare standards (SWSs) proposed in this guide or with those established by the authority.

A staff welfare policy has to give equal weight to immediate support and **long-term proactive preventative care**, and to monitoring and evaluation. Monitoring and evaluation function as a key tool to indicate the timely adjustments of well-being measures and approaches based on assessing performance and needs.

FIGURE 2. Key steps when focusing on staff welfare policy development



To support this process, **three key staff welfare policy documents** can be considered. A staff welfare strategy links to a staff welfare action plan capturing the staff welfare measures. This, when systematically monitored, informs the next step of the staff welfare strategy, providing important information for potential adjustments.

2.1. STAFF WELFARE POLICY STANDARDS

This guide provides **eight SWSs** ⁽³⁴⁾ that define good governance in the area of staff well-being in the field of asylum and reception.

All the standards are **equally valuable**, and one does not outweigh another in terms of importance. The benchmarks of quality are defined in relation to these standards to ensure that relevant procedures and measures are put in place so that the well-being of staff inside an authority/organisation is prioritised and taken care of. Each standard and QB is tied to a set of indicators (a maximum of four) to ensure staff welfare policy performance can be measured.

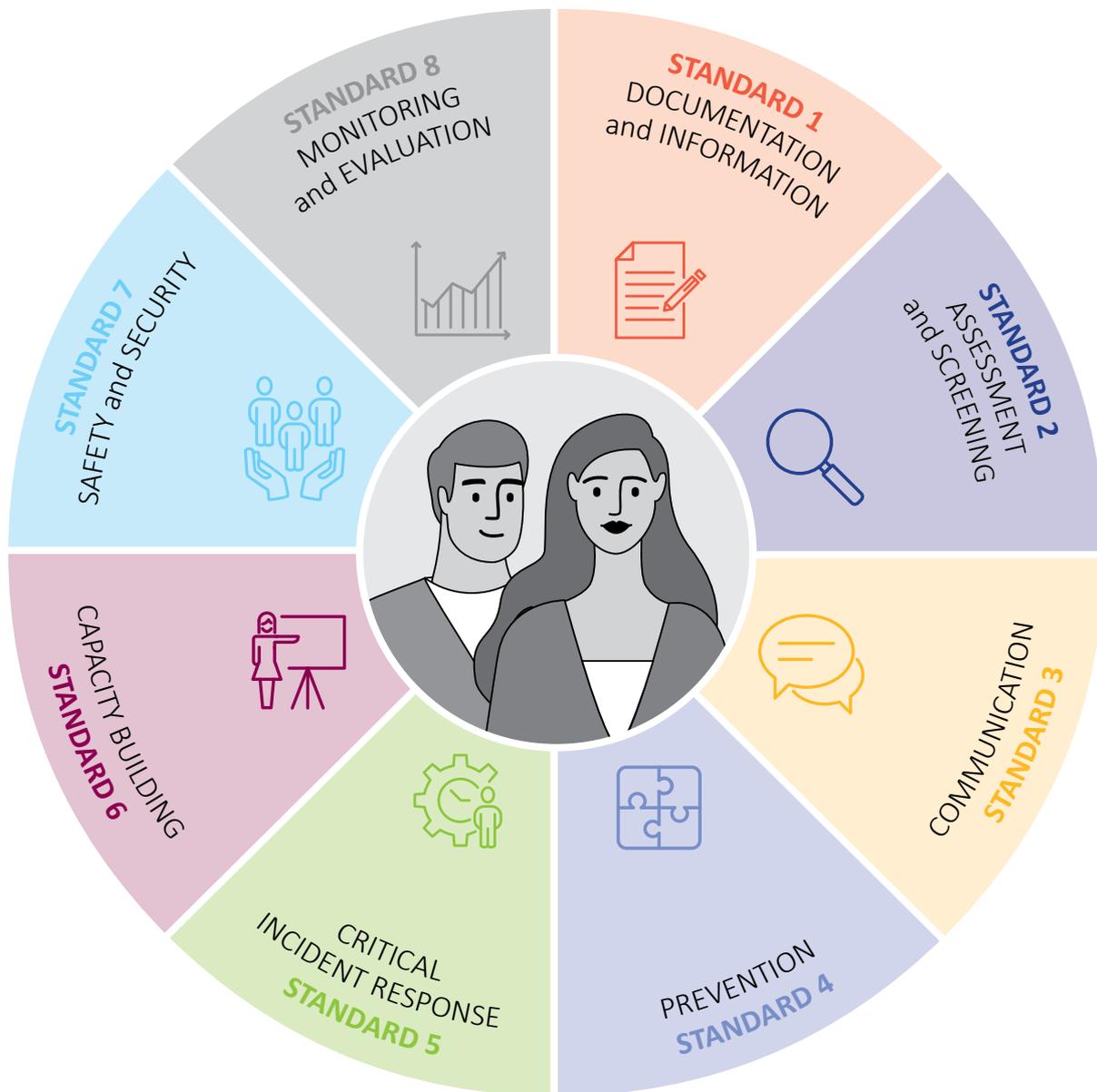
The necessary framework conditions to ensure that the eight proposed standards are met are to be established by the authority itself. Staff well-being will improve when the standards are incorporated into the administration of an authority. Authorities that already have a strong staff welfare framework in place and have established their own set of standards are encouraged to keep those. Those authorities that have not yet developed such a framework are encouraged to review the set of standards put forward in this guide.

When it comes to the implementation of the standards (according to the set indicators), the individual/department responsible may be one of the following:

- managers
- team leaders
- HR departments.

The standards, QBs and indicators thematically focus on the basic requirements for organisational performance, such as documentation, transparency, information, capacity building, security, health and communication. They all **emphasise the prevention** of work-related ill health (which includes physical and emotional well-being).

(34) These standards have been carefully developed by the experts involved in the development of this practical guide.

FIGURE 3. The eight SWSs**STANDARD 1:** documentation and information

Authorities have a documented staff welfare strategy in place that is communicated through relevant and agreed channels.

STANDARD 2: assessment and screening

Authorities enable managers to gain the basic skills to assess and screen their teams on matters relating to staff well-being.

STANDARD 3: communication

Authorities promote clear and holistic communication through various agreed platforms and channels.

STANDARD 4: prevention

Authorities provide sustainable preventative measures to promote and protect mental health among their employees.

STANDARD 5: critical incident response

Authorities provide specific support to staff who have experienced a critical incident.

STANDARD 6: capacity building

Authorities provide the means for their staff to develop appropriate skills.

STANDARD 7: safety and security

Authorities implement and communicate concrete guidelines on health, safety and security ⁽³⁵⁾ based on an analysis of risks in various work settings (including in the field).

STANDARD 8: monitoring and evaluation

Authorities monitor and regularly evaluate the effectiveness of staff welfare measures introduced and incorporate lessons learnt.

It is important to note that, although the importance of a code of conduct and anti-(sexual) harassment policy or similar within authorities is not specifically covered by this practical guide on the welfare of asylum and reception staff, these policies and strategies do need to complement one another and are equally important ⁽³⁶⁾.

Lastly, although the employer has a responsibility for their staff, in some cases direct support to affected family members might also need to be taken into consideration. This could be required in cases where a staff member has been affected by a critical incident with lasting consequences, for example.

(35) Security refers here to protection from threats from other persons, environmental factors, etc.

(36) During the induction of staff, all relevant policies, including those covering sexual exploitation and abuse, fraud and anti-corruption, to name a few, are to be integrated. Reminding staff in asylum and reception authorities who are already on board about the standards of the code of conduct is also advised.

2.1.1. STANDARD 1: DOCUMENTATION AND INFORMATION

The purpose of standard 1 is to ensure that the authority's staff welfare policy ⁽³⁸⁾ is well documented and communicated to all staff. A staff welfare strategy should be developed in a participatory manner and by looking at the needs identified by specific target groups, taking diversity into account. The staff welfare strategy should be accessible to all staff in the authority. To get a comprehensive picture, the participation of staff from various departments in this process is recommended, including staff from the safety and security departments. A voluntary expert task force could be set up to support this process. The roll-out of the staff welfare strategy is to be endorsed by senior management. The strategy is to be updated according to the risks and needs identified during regular monitoring and needs and risk assessment activities conducted by the authority. The channels to share information on staff well-being need to be well selected to ensure effective as well as confidential communication with staff. The creation of a general email address to handle staff welfare-related matters is advised.



Standard 1: Authorities have a documented staff welfare policy in place that is communicated through relevant and agreed channels ⁽³⁷⁾.

The **responsibility for meeting standard 1** lies with senior management, in close collaboration with the selected expert task force and HR departments.

| QUALITY BENCHMARKS | INDICATORS |
|--|--|
| QB1. A staff welfare strategy lays out how staff well-being is defined and the measures in place to support staff | 1a. An expert task force proposes a staff welfare strategy, including measures to support staff and link to other policies (e.g. anti-harassment, code of conduct) 1b. Senior management approves staff welfare strategy 1c. A staff welfare action plan details key activities to be implemented during the year 1d. A time frame to review and update the staff welfare strategy is set |
| QB2. Standard operating procedures (SOPs) are put in place | 2a. SOPs defining roles and responsibilities are developed 2b. Management employs SOPs |
| QB3. The staff welfare strategy is easy to access, concrete and in a language all staff can understand | 3a. All staff members are aware of and have access to the staff welfare strategy 3b. Staff have received material providing information on activities available |
| QB4. All staff are systematically informed of the staff welfare strategy, action plan and staff welfare measures available, and how to access support | 4a. Number of staff reached with the available staff welfare activities 4b. Induction modules for newcomers including information on staff welfare |

(37) For information on how this standard can be achieved, refer to [Annex 2 'Staff welfare standards \(poster\)'](#), which introduces all SWs at a glance in a poster format, [Annex 3 'Staff welfare strategy template'](#) and [Annex 5 'Staff welfare messaging'](#).

(38) For guidance on staff welfare policy development, see [Chapter 2 'Staff welfare policy development'](#).

2.1.2. STANDARD 2: ASSESSMENT AND SCREENING

The aim of standard 2 is to guarantee that managers have the capability and are enabled to identify and screen, in basic terms, the well-being needs within their teams and are able to notice issues when they arise. Although on-the-job training and ongoing professional development are crucial, the clear formulation of job descriptions and terms of reference for the purpose of the appropriate selection of personnel working in asylum and reception is also important. Candidates need to be aware of the specific challenges that might come with the position. Screening procedures can be strengthened by inserting specific questions into the 'interview questions grid' regarding resilience and ways of coping in stressful situations. This grid is used during the hiring of staff or during the onboarding stage once staff are selected. Furthermore, a question on how individuals ensure self-care might be useful. Reviewing such tools and making them culturally and contextually appropriate might also be necessary to ensure diversity is taken into account. Managers and HR departments will need to be enabled to use appropriate skills in order to fulfil their duties in this regard.

The **responsibility for meeting standard 2** lies with HR departments, supported by the expert task force, in collaboration with managers and team leaders.

| QUALITY BENCHMARKS | INDICATORS |
|---|---|
| QB1. HR departments and managers have the skills to develop clear job descriptions and relevant interview questions for selection purposes | <p>1a. Terms of reference and job descriptions for managers and staff set clear requirements</p> <p>1b. Interview grid for selection purposes includes a section on well-being (stress management) and is linked to a question on code of conduct</p> |
| QB2. Managers are qualified to identify basic physiological and psychological strain and needs in their team members | <p>2a. A number of managers participate in basic training on how to identify physiological/psychological strain</p> <p>2b. Needs of all staff are assessed once a year during all phases of employment by using an institutionalised monitoring process</p> <p>2c. Percentage of staff feedback gathered indicates that their direct supervisors have made an effort in identifying professional/personal strain</p> |

(39) For information on how this standard can be achieved, see [Annex 6 'Recruitment interview grid template'](#), which contains suggested questions focusing on stress management and self-care. Generally speaking, reference to potential stressors in the workplace and working environment will need to be articulated. This can be part of the job description to allow for transparency from the very beginning of the process.



Standard 2: Authorities enable managers to gain the basic skills to assess and screen their teams on matters relating to staff well-being (39).

2.1.3. STANDARD 3: COMMUNICATION

Standard 3 aims to ensure that clear, timely, truthful and relevant communication takes place within authorities and their teams. Moreover, all staff members are aware of the importance of transparent communication at all levels to ensure a trusting atmosphere at work. Information is transferred by using appropriate channels and platforms that are accessible to all staff and are easy to use. Furthermore, communication between line managers and their respective teams and within teams takes place in an ethical and respectful manner. A bottom-up approach in addressing various topics and challenges is encouraged and integrated where possible. This is crucial to achieve targets and ensure a healthy working environment. Management staff in particular are enabled to communicate effectively and in an empathic manner with the teams they manage. Therefore, the need for training on communication skills is connected with the necessity to provide a variety of contexts in which the staff can exchange personal or professional thoughts. Hence, capacity building on communication skills and how to provide feedback appropriately is recommended. Line managers are advised to systematically allocate time slots to engage with their teams, through individual as well as team meetings.



Standard 3:
Authorities promote clear and holistic communication through various agreed platforms and channels ⁽⁴⁰⁾

The **responsibility for meeting standard 3** lies with HR departments, training and capacity-building units and the respective departments and line managers alike. Employees are advised to be proactive in scheduling regular meetings and to take advantage of offers made to meet with their managers and colleagues.

| QUALITY BENCHMARKS | INDICATORS |
|---|---|
| QB1. Managers and staff engage by using relevant, truthful, transparent and respectful communication skills | 1a. Number of staff and managers participating in communication skills training 1b. Percentage of staff indicating that the communication of their direct supervisors is professional, transparent and respectful 1c. Summary of findings of the annual staff feedback survey is accessible to all staff |
| QB2. A structure is established for all staff to engage in personal exchange formats on both professional tasks and well-being with their respective line managers | 2a. Number of one-on-one meetings conducted / participated in 2b. Amount of positive (constructive/helpful) feedback received during such regular meetings |

(40) For information on how this standard can be achieved, refer to the interventions introduced in [Part II: Staff welfare toolbox](#), Annex 3 'Semi-structured check-ins or one-on-one meetings', the table on soft skills development: communication and communication techniques in Annex 14 'Sample training programme with a focus on staff welfare', Annex 17 'Focus group discussion', Chapter 3.3.1 'Critical incident management', Section 3.3.2 'Collegial support after a critical incident' and Section 3.3.3 'Integrated incident team'. Refer also to [Part III: Monitoring and evaluation](#), Annex 4, on how to collect meaningful feedback and communication techniques.

2.1.4. STANDARD 4: PREVENTION



Standard 4: Authorities provide sustainable preventative measures to promote and protect mental health among their employees (41).

Standard 4 ensures that authorities are proactively engaged in preventing stress reactions and burnout in their managers and first-line officers, as well as promoting physical and mental health at a general level. This can be done, on the one hand, by conducting regular risk assessments (42) as part of ongoing monitoring activities or, on the other hand, in the form of feedback sessions at an early stage. These feedback sessions can be complemented by providing training on how to identify the first signs of stress and by providing support to strengthen positive coping mechanisms and resilience among staff. This support can also include encouraging staff to set healthy boundaries, and providing the necessary regular staff welfare activities such as educational supervision or 'intervision' (43). Regular educational supervision and other formats of support sessions by a trained mental health professional may be required as a preventative measure for teams at particular risk of exposure to vicarious trauma. Encouraging colleagues to be attentive to changes they see in their peers is an important part of caring for one another in a team-spirited manner. Furthermore, authorities are advised to establish teams that can respond in case of incidents (e.g. stress management or incident teams and collegial support teams (44)). There is a need to develop a standard operating procedure (SOP) that includes clear tasks and the limitations of such an in-house intervention/incident team.

In addition, the identification, where applicable, of external specialists to support staff based on an agreed memorandum of understanding is recommended to clarify the support to be provided and the limitations thereof. These external specialists could include, for example, counsellors, psychologists and other medical professionals. All employees, and line managers in particular, need to be aware of the relevant person to be contacted **before** a health crisis unfolds. Lastly, having a general team of volunteers in place to create awareness of the importance of taking care of oneself can be an additional good practice organised within authorities.

The responsibility for meeting standard 4 lies with HR departments, supported by the training/capacity-building unit and managers. Meanwhile, employees that form part of the stress management / incident or collegial support teams also bear some responsibility, as do other internal or external experts. It is important that employees seeking support from external specialists are enabled to seek such support during working hours. Considerations regarding the facilitation of logistical arrangements are therefore vital, as is a coordinated referral to such specialists.

(41) For information on how this standard can be achieved, refer to [Part II: Staff welfare toolbox](#), Annex 9, (B) The case of the Netherlands, regarding the integrated incident team. Also consider activities focusing on team building, self-care and intervision, to name a few, and the recommendations on training for managers and first-line officers. Standard 4 is strongly linked to standard 5. The EASO animation, *The importance of the early identification of signs of stress*, 2021, can be useful to emphasise the importance of support to first-line officers.

(42) Refer to [Annex 4 'Staff welfare action plan and risk assessment templates'](#). A more comprehensive approach to assessing risks in general is compiled in EU-OSHA, 'Online interactive risk assessment', 2021. This comprehensive online risk assessment tool is aimed mainly at micro (fewer than 10 employees) and small (fewer than 50 employees) enterprises/organisations. It is recommended that the content is adapted to fit the purpose of asylum and reception authorities. Refer to the tools on security services, for example.

(43) Educational supervision in this context refers to team or case supervision and provides team members with a platform for guided reflection and the opportunity to learn with and from one another in a systematic way. Intersession is a form of knowledge development in a small group of professionals, managers or other employees who share a common challenge or problem. Refer to [Part II: Staff welfare toolbox](#), Section 4.3 'Educational supervision'.

(44) For more information on how to establish such support teams, see [Part II: Staff welfare toolbox](#), Section 3.3.1 'Critical incident management', Section 3.3.2 'Collegial support after a critical incident' and Section 3.3.3 'Integrated incident team'.

| QUALITY BENCHMARKS | INDICATORS |
|---|--|
| QB1. Staff and managers have access to a wide range of training sessions to identify signs of stress, prevent stress and promote mental health generally | 1a. Number of staff attending training sessions on stress management 1b. Percentage of staff who indicate that the content delivered was relevant for their daily work |
| QB2. Staff and managers have access to support activities and services (provided in-house and/or externally) | 2a. Focal point(s)/teams for relevant interventions are selected and trained 2b. Terms of reference for selected focal person / intervention team members and the services they provide are in place 2c. Where needed, clear selection criteria and terms of reference for external specialists are available |
| QB3. Staff and managers have access to health promotion activities | 3a. Number of health promotion activities organised |

2.1.5. STANDARD 5: CRITICAL INCIDENT RESPONSE

Standard 5 aims to ensure the authority is prepared to support staff to recover from the potential impact on (mental) health when a critical incident takes place. It underlines the need to develop tools to deal with any critical situation and for clearly formulated SOPs ⁽⁴⁶⁾. It promotes an effective, timely and clear response to staff members who have been affected by a critical incident ⁽⁴⁷⁾. Authorities are advised to ensure that there are qualified team members who have been sufficiently trained to support staff in need. SOPs are developed to guide the supporting teams. They should indicate the roles and responsibilities of established stress management / incident / collegial support team members and their limitations. The SOPs also indicate when a case should be referred to external specialists or where other entities (e.g. safety departments, security departments or police) are to be involved. Capacity-building activities on de-escalation techniques should be made available to all staff, in particular first-line officers.



Standard 5: Authorities provide specific support to staff who have experienced a critical incident ⁽⁴⁵⁾.

The **responsibility for meeting standard 5** lies with management, supported by the teams established to follow up on critical incidents, as well as HR departments and the safety and security department(s) where applicable.

(45) For information on how this standard can be achieved, refer to the following sections in [Part II: Staff welfare toolbox](#): Section 3.3.1 'Critical incident management', Section 3.3.2 'Collegial support after a critical incident' and Section 3.3.3 'Integrated incident team'. For relevant training courses, refer to the de-escalation techniques, identification of warning signs and recommendations in these sections. Lastly, refer to Annex 8 'Critical incident checklist'.

(46) Refer to [Part II: Staff welfare toolbox](#), Section 3.3.1 'Critical incident management' and Annex 8 'Critical incident checklist'.

(47) Standard 5 addresses staff support in critical incidents and does not necessarily address the wider area of critical incident management. The support to applicants and de-escalation are addressed as they relate to staff welfare. A referral to an internal or external professional entity will be required to address potential follow-up needs by affected applicants.

| QUALITY BENCHMARKS | INDICATORS |
|--|--|
| QB1. An independent, trained person (or team) of confidence is appointed within the authority and can be consulted after critical incidents | 1a. Terms of reference for such a team / focal person are in place 1b. The team / focal person selected has the relevant skills and training to provide the support needed |
| QB2. Clear guidance is in place for managers on how to follow up after a critical incident | 2a. SOP on critical incident management is in place |
| QB3. Staff and managers have information on how to request and access specific support after a critical incident has occurred | 3a. Existence, roles and responsibilities of this focal person / intervention team communicated to all relevant staff 3b. Information sessions (part of induction and other staff training) serve to make staff aware of the SOP and how to seek/receive support and from whom in case of a critical incident 3c. Total number and types of critical incidents recorded compared with incidents requiring a follow-up with a staff member 3d. Percentage of affected staff indicating satisfaction with the service provided by the support person/team |

2.1.6. STANDARD 6: CAPACITY BUILDING



Standard 6: Authorities provide the means for their staff to develop appropriate skills (48).

Standard 6 focuses on the core competencies to be strengthened or developed in order to establish and advance the skills of all staff working in the field of asylum or reception. Well-being relates directly to having the means to fulfil the daily tasks in a proper manner. A transfer of knowledge is to be promoted and enabled by training sessions and other relevant formats of exchange. Therefore, a qualification strategy should be in place, including needs assessment and appropriate training formats, to support this process. Authorities are therefore advised to develop an annual training plan that includes soft-skill training (focusing on improving staff welfare). Furthermore, collegial support and intervention is promoted to enable staff to discuss and learn from one another.

The responsibility for meeting standard 6 lies with management and internal or external trainers supporting the authority in this effort (49).

(48) Refer to [Part II: Staff welfare toolbox](#), Annex 14 'Sample training programme with a focus on staff welfare'.

(49) Certain training topics might need to be outsourced by authorities that do not have the capacity to provide in-house training linked to the training recommendations provided in this guidance. EASO has relevant training modules that cover some of the topics suggested in this guide.

| QUALITY BENCHMARKS | INDICATORS |
|--|--|
| QB1. Authorities have implemented a training needs assessment and a systematic evaluation of training schemes to ensure the high-quality, effective application and transfer of knowledge into daily work | 1a. Needs assessments with staff of authorities are conducted 1b. A training plan is in place and includes topics concerning the well-being of staff 1c. The training programme is updated |
| QB2. Authorities have implemented a wide range of tailor-made and standardised training sessions | 2a. Number of training sessions conducted 2b. Number of training sessions conducted with a link to the well-being of staff 2c. Number of participants reached by training sessions per year |
| QB3. Authorities offer additional relevant formats of professional development in order to ensure transfer of knowledge | 3a. Number of staff participating in support activities (collegial support, intervision, individual/group counselling, etc.) within a reporting period 3b. Percentage of staff indicating in feedback sessions that a respective intervention attended was perceived as relevant to ensuring well-being |

2.1.7. STANDARD 7: SAFETY AND SECURITY

Standard 7 deals with the mitigation of risks by establishing well-structured and well-communicated safety and security procedures ⁽⁵¹⁾. The focus is to assess health risks (physical as well as psychological) related to safety and security to establish SOPs and safety routines in order to create resilience. By having those procedures in place, risks and the related stress can be minimised. Authorities are therefore advised to ensure that information about access to health-, safety- and security-related measures and instructions are provided by HR departments in a standardised format to all staff and managers. In addition, other recommendations include the development of a risk-monitoring methodology and having in place an accessible annual risk-monitoring plan. It is recommended that first-line officers actively participate in risk-monitoring exercises ⁽⁵²⁾.

The responsibility for meeting standard 7 lies with the safety and security department(s), supported by senior management, HR departments and the established stress management team / focal person(s).



Standard 7: Authorities implement and communicate concrete guidelines on health, safety and security, based on an analysis of risks in various work settings (including in the field) ⁽⁵⁰⁾.

(50) For information on how this standard can be achieved, see [Part II: Staff welfare toolbox](#), Section 3.3.1 'Critical incident management'. Also see Annex 8 'Critical incident checklist', which can inform certain elements of an SOP or the risk monitoring methodology. Furthermore, [Part III: Monitoring and evaluation](#) includes useful surveys to inform and update needs identified by staff relating to safety and security, detailed in Section 3.3.1 'Staff welfare progress analysis checklist'.

(51) Risks in terms of damage to equipment or office space or similar are not a focus here and are therefore not covered.

(52) Refer to [Annex 4 'Staff welfare action plan and risk assessment templates'](#).

| QUALITY BENCHMARKS | INDICATORS |
|--|---|
| QB1. Staff and managers are informed of reporting hierarchies to use in case of other emergency/security incidents besides critical incidents | 1a. An SOP that complements the SOP on critical incident management is in place and disseminated |
| QB2. Staff and managers receive information about access to health-, safety- and security-related measures/instructions | 2a. A dedicated mailbox to receive and respond to enquiries made by staff 2b. Types of concern raised are documented ⁽⁵³⁾ 2c. Percentage of staff indicating in feedback sessions that they feel that their safety and security in the workplace is being sufficiently considered |
| QB3. Authorities monitor the risks of each workplace in a continuous and evolving risk management process, and with the participation of first-line officers, in order to adapt safety/security measures where needed | 3a. Risk-monitoring methodology and plan in place 3b. Risk-monitoring plan regularly updated 3c. Number of first-line officers who participated in the annual risk-monitoring exercise |

2.1.8. STANDARD 8: MONITORING AND EVALUATION

Standard 8 is in line with the authorities' duty of care. It is linked to the importance of the identification of a focal person or team to conduct regular activities to monitor the staff welfare measures introduced and to see the impact of these. These activities include a baseline survey on staff well-being and employment satisfaction surveys. This is not only to ensure staff welfare activities are on track but also to identify potential emerging staff welfare needs and psychosocial risks before they materialise ⁽⁵⁵⁾. It also facilitates the identification of areas in which staff demonstrate resilience and areas of good practice for internal learning purposes.

The **responsibility for meeting standard 8** lies with the monitoring and evaluation department(s), supported by senior management and HR departments.

| QUALITY BENCHMARKS | INDICATORS |
|---|--|
| QB1. A monitoring and evaluation methodology is in place in order to assess the effectiveness of staff welfare measures introduced | 1a. Staff welfare monitoring and evaluation methodology is in place 1b. A focal person / monitoring team is selected |
| QB2. Regular monitoring and evaluation exercises are conducted, which include risk management ⁽⁵⁶⁾ relating to stress | 2a. Monitoring and evaluation reports are drafted annually 2b. Findings are reflected in regular recommendations proposed to senior management 2c. Recommendations feed into the review of the staff welfare strategy and action plan within a specified time frame |

(53) Confidentiality is a key principle in all staff welfare-related activities.

(54) For information on how this standard can be achieved, refer to the tools in [Part II: Staff welfare toolbox](#), Section 2.4 'Quality of employment survey', and [Part III: Monitoring and evaluation](#), Section 3.3 on the comprehensive staff welfare quality assessment package.

(55) Relevant tools to set up a monitoring plan for staff welfare interventions can be accessed in [Part III: Monitoring and evaluation](#), Chapter 3 'Staff welfare quality monitoring package'.

(56) Refer to [Annex 4 'Staff welfare action plan and risk assessment templates'](#) for a risk assessment template and explanation of the risk assessment cycle.



Standard 8: Authorities monitor and regularly evaluate the effectiveness of staff welfare measures introduced and incorporate lessons learnt ⁽⁵⁴⁾.

2.2. STAFF WELFARE STRATEGY

To approach staff welfare in a coherent and comprehensive manner, asylum and reception authorities are to consider the **development and implementation of a strategy on staff welfare** ⁽⁵⁷⁾. A staff welfare strategy translates the SWSs into concrete policy objectives to enable staff to lead healthy and productive professional lives, while reaching and maintaining their full potential. In addition, the staff welfare strategy operationalises the set objectives into high-quality staff welfare measures and services that are efficient, effective and within budget. The involvement and participation of senior management and employees from all levels in the design and execution of a meaningful staff welfare strategy are crucial. The strategy will need to address risk management throughout the process.

Before initiating the process of staff welfare strategy development, authorities should reflect on the following questions.

- What do we currently have in place that works and where are the gaps?
- Who are the main target groups of our current interventions?
- Do we observe trends that need attention from a staff welfare perspective (high staff turnover, increased number of critical incidents, frequent staff absences, etc.)?
- Is senior management in favour and supportive of putting a staff welfare strategy in place?
- Why do we want to implement a strategy (or certain parts of it) now? For example, recently increased number of critical incidents involving staff and applicants, or external, uncontrollable situations such as the impact of COVID-19 on staff members.

Based on the eight SWSs, the **objectives, approach** and **measures** of the staff welfare strategy are to be formulated **following a needs assessment** to be conducted within the organisation ⁽⁵⁸⁾. The needs assessment aims to map the state of play with regard to the well-being of staff in the authority. It does so by identifying the **existing needs** and **potential risks** and if and how they are addressed through the existing policies and mechanisms.

The needs assessment will aim to collect, with full respect for personal data protection, information related to:

- organisational demographics (age and gender profiles of staff, sedentary and physically active roles, office-based and transient staff);
- employees' health (sickness/absence data, top reasons for medical claims, accidents / critical incidents, employee usage of existing assistance programmes);
- employees' feedback with respect to staff welfare risks and needs through surveys, focus groups and team discussions.

⁽⁵⁷⁾ Refer to Annex 3 'Staff welfare strategy template'.

⁽⁵⁸⁾ The tools to assess needs, monitor the impact of efforts and to evaluate the staff welfare activities overall are found in Part III: *Monitoring and evaluation*. Reviewing all three parts of the guide is recommended as all three components are interlinked.

The needs assessment is to provide data on questions such as the following.

- Do managers and first-line officers in the authority believe that well-being at their workplace should be considered?
- What work-related risks ⁽⁵⁹⁾ have been identified as most pressing with regard to well-being?
- What types of measure are most likely to achieve good results?
- What format of future measures/activities should work best for managers and first-line officers?
- Are there resources and expertise in place to introduce, implement and monitor/evaluate the introduced measures?
- Who is responsible for the implementation of the proposed interventions (internal or external professionals, team members, managers, etc.) and is there a budget available?

A needs assessment methodology is to be developed and a needs assessment should be conducted by an external or internal expert(s) / team of experts. The results of the **needs assessment**, which should be focused on the new potential **risk factors identified**, will inform the development of the staff welfare strategy, which should seek to address staff welfare goals in 2- to 3-year cycles. The strategy should be evaluated annually in terms of effectiveness and relevance.

2.3. STAFF WELFARE ACTION PLAN

The staff welfare strategy objectives will be the starting point of **developing an action plan** ⁽⁶⁰⁾. The set objectives and measures of the strategy are to be operationalised by introducing concrete and measurable activities that are clearly communicated in a timely manner through appropriate channels to all staff. The activities introduced in the action plan should be evaluated, reviewed and updated when needed.

The action plan addresses the following questions.

- What are the types of activity to be implemented in the given time frame?
- Which department/unit/team is responsible for implementing the activities proposed (internal or external professionals, team members, managers, etc.)?
- Who is the target group(s) of the activities?
- What is the time frame and frequency of implementation of the proposed activities?
- What is the budget allocation per activity?

(59) Leka, S., Griffiths, A. and Cox, T., 'Chapter 5.1. Assessing risks at work', in *Work Organisation and Stress*, World Health Organization, Geneva, 2004, p. 10.

(60) Refer to Annex 4 'Staff welfare action plan and risk assessment templates'.

The effective promotion of staff welfare will require a strong work setting infrastructure to include the following elements:

- staff welfare policy standards that are ingrained in the organisation’s strategy, overall policy approach and measures,
- a clear staff welfare policy, which is clearly based on the identified needs and is well communicated to all employees,
- an approved and available budget for implementing the policy,
- a designated person or team responsible for the implementation of the policy,
- a well-trained person or team with the necessary skills to implement the policy,
- strong leadership and high levels of employee support for the strategy.

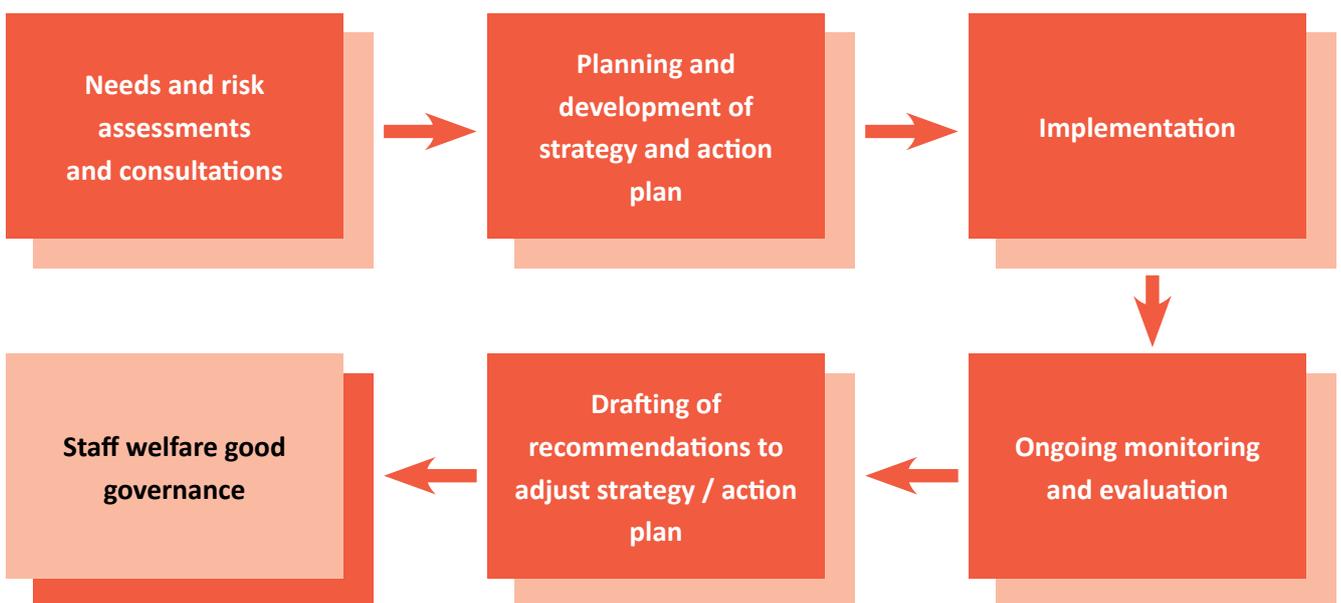
Before the staff welfare strategy and action plan are launched, they should be presented for consultation to senior management and the staff representatives’ committee.

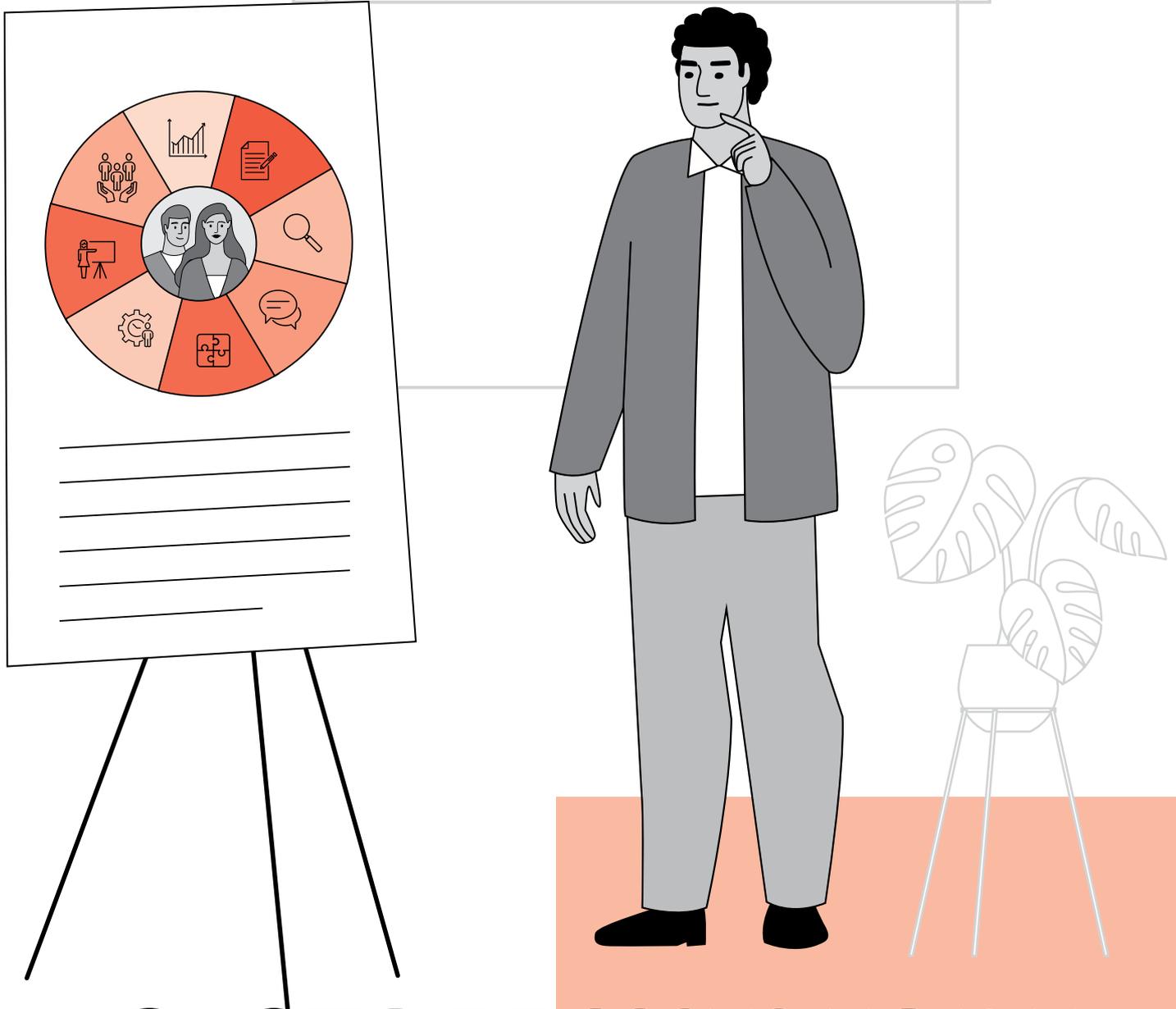
This allows valuable feedback to be taken into consideration and ensures awareness, understanding and commitment.

A staff welfare strategy will work if its priorities and goals are well communicated, so that:

- managers identify needs, take full advantage of existing measures for the benefit of their teams and themselves, promote healthy work routines and behaviours, and communicate actively with senior managers to ensure early and preventative interventions when needed;
- staff members understand their role, participate in initiatives, use the available resources and provide feedback.

FIGURE 4. Steps in developing a staff welfare policy





3. STAFF WELFARE MEASURES AT A GLANCE

The recommended comprehensive package of **staff welfare measures to be introduced** is provided based on the good practices and expertise shared by EU+ country experts during EASO network meetings. It can serve as a non-exhaustive example for authorities to follow or choose aspects from when conceptualising the introduction of concrete staff welfare measures.

The proposed package follows the **three employment phases**:

- pre-hire followed by onboarding,
- ongoing support,
- end of deployment / end of contract.

Measures are clearly linked to the respective SWSs and respond to concrete needs. In addition, the package of measures includes clear reference to the implementing party and staff target groups. Guidance on how to implement some of the main recommended measures can be found in the other parts of this guidance ([Part II: Staff welfare toolbox](#) and [Part III: Monitoring and evaluation](#)).

FIGURE 5. Staff welfare measures

| MEASURES | GENERAL DESCRIPTION/ PARTICULAR MEASURE | REFERENCE TO STANDARD(S) | REFERENCE IN THE THREE-PART GUIDE | INITIALISING/ IMPLEMENTING PARTY | | | TARGET GROUP | | PRE-HIRING/ SELECTION PROCESS | ONBOARDING/ PRE-DEPLOYMENT | ONGOING SUPPORT | END/POST-DEPLOYMENT |
|---|--|--|--|----------------------------------|--------------------|-------------------------------|--------------|---------------------|-------------------------------|----------------------------|-----------------|---------------------|
| | | | | MANAGER | HR/ ADMINISTRATION | INTERNAL/ EXTERNAL SPECIALIST | MANAGER | FIRST-LINE OFFICERS | | | | |
| General support | | | | | | | | | | | | |
| Police clearance | A police clearance certificate is an official document issued as a result of a background check by the police or government agency detailing any criminal records of the person in question. Criminal records may include arrest, conviction and possibly criminal proceedings | SWS 4: prevention SWS 7: safety and security | | ✓ | | ✓ | ✓ | ✓ | ✓ | | | |
| Selection process | Ensuring that staff welfare is already considered during the interview phase. The interview grids capture this topic including reference to other relevant HR policy documents (code of conduct, anti-(sexual) harassment policy, etc.) | SWS 2: assessment and screening | Part 1: Standards and policy Annex 6 'Recruitment interview grid template' | ✓ | | ✓ | | ✓ | | | | |
| Medical and psychological examination | The occupational, medical and psychological care aims to keep employees healthy and improves health protection in the workplace By means of occupational healthcare, the employer can demonstrate that it is meeting its 'duty of care' responsibilities | SWS 4: prevention SWS 7: safety and security | | ✓ | | ✓ | | ✓ | ✓ | ✓ | | ✓ |
| Practical information and travel preparations | Pre-deployment arrangement during employment regarding travel arrangements, assurance, bookings, briefings, reporting hierarchies in the country of deployment / mission, etc. | SWS 7: safety and security | | ✓ | | ✓ | | ✓ | ✓ | ✓ | | |
| Language courses | Language-training sessions help to increase staff confidence and maximise professional skills Language-training refresher sessions/courses help to increase staff confidence and maximise professional skills | SWS 3: communication SWS 6: capacity building | | ✓ | | ✓ | | ✓ | ✓ | ✓ | | ✓ |

| MEASURES | GENERAL DESCRIPTION/ PARTICULAR MEASURE | REFERENCE TO STANDARD(S) | REFERENCE IN THE THREE-PART GUIDE | INITIALISING/ IMPLEMENTING PARTY | | | TARGET GROUP | | PRE-HIRING/ SELECTION PROCESS | ONBOARDING/ PRE-DEPLOYMENT | ONGOING SUPPORT | END/POST-DEPLOYMENT | |
|---|---|---|--|----------------------------------|--------------------|-------------------------------|--------------|---------------------|-------------------------------|----------------------------|-----------------|---------------------|--|
| | | | | MANAGER | HR/ ADMINISTRATION | INTERNAL/ EXTERNAL SPECIALIST | MANAGER | FIRST-LINE OFFICERS | | | | | |
| General support | | | | | | | | | | | | | |
| Technical training, and technical systems and equipment | Access to IT equipment (laptop, smartphone, walkie-talkies, etc.), including for operations abroad | SWS 3: communication building SWS 6: capacity building SWS 7: safety and security | Part II: Staff welfare toolbox Chapter 6 'Capacity-building interventions' | | | | | | | | | | |
| | Usage of relevant office equipment – to learn how to use printers, copiers, projectors, audiovisual equipment, other technologies available, communication devices/apparatus, first aid equipment, etc. | | | ✓ | | | ✓ | | | | | | |
| | Usage of organisation's internal communication platforms | | | | | | ✓ | | | | | | |
| Corporate sports | IT software relevant for asylum staff | | | | | | | | | | | | |
| | Organisations use corporate sports events to improve health and well-being, as well as to influence engagement, culture and staff retention | SWS 4: prevention | | ✓ | | | ✓ | | | | ✓ | | |

| MEASURES | GENERAL DESCRIPTION/ PARTICULAR MEASURE | REFERENCE TO STANDARD(S) | REFERENCE DOCUMENTS PART OF THIS THREEFOLD GUIDE | INITIALISING/ IMPLEMENTING PARTY | | | TARGET GROUP | | PRE-HIRING/ SELECTION PROCESS | ONBOARDING/ PRE- DEPLOYMENT | ONGOING SUPPORT | END/POST-DEPLOYMENT |
|-----------------------------|---|--|---|--|-----------------------|-------------------------------------|-----------------|------------------------|----------------------------------|--------------------------------|-----------------|---------------------|
| | | | | MANAGER | HR/ ADMINISTRATION | INTERNAL/ EXTERNAL SPECIALIST | MANAGER | FIRST-LINE OFFICERS | | | | |
| Support intervention | | | | | | | | | | | | |
| Critical incident checklist | In the event of a critical incident, there should be clear and easy access to guidance on how to proceed, whom to inform and the measures that can apply. Further checking in with outgoing staff on additional needs regarding the impact of a previous critical incident is advised. | SWS 4: prevention SWS 5: critical incident response SWS 7: safety and security | Part II: Staff welfare toolbox Section 3.3.1 'Critical incident management' Annex 8 'Critical incident checklist' Annex 9 'Internal support provision in case of critical incidents' Annex 10 'Critical incident reporting template' Annex 11 'Reflection tool after a critical incident has occurred' | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Team building | Welcoming and integrating new team members accordingly into existing teams is important. It will be important to appropriately support outgoing team members as they hand over to colleagues remaining in the teams and to allow for learning and feedback. Team-building measures can be of various types, such as team experiences, excursions, tasks, exercises and role play; these help to strengthen loyalty, trust and motivation. | SWS 3: communication SWS 4: prevention SWS 5: critical incident response | Part II: Staff welfare toolbox Section 3.2 'Team building' Annex 7 'Team-building activities by stage' | ✓ | | | ✓ | | ✓ | ✓ | | ✓ |
| Semi-structured interviews | Structured, institutionalised, regular discussions between managers and staff in order to detect shortcomings, risks, etc. are crucial and should commence during onboarding/pre-deployment | SWS 2: assessment and screening SWS 3: communication SWS 4: prevention SWS 8: monitoring and evaluation | Part II: Staff welfare toolbox Section 2.2 'Semi-structured one-on-one meetings' Annex 3 'Semi-structured check-ins or one-on-one meetings' | ✓ | | | | ✓ | | | ✓ | |

| MEASURES | GENERAL DESCRIPTION/ PARTICULAR MEASURE | REFERENCE TO STANDARD(S) | REFERENCE DOCUMENTS PART OF THIS THREEFOLD GUIDE | INITIALISING/ IMPLEMENTING PARTY | | | TARGET GROUP | | PRE-HIRING/ SELECTION PROCESS | ONBOARDING/ PRE- DEPLOYMENT | ONGOING SUPPORT | END/POST-DEPLOYMENT |
|--|--|--|--|--|-----------------------|-------------------------------------|-----------------|------------------------|----------------------------------|--------------------------------|-----------------|---------------------|
| | | | | MANAGER | HR/ ADMINISTRATION | INTERNAL/ EXTERNAL SPECIALIST | MANAGER | FIRST-LINE OFFICERS | | | | |
| Support intervention | | | | | | | | | | | | |
| Intervention | Support provided by equal colleagues in order to find a solution for one specific issue | SWS 3: communication SWS 4: prevention SWS 5: critical incident response | Part II: Staff welfare toolbox Section 3.1 'Intervention' Annex 6 'Methods of intervention' | ✓ | | | | ✓ | | | ✓ | |
| Psychological assistance | Individual support from an external (or internal) psychologist, as part of ongoing support or before exit / end of deployment | SWS 4: prevention SWS 5: critical incident response | Part II: Staff welfare toolbox Section 4.2 'Individual counselling sessions' | ✓ | | ✓ | | ✓ | | | ✓ | ✓ |
| Educational supervision | Group counselling / exchange of experience by a skilled trainer in order to reflect on experiences | SWS 3: communication SWS 4: prevention SWS 5: critical incident response | Part II: Staff welfare toolbox Section 4.3 'Educational supervision' | ✓ | | ✓ | | ✓ | | | ✓ | ✓ |
| Mediation | Structured counselling by a mediator in order to overcome conflicts | SWS 3: communication SWS 4: prevention SWS 5: critical incident response | Part II: Staff welfare toolbox Section 4.4 'Mediation' | ✓ | | ✓ | | ✓ | | | ✓ | |
| Structured feedback through surveys/questionnaires | Feedback on well-being, leadership performance, needs, etc. can be obtained using (anonymous) surveys issued by managers or the authority Such surveys are also useful when used for staff who are leaving and by the authority for the purpose of learning | SWS 2: assessment and screening SWS 3: communication SWS 4: prevention SWS 8: monitoring and evaluation | Part II: Staff welfare toolbox Section 2.4 'Quality of employment survey' Part III: Monitoring and evaluation Chapter 3 'Staff welfare quality monitoring package' Annex 4 'Feedback sessions' | ✓ | | ✓ | | ✓ | | | ✓ | ✓ |

| MEASURES | GENERAL DESCRIPTION/ PARTICULAR MEASURE | REFERENCE TO STANDARD(S) | REFERENCE DOCUMENTS PART OF THIS THREEFOLD GUIDE | INITIALISING/ IMPLEMENTING PARTY | | | TARGET GROUP | | PRE-HIRING/ SELECTION PROCESS | ONBOARDING/ PRE- DEPLOYMENT | ONGOING SUPPORT | END/POST-DEPLOYMENT |
|---|--|---|--|--|-----------------------|-------------------------------------|-----------------|------------------------|----------------------------------|--------------------------------|-----------------|---------------------|
| | | | | MANAGER | HR/ ADMINISTRATION | INTERNAL/ EXTERNAL SPECIALIST | MANAGER | FIRST-LINE OFFICERS | | | | |
| Support intervention | | | | | | | | | | | | |
| Focus group discussions | Focus group discussions guided by a moderator should be used when an issue needs to be elaborated at a deeper level than a survey can achieve | SWS 2: assessment and screening SWS 3: communication SWS 4: prevention SWS 8: monitoring and evaluation | Part I: Standards and policy Annex 5 'Staff welfare messaging' Part II: Staff welfare toolbox Chapter 2 'Assessment tools' Annex 17 'Focus group discussion' Part III: Monitoring and evaluation Chapter 3 'Staff welfare quality monitoring package' Annex 4 'Feedback sessions' | ✓ | ✓ | ✓ | ✓ | ✓ | | ✓ | | |
| Psychosocial group sessions / coaching | The engagement of a psychologist can help to detect hidden risks or issues within a group Individual support from a skilled coach/psychologist in order to cope with personal issues at work can also be of benefit | SWS 3: communication SWS 4: prevention SWS 5: critical incident response | Part II: Staff welfare toolbox Section 4.1 'Psychosocial group sessions and coaching' Section 4.2 'Individual counselling sessions' | ✓ | | ✓ | ✓ | | | ✓ | | ✓ |
| Debriefing after deployment or semi-structured interviews | Debriefing by a skilled trainer (e.g. psychologist) in order to assess shortcomings, detect health risks and create space for exchange | SWS 2: assessment and screening SWS 3: communication SWS 4: prevention SWS 5: critical incident response | Part II: Staff welfare toolbox Section 2.2 'Semi-structured one-on-one meetings' Annex 3 'Semi-structured check-ins or one-on-one meetings' | | | ✓ | ✓ | | | | | ✓ |
| | Structured, institutionalised, regular discussions between managers and staff in order to detect shortcomings, risks, etc. are crucial and should commence during onboarding/pre-deployment | SWS 7: safety and security SWS 8: monitoring and evaluation | | | | ✓ | | | | | | |

3. STAFF WELFARE MEASURES AT A GLANCE

| MEASURES | GENERAL DESCRIPTION/ PARTICULAR MEASURE | REFERENCE TO STANDARD(S) | REFERENCE DOCUMENTS PART OF THIS THREEFOLD GUIDE | INITIALISING/ IMPLEMENTING PARTY | | | TARGET GROUP | | PRE-HIRING/SELECTION PROCESS | ONBOARDING/PRE- DEPLOYMENT | ONGOING SUPPORT | END/POST-DEPLOYMENT |
|---------------------------|--|--|---|--|-----------------------|-------------------------------------|-----------------|------------------------|---------------------------------|-------------------------------|-----------------|---------------------|
| | | | | MANAGER | HR/ ADMINISTRATION | INTERNAL/ EXTERNAL SPECIALIST | MANAGER | FIRST-LINE OFFICERS | | | | |
| Self-care activity | | | | | | | | | | | | |
| Pulling-back strategies | Guidance on strategies and exercises for self-application during stressful and critical situations | SWS 4: prevention SWS 5: critical incident response | Part II: Staff welfare toolbox Chapter 5 'Self-care' Annex 12 'Setting boundaries and grounding techniques after a critical incident' | ✓ | ✓ | ✓ | ✓ | ✓ | | | ✓ | |
| Grounding techniques | Relaxation exercises to calm down in a stressful environment | SWS 4: prevention SWS 5: critical incident response | Part II: Staff welfare toolbox Chapter 5 'Self-care' Annex 12 'Setting boundaries and grounding techniques after a critical incident' | ✓ | ✓ | ✓ | ✓ | ✓ | | | ✓ | |
| Burnout test | Self-assessment test made available for all staff (open source) | SWS 4: prevention SWS 5: critical incident response | Part II: Staff welfare toolbox Section 2.5 'Self-assessment: burnout test' Annex 5 'Self-assessment: burnout test' | ✓ | ✓ | ✓ | ✓ | ✓ | | | ✓ | |

| MEASURES | GENERAL DESCRIPTION/ PARTICULAR TRAINING | REFERENCE TO STANDARD(S) | REFERENCE DOCUMENTS PART OF THIS THREEFOLD GUIDE | INITIALISING/ IMPLEMENTING PARTY | | | TARGET GROUP | | PRE-HIRING/ SELECTION | ONBOARDING/ PRE-DEPLOYMENT | ONGOING SUPPORT | END/POST-DEPLOYMENT | |
|--|--|---|--|----------------------------------|--------------------|-------------------------------|--------------|---------------------|-----------------------|----------------------------|-----------------|---------------------|--|
| | | | | MANAGER | HR/ ADMINISTRATION | INTERNAL/ EXTERNAL SPECIALIST | MANAGER | FIRST-LINE OFFICERS | | | | | |
| Capacity building | | | | | | | | | | | | | |
| Safety/security (refresher) training | First aid training | SWS 3: communication SWS 4: prevention SWS 6: capacity building SWS 7: safety and security | Part II: Staff welfare toolbox Chapter 6 'Capacity-building interventions' Section 6.2 'Staff welfare-centred capacity building' Annex 14 'Sample training programme with a focus on staff welfare' | | | | | | | | | | |
| | Briefing and security training (for deployments abroad) | | | | | | | | | | | | |
| | Fire protection instruction | | | ✓ | | | ✓ | | | | ✓ | | |
| | Safety at work, behaviour-based safety, safety culture and safety circle | | | | | | | | | | | | |
| | Anti-fraud, anti-corruption and other related policies (e.g. sexual harassment and exploitation and abuse) | | | | | | | | | | | | |
| (Update and refresher) training in soft skills / coping mechanisms | Stress- management | SWS 3: communication SWS 5: critical incident response SWS 6: capacity building | Part II: Staff welfare toolbox Chapter 6 'Capacity-building interventions' Section 6.2 'Staff welfare-centred capacity building' Annex 14 'Sample training programme with a focus on staff welfare' | | | | | | | | | | |
| | Conflict management | | | | | | | | | | | | |
| | Communication techniques | | | | | | | | | | | | |
| | Intercultural sensitisation | | | | | | | | | | | | |
| | Critical incident management | | | | | | | | | | | | |
| | Team building | | | | | | | | | | | | |
| | Management and leadership within the asylum context | | | ✓ | | | ✓ | | | | ✓ | | |

4. INFORMATION PROVISION



All staff members in the authority should be informed of the staff welfare strategy, the action plan and the monitoring measures put in place. Clear communication channels ensure that staff can, at any time, access and obtain information on how they can benefit from the organisation's well-being policy and mechanisms. SOPs through which staff welfare policy measures are enforced in the work setting should also be made accessible. Having the necessary information at the right time and passing this on to the right staff members in a transparent and clear way is key for effective operations as well as for decision-making purposes at all levels. This also relates to what information is available internally within an authority and how information is communicated and channelled by whom and when.

While the provision of relevant and tailored information in the field of asylum and reception with its changing circumstances is essential, 30 % of respondents are not aware or not sure of any policies in place in their work environment regarding staff welfare-related issues. About 70 % of those respondents are unaware or unsure of these policies and were mainly from asylum and reception authorities, not civil society organisations ⁽⁶¹⁾.

Managers and team coordinators are the link between senior management and first-line officers in an authority. They therefore have a critical role to transfer information on a topic (including on staff welfare) to the team they manage. When an authority has an efficient system of communication in place, all staff benefit and the motivation of first-line officers is boosted.

In addition to ensuring that an organisation's staff welfare strategy is shared with all staff, in particular first-line officers, it is also advised that managers use visual material on the topic and display it appropriately.

Visible staff welfare-related material could include:

- a poster detailing the eight SWSs ⁽⁶²⁾ placed in a prominent place where most staff members would be able to see it;
- basic messages made available and visibly placed in the form of postcards/posters ⁽⁶³⁾ for all staff to see during induction sessions;
- sharing the link to the EASO animation *The importance of early identification of signs of stress* ⁽⁶⁴⁾ with incoming managers and first-line officers.

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

(62) For the eight SWSs in a poster format, refer to Annex 2 'Staff welfare standards (poster)'.

(63) For basic staff welfare messaging, refer to Annex 5 'Staff welfare messaging'.

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

Showing that an authority cares about staff welfare by developing information material and giving visibility to materials on staff welfare demonstrates the commitment made by the employer.

Furthermore, it is recommended that managers have access to relevant information related to staff welfare. This can be supported by the HR and IT departments.

Every manager should have access to a staff welfare information folder containing the following.

- An updated staff welfare strategy PDF file to share with incoming staff, including information on the main tools/activities promoted by the authority on the topic and contact details (an up-to-date email address), detailing how to access services, make enquiries and issue a complaint relating to staff well-being.
- Checklists and SOPs on critical incident management, including a contact list of relevant personnel responsible for follow-up with affected staff.
- Relevant information material on staff welfare and self-care.
- A general and updated contact list of internal/external ⁽⁶⁵⁾ specialists supporting staff well-being. These specialists are vetted by the HR department to support staff in need. The list of contacts includes:
 - internal members of the established teams (e.g. collegial support / integrated incident team) and other professionals providing individual support when needed;
 - the name(s) and telephone number(s) of the security and safety officer(s) and any medical doctor(s) the authority contacts when the need arises.

If the authority is able to use internal professionals to provide counselling support, for example a staff counsellor or stress management team, their contact details are shared with staff members.

If only external support is available, a vetting exercise by the HR department of a minimum of two or three professionals is advised. The HR department will consider their training background (e.g. basic knowledge of the work-related challenges of staff working the field of asylum and reception). Language, age, gender and cultural background should also be taken into consideration to ensure the diversity of the professionals available to provide support and a successful follow-up of the staff member in need. External professionals do not need to always be available for in-person meetings. Remote meetings using video calls or telephone calls can be considered useful alternatives where needed to ensure a smooth and timely follow-up. This is particularly relevant when a workplace is in a remote location or other challenges ⁽⁶⁶⁾ arise.

⁽⁶⁵⁾ These contacts will have a memorandum of understanding to ensure timely follow-up with a staff member in need without any bureaucratic hurdles. This should particularly be the case in the event of critical incidents.

⁽⁶⁶⁾ For example, in cases of restricted movement due to security or health concerns.

ANNEXES



ANNEX 1. DEFINITIONS

This guide uses **staff welfare** ⁽⁶⁷⁾ as an umbrella term referring to policies and measures directed at the well-being of employees, understood in both the physical and emotional senses. Staff welfare relates to maintaining health and safety in every aspect related to work. To this end, employers evaluate the **risks** staff may be exposed to in the work environment and put in place preventative and protective measures, such as ensuring that each staff member has received the necessary health and safety **information** and **training**.

Well-being ⁽⁶⁸⁾ at work is understood as physical health and moral and social fulfilment, not just absence of accidents or occupational illnesses. Positive aspects of well-being at work include self-acceptance, autonomy, enthusiasm, professional development, purpose, positive relationships with others and personal growth ⁽⁶⁹⁾.

Stress ⁽⁷⁰⁾ is defined in terms of dynamic interactions between the individual and their environment. It is often inferred by the existence of a problematic person–environment fit and the emotional reactions that underpin those interactions.

Work-related stress ⁽⁷¹⁾ occurs when pressure due to work demands and other work-related stressors becomes excessive and prolonged in relation to one’s perceived resources, capabilities and skills to cope.

There is a distinction between the concepts of **work-related stress** and **challenges at work** ⁽⁷²⁾. Experiencing challenges in one’s work can energise a person psychologically and physically and encourage them to learn new skills. Feeling challenged by one’s work is an important ingredient in developing and sustaining a psychologically healthy work environment. On the other hand, feeling stressed involves a negative psychological state with cognitive and emotional components that affect the [health of both the individual and the organisation](#).

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

(67) Your Europe, ‘[Health and safety at work](#)’, 2020.

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

(69) ‘[Growth and transformation](#)’, *In Practice: The EAWOP Practitioners E-Journal*, No 12, 2020, p. 17. Although happiness and the feeling of well-being at work are, in part, linked to individual income, there are other contributing factors. At a certain point, level of happiness and life satisfaction no longer relate to income level.

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

(71) EU-OSHA, ‘[Work-related stress: nature and management](#)’, OSHwiki, 2015.

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

Examples include [chronic fatigue](#), [compassion fatigue](#), [burnout](#), [vicarious trauma](#), [musculoskeletal problems](#) and [cardiovascular disease](#).

Compassion fatigue ⁽⁷³⁾ refers to a shift in a person's ability to feel empathy for the individuals they work with and/or colleagues as well as family members. A first-line officer might suffer from compassion fatigue as a result of years of exposure to the traumatic stories that applicants share, which can start sounding the same to the officer and no longer elicit a reaction.

Burnout ⁽⁷⁴⁾ describes an individual's psychological response to chronic stressors at work. Although it is not regarded as a medical condition, it can influence [health status](#) and potentially requires clinical attention. Burnout is also conceptualised as a crisis in the relationship with work in general.

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

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

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

Vicarious trauma ⁽⁷⁵⁾ can be summarised as the 'cost of caring'. Vicarious trauma can be described as an intense reaction and experiencing of trauma symptoms by persons who are exposed to someone else's traumatic experiences. This often affects officials working with applicants in the context of asylum. Vicarious trauma is cumulative, and a process that unfolds over time. It describes a shift in a person's world view. For individuals experiencing vicarious trauma, it becomes difficult to set boundaries with the applicants they work with. Leaving the office at the end of the day is difficult. It can also lead to a loss of meaning and hope.

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

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

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

Psychological risks ⁽⁷⁶⁾ refer to the likelihood that work-related psychosocial hazards will have a negative impact on staff health and safety through their [perceptions and experience](#). Psychosocial hazards concern aspects of the design and management of work, and its social and organisational contexts that have the potential for causing psychological or physical harm. Psychological risks have been identified as one of the [major contemporary challenges](#) for occupational health and safety. Psychological risks are linked to workplace problems, such as work-related stress and workplace violence and harassment (also referred to as bullying). Negative outcomes on an individual level include [poor health and well-being](#), and [problems with interpersonal relationships](#), both at the [workplace and in the individual's private life](#).

Work–life balance ⁽⁷⁷⁾ involves satisfaction and good functionality at work, as well as at home, with minimal conflicts between an individual's roles. In the achievement of work–life balance, three core, interconnected components should be considered: (1) 'time balance', which refers to equal time being given to work and non-work roles, (2) 'involvement balance', which refers to equal levels of psychological involvement in work and family (non-work) roles, and (3) 'satisfaction balance', which refers to equal levels of satisfaction in work and family (non-work) roles.

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

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

First-line officers could be:

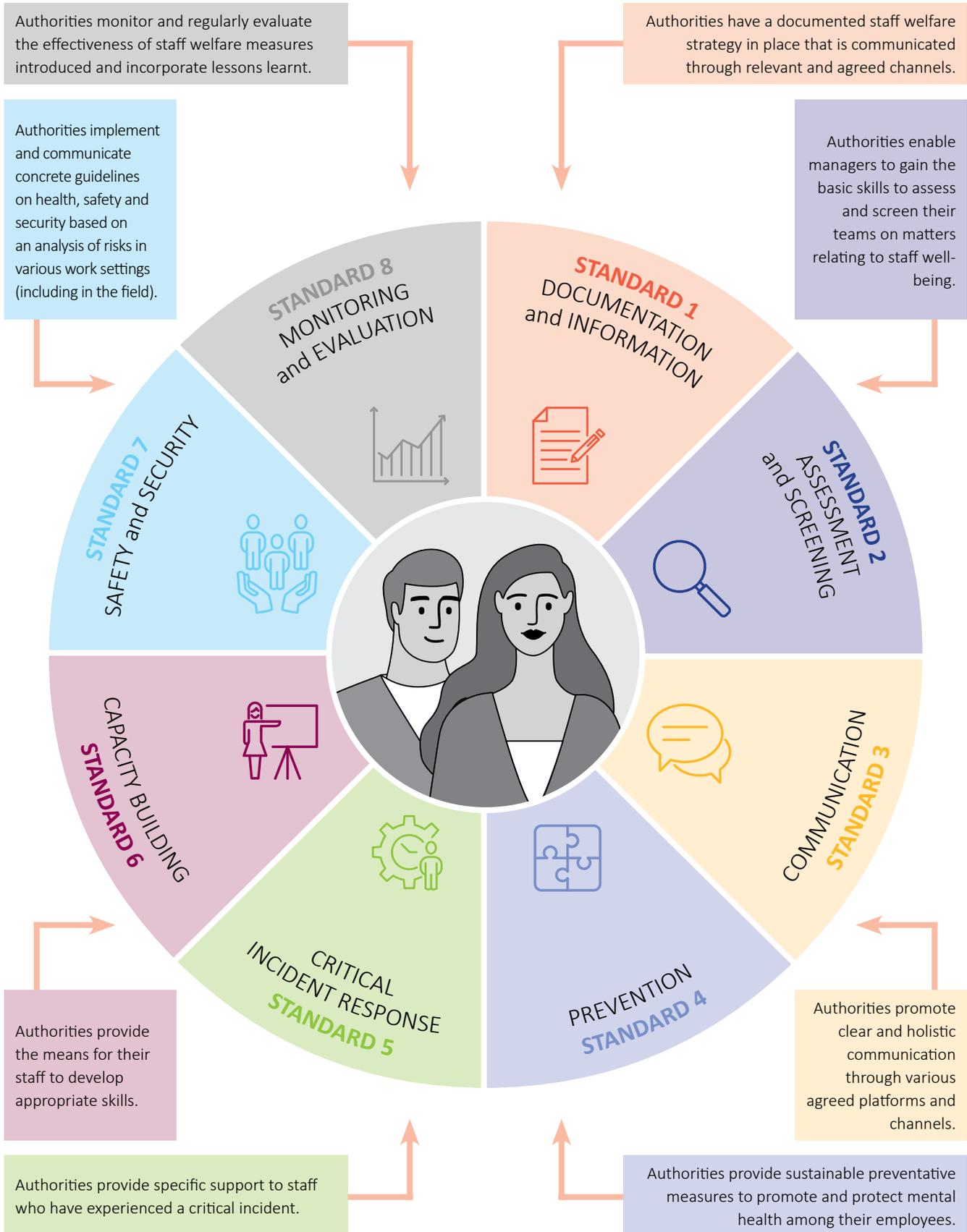
- **reception officers** – the staff providing support in reception facilities;
- **registration officers** – the staff in the national competent authorities who are involved in any stage of the registration and lodging of applications;
- **case officers** – the officers involved in conducting personal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

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

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

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

ANNEX 2. STAFF WELFARE STANDARDS



ANNEX 3. STAFF WELFARE STRATEGY TEMPLATE

The main considerations to cover in a staff welfare strategy/policy are indicated below.

Title. As agreed by the authorities and the team developing the policy/strategy. Examples include 'Staff welfare strategy' and 'Staff welfare policy'.

Foreword. Endorsement by senior management.

Vision/mission. A brief paragraph describing the authority's overarching vision that drives the staff welfare strategy. For example, to enable staff to lead healthy and productive professional lives, to reach and maintain their full potential in the workplace, and to deliver high-quality service for the benefit of applicants for international protection.

Brief introduction. This part includes a general description of why this staff welfare strategy/policy was developed (e.g. commitment to the employees) and the development process. Staff welfare guidance recommends designing staff welfare strategies based on an analysis of a needs assessment conducted with staff and management.

Definition. How is staff welfare in the authority/team understood? Refer to the EASO *Practical guide on the welfare of asylum and reception staff* for inspiration.

Objectives. The objectives of the strategy to be operationalised through concrete activities/measures. For reference, consult [Section 2.1 'Staff welfare policy standards'](#), which recommends the main standards and benchmarks of a comprehensive staff welfare policy in the field of asylum and reception. The staff welfare strategy and the objectives to achieve it are most suitable when based on a prior staff needs assessment. The objectives will be the starting point of the action plan (see [Annex 4 'Staff welfare action plan and risk assessment templates'](#)).

Target groups. Who is the strategy/policy for? For example, the strategy is aimed at management and other staff employed in the EU+ country authority/department/location. The policy covers all staff members (permanent, pensionable, contractual, etc.). This section could also include, as bullet points, brief explanations of the following information.

- **How will this strategy benefit staff and managers?** This should be specified with respect to the needs assessments conducted.

- **Core values.** The general core values of the authority and the staff members are integrated, for example:
 - integrity
 - professionalism
 - creativity
 - teamwork
 - inclusivity
 - respect and dignity.

Obligations and expectations. This paragraph covers the obligations of management (e.g. to ensure that the policy is implemented for the benefit of all employees) and those of all other staff, particularly first-line officers (e.g. participation in staff welfare activities offered, playing a proactive role in planning their own self-care).

General staff welfare measures. These are the staff welfare benefits and entitlements available to all staff members throughout the employment cycle (e.g. provision of regular one-on-one meetings with line managers, regular administration of employment satisfaction survey, training / personal development).

Specific staff welfare measures. This covers specific support provided by the authority to managers and first-line officers in particular. The *EASO Practical guide on the welfare of asylum and reception staff* can be used as inspiration regarding activities to propose (e.g. a stress management team in place to follow up on affected staff, ensuring relevant refresher training sessions on the topic are provided to staff).

Support flow chart(s). This section details the support services available in a simple way, including reporting mechanisms. Telephone numbers are made available to staff members in preparation for any critical incidents that may occur.

Safety and security. This section covers the specific elements related to the safety of staff at the various work sites. This could entail regular checks of reception centres / interview rooms by staff from the safety and security department(s) to ensure that staff members are safe. This also includes public workspaces as well as regular maintenance of office cars, availability of walkie-talkies where needed and regular security briefings. These briefings could cover any health measures put in place in the event of a public health crisis (e.g. Ebola, COVID-19). This section also covers special arrangements for staff working in reception facilities, including closed reception facilities, as well as staff working at night. This section must also include the conducting of a risk assessment that includes staff welfare-related concerns. Measures to prevent and respond to critical incidents need to be included here.

Additional considerations around staff well-being. Link the staff welfare strategy to the authority's/organisation's general HR strategy where standard elements of this HR strategy relate to staff well-being. This could include entitlements to regular lunch/meal breaks, for example, and/or other breaks (also including areas where meals can be safely provided, purchased or consumed). Holiday arrangements and encouraging staff to take all the leave days to which they are entitled are also included in this section. The possible introduction of rest and recuperation days could also be included.

Workplace violence and anti-(sexual) harassment prevention. If there is no anti-(sexual) harassment policy in place, then guidance should be provided here to ensure that all staff members are reminded of the code of conduct they signed when joining, as well as their obligation to treat each other, and the population they serve, with respect. A breach of the code of conduct should be reported and addressed accordingly through the appropriate internal channels and complaint mechanisms in place.

Monitoring and evaluation. Monitoring and evaluation, and the tools in place to enable these activities, are an integral part of the strategy. They ensure regular assessment of its implementation, the relevance of the strategy to the needs of staff and the formulation of amendments.

Disclaimer. The staff welfare strategy in this guidance strictly relates to welfare of staff in the field of asylum and reception. It is not to be confused with a fully fledged HR strategy to deal with all aspects and components of HR management. A staff welfare strategy, however, could be integrated into or conceptualised in alignment with the broader HR strategy of the asylum and reception authority/organisation.

The staff welfare strategy/policy is translated into an action plan informed by input from staff after a needs assessment has been conducted. It captures activities that are already in place and are perceived as useful by staff, and includes recommended activities in line with resources available in the authority. The staff welfare action plan is to be developed based on the objectives and measures delineated in the staff welfare strategy. All activities proposed should be aligned with the staff welfare strategy's objectives, and be realistic and measurable. The action plan is accessible to all staff.

ANNEX 4. STAFF WELFARE ACTION PLAN AND RISK ASSESSMENT TEMPLATES

STAFF WELFARE ACTION PLAN DESCRIPTION AND TEMPLATE

The staff welfare action plan provides reference to and a brief summary of the objectives, target groups and measures laid down in the staff welfare strategy. The action plan will need to take into account the budget available for the actions proposed.

In line with the staff welfare objectives for the period 20XX–20XX, the XX authority sets out the 20XX annual staff welfare action plan as detailed in the template below.

| OBJECTIVE 1: PREVENTION AND REDUCTION OF WORK-RELATED STRESS | | | | |
|---|--|--|----------------------------------|-------------------------------|
| Action | Responsible department | Implemented by (staff category, internal/external) | Target group | Time frame and frequency |
| Supervision | HR and linked staff welfare committee, for example | Staff welfare counsellor or external specialist, for example | First-line officers | Once a month and upon request |
| OBJECTIVE 2: PROMOTION OF SMOOTH COMMUNICATION AND PRODUCTIVE TEAM DYNAMICS | | | | |
| Action | Responsible department | Implemented by (staff category, internal/external) | Target group | Time frame and frequency |
| Team-building activities | HR | Team-building professionals (in-house or external) | First-line officers and managers | Twice a year |
| OBJECTIVE 3: PROMOTION OF WORK–LIFE BALANCE | | | | |
| Action | Responsible department | Implemented by (staff category, internal/external) | Target group | Time frame and frequency |
| Corporate sports | HR | External professionals (on work premises) | All staff | Twice a week |

Risk assessment description and template

In general, risks can be regarded as internal (such as inadequate staffing or a lack of training courses provided; these risks are normally easier to mitigate), or external. It is less likely that external risks can be addressed, and it might not be possible to address them, such as in cases of sudden large numbers of arrivals of applicants for international protection or a public health pandemic. Both internal and external risk assessments might follow a similar logic in terms of approach, but this depends on the local and internal risk assessment tools in place. A basic example of the documentation and logic to use when focusing on internal risks is provided below.

Internal risks. The first column indicates potential risk factors identified by senior management and first-line officers. All relevant team members are to be engaged on a regular basis to provide feedback on emerging risks and needs. The second column indicates **high (H), medium (M) or low (L)** risk. The third column suggests activities that can mitigate the risk. The fourth column explains who is responsible for following up on these activities to ensure mitigation, and the fifth column indicates the timing.

| INTERNAL RISKS | | | | |
|---|---------------|--|--|--|
| RISK FACTORS IDENTIFIED | LEVEL OF RISK | CONTROLS TO MINIMISE RISK | WHO IS RESPONSIBLE? | WHEN IS THE MITIGATION EFFORT TO BE CONDUCTED? |
| Staff are not aware of what is expected of them regarding critical/security incidents | M | <ul style="list-style-type: none"> — HR and safety and security officers (supported by managers) explain to all staff the policies, tools and reporting lines in place — The channels used to communicate such policies differ depending on the needs/access of staff to be informed (online or in-person meetings, etc.) — Policies and leaflets are made available to all staff (electronically as well as in hard copy) — Staff who indicate their specific interests in staff welfare-related issues and particular critical incident management are provided with the necessary training — Trained staff are encouraged to volunteer as focal persons on critical incidents and how they are managed | HR department and safety and security department with the support of senior management | <ul style="list-style-type: none"> — During induction all staff are introduced to the SOPs on critical incident management — During deployment staff are involved in refresher sessions on critical incident management — Updates to the SOPs (or other measures) are communicated on an ongoing basis |
| First-line officers are regularly engaged in ad hoc activities outside working hours because of high influx of applicants | H | <ul style="list-style-type: none"> — Line managers develop a clear rotation schedule that allows all staff to take breaks, weekends off and annual leave in accordance with national procedure and contract — In collaboration with HR department, a clear protocol is developed on how to recover and recuperate over time (e.g. introduction of rest and recuperation cycles during times of high influx) — A roster of professionals is created to support core team members in their duties during high influx times | HR department in collaboration with senior managers | <ul style="list-style-type: none"> — As part of the regular contingency-planning activities, rotation schedules are updated (managers/HR department) — HR policy on rest and recuperation and other benefits is communicated during induction — Contact details / availability of experts placed on internal rosters are regularly updated (HR department) |

Assessing the risks that staff members face on a regular basis through semi-structured interviews or focus group discussions helps to prevent severe problems being experienced by staff in the long run. It is recommended that managers reach out to and gather information from staff on a regular basis ⁽⁷⁸⁾.

(78) Refer to Part III: Monitoring and evaluation, Section 3.3 'Staff welfare progress monitoring (Tool 3)'.

ANNEX 5. STAFF WELFARE MESSAGING

Staff welfare messages are best formulated as the outcome of a staff welfare need and risk assessment and consultation with staff. The messages need to be relevant and might differ according to staff category. What might be useful for first-line officers might not be as useful for a senior manager and vice versa. Therefore, developing the messages jointly with the respective staff members is advised. Staff welfare messages should be reviewed regularly to be timely and tuned to staff welfare priorities identified as relevant at that time. Making use of the advice of external professionals on the content and visualisation of messages may also be considered. The examples below serve as a starting point of discussion. Each authority is advised to formulate messages, in its own language, that are relevant, concise, compelling and inviting. It is also advised that staff welfare messages are carefully and creatively presented to facilitate understanding and reach by taking into account diversity within the target group (in terms of work tasks, age, gender, cultural background, family composition, etc.).

(A) SUGGESTIONS FOR GENERAL STAFF WELFARE MESSAGING INTRODUCING THE STAFF WELFARE STRATEGY

Example format: leaflet.

Example title: ‘Our internal staff welfare strategy at a glance’.

| CARE OFFERS FROM YOUR EMPLOYER | EXAMPLES TO INSERT TO ILLUSTRATE THE MAIN POINTS |
|---|---|
| You are proactively supported by the HR department; safety, security and training policies; your line manager; and your peers. In this leaflet, you can find advice on whom to contact for various types of support | List one example for the staff category indicated and a contact for more information. For example: <ul style="list-style-type: none"> — the HR department is responsible for communicating policies on rest and recuperation, lists of the contact details of support teams (stress management team, staff counsellor, email address for sharing concerns around welfare-related issues, etc.) — line managers, in collaboration with the safety and security department, are responsible for communicating the SOP on critical incident management |
| We will inform you of how you can proactively engage in capacity-building support to improve identification of your own warning signs of stress and burnout | List some examples of capacity-building interventions and a contact from which staff can get more information: training on how to acknowledge signs of stress, leadership skills, etc. |
| It is important to find a good work–life balance by setting healthy boundaries and by taking all the annual leave you are entitled to | Your work is important but your personal life is important as well. Meet friends and spend time with family, ensure you take regular exercise, take your annual leave (entitlements are between XX days and XX days). To find out more, contact XX |
| Although we will inform you of the important policies to consider in your daily work, it is also your responsibility to familiarise yourself with these policies (staff welfare, code of conduct, anti-(sexual) harassment, etc.) | <ul style="list-style-type: none"> — Find our code of conduct here (insert link to website) — Find our anti-(sexual) harassment policy here (insert link to website) — Find our staff welfare strategy here (insert link to website) If the documents are not available online, insert the contact details of the person who can provide the hard copy of the documents |

| CARE OFFERS FROM YOUR EMPLOYER | EXAMPLES TO INSERT TO ILLUSTRATE THE MAIN POINTS |
|--|--|
| As your employer, we have a crucial role to play to keep you safe and enable you to work professionally. You also have certain responsibilities to look after yourself | Self-care is important. The following activities will help maintain your health when practised regularly: <ul style="list-style-type: none"> — take regular walks, try yoga or other sports, have a healthy diet, and stay away from soft drinks, too much alcohol or use of other substances (e.g. nicotine) — schedule annual health check-ups |
| Actively engage in activities offered and provide constructive feedback on what works for you, what does not and why | We currently offer: <ul style="list-style-type: none"> — educational supervision (specify when this is available) — individual counselling upon request (contact XX) — monthly team meetings For suggestions or feedback please use the following email address: XX |

(B) SUGGESTIONS FOR COVERING A PARTICULAR TOPIC, USING THE EXAMPLE OF BURNOUT

It is recommended to develop simple information blocks that address the main concerns raised by staff in a simple and concise way. These information blocks capture the following as a minimum.

- **What** are we talking about (definition)?
- **How** can we identify the problem (explanation of the problem and what causes it)?
- **What** needs to / can be done (action plan capturing suggestions for prevention and response)?

Formats in which to share such information blocks could include:

- printed leaflets or postcards;
 - an assigned section of the authority's website;
 - sharing various information blocks as part of a communication strategy.
- **Example 1.** Quarter 1 focuses on stress, and each month a message on the topic is communicated by email to all staff. Quarter 2 focuses on communication. Quarter 3 focuses on respectful and transparent communication. Quarter 4 focuses on the need for good leadership.
 - **Example 2.** A specific month is allocated to highlight the importance of well-being at work and, depending on the main priorities identified, training, messages and information sessions are provided.

EXAMPLE: INFORMATION BLOCK ON BURNOUT

What is burnout?

Burnout describes an individual's psychological response to chronic stressors at work. Although it is not regarded as a medical condition, it can influence your general health and may require clinical attention. Burnout is also conceptualised as a crisis in your relationship with work in general ⁽⁷⁹⁾.

What are the warning signs of burnout?

- **Physical signs.** Exhaustion (feeling tired and drained), loss of appetite and/or a change in sleeping habits.
- **Emotional signs.** Cynicism, a negative outlook and loss of motivation, including a lack of empathy.
- **Intellectual signs.** Reduction in professional efficacy and inability to be proactive or take necessary decisions.
- **Behavioural signs.** Use of negative coping mechanisms, such as overeating, skipping meals, increased consumption of alcohol and arriving at work late.

What are the causes of burnout?

Burnout results mainly from chronic occupational stress. This includes work overload and extreme pressure, loss of control over deadlines, poor social support and uncertain future professional development.

How to prevent and address burnout

- **Reflect.** What are the main causes of the stress you are currently experiencing?
- **Examine.** How do I deal with stress generally?
- **Replace.** What negative coping mechanisms do I use? Can they be replaced with positive actions? If so, what?

Support. Looking at the above, do I need to reach out to someone for support? This could be someone internal or external. If yes, contact XX.

(79) See the definitions provided in Annex 1 'Definitions'.

ANNEX 6. RECRUITMENT INTERVIEW GRID TEMPLATE

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

Role: insert position

Candidate:

Introduction

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

| INTERVIEW QUESTIONS | KEY INDICATORS | EVIDENCE SCORED AGAINST INDICATORS FROM CANDIDATE'S RESPONSE (INDICATE IF FULLY MET (10 POINTS), PARTLY MET (5 POINTS) OR NOT MET (0 POINTS)) |
|--|---|---|
| Key area 1: motivation | | |
| Can you tell us your motivation for applying for this job? What will make this role different from what you have done before, and how will you equip yourself for this change? What are your career plans for the next 5 years? | Examples of indicators <ul style="list-style-type: none"> — Demonstrates a good understanding of the scope of the role and is able to identify the personal challenges that it represents — Explains their motivation for the job — Desires to work in the field of asylum/migration — Has experience of developing programmes — Develops and encourages new and innovative solutions | Comment: Final score: |
| Key area 2: work ethics and results orientation (related values: accountability, creativity and integrity) (reveals how the candidate approaches dilemmas and solves problems, and their ability to self-criticise and learn from experience) | | |
| Please share some examples of how you have demonstrated your work ethic and results-oriented behaviours. These examples should demonstrate the impact your work ethic and results-oriented behaviours have had on colleagues and/or staff under your direct management | Examples of indicators <ul style="list-style-type: none"> — Holds themselves accountable for achieving results — Holds themselves accountable for delivering on their responsibilities, provides the necessary development support to improve performance and applies appropriate measures when results are not achieved — Engages and motivates others — Refers to the importance of team building — Refers to the importance of regular communication with team members as well as constructive individual feedback — Values diversity; sees it as a source of competitive strength | Comment: Final score: |

| INTERVIEW QUESTIONS | KEY INDICATORS | EVIDENCE SCORED AGAINST INDICATORS FROM CANDIDATE'S RESPONSE (INDICATE IF FULLY MET (10 POINTS), PARTLY MET (5 POINTS) OR NOT MET (0 POINTS)) |
|---|--|---|
| Key area 3: stress management and self-care | | |
| For the role you are applying for, you will be required to deliver on time and to a high level of quality and accuracy. How do you feel about this and what is your experience of production targets with tight deadlines when potentially simultaneously trying to handle competing priorities? | <p>Examples of indicators</p> <ul style="list-style-type: none"> — Holds themselves, in addition to team members, accountable for achieving results — Refers to proper planning — Refers to delegation and prioritisation — In case of lack of knowledge on a matter, requests additional development training — Overtime possible where needed, but not on a regular basis (work–life balance) | <p>Comment:</p> <p>Final score:</p> |
| Please give us an example of when you had to work on a difficult assignment and/or deal with a rather uncooperative colleague in your view and how you solved this situation | <p>Examples of indicators</p> <ul style="list-style-type: none"> — Importance of the team — Timely and appropriate request for additional expertise — Participatory approach in planning the respective task/assignment — Ability to provide clear instructions — Early communication with staff members to avoid misunderstanding of tasks and timelines | <p>Comment:</p> <p>Final score:</p> |
| What do you normally do when you feel under pressure or stress? Refer to areas you feel you manage well and areas where you think you have room to improve your approach | <p>Examples of indicators</p> <ul style="list-style-type: none"> — Sets appropriate boundaries with colleagues — Realistic planning — Healthy lifestyle (e.g. engaging in regular physical activity) — Ensures work–life balance — Not ashamed to ask for help | <p>Comment:</p> <p>Final score:</p> |
| Imagine you enter the reception facility (for reception officers) or the interview room (for case workers) and an applicant approaches you with a razor blade in their hand saying that they will try to kill themselves if they receive a negative decision on their application. This is a difficult scenario but please try to suggest what you think you could/should do to de-escalate the situation | <p>Example responses</p> <ul style="list-style-type: none"> — Generally, I would have familiarised myself with information on critical incident management provided by my employer, the dos and don'ts, and I would be aware of the SOPs in place in these cases — I would try to keep a calm voice — I would try not to panic and would talk calmly, ensuring that I keep a safe distance from the applicant — I would try not to turn away from the applicant and would maintain eye contact — I would indicate that I can hear that they are very upset and afraid and that I would like to better understand. For that, we need to sit down and take time, and they need to put the razor blade away — I would ask if they would like a sip of water. This could also provide an opportunity to ask for help | <p>Comment:</p> <p>Final score:</p> |

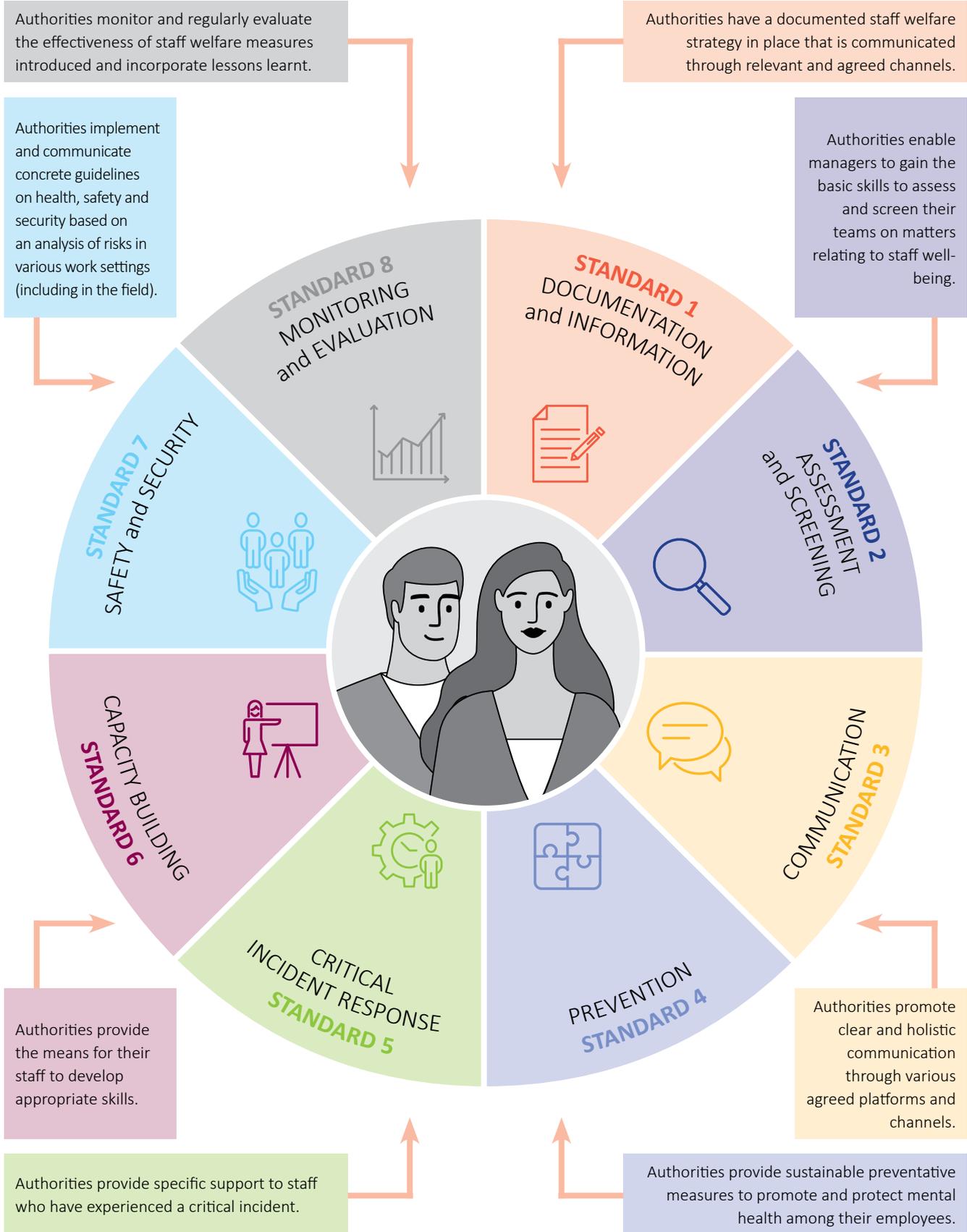
| INTERVIEW QUESTIONS | KEY INDICATORS | EVIDENCE SCORED AGAINST INDICATORS FROM CANDIDATE'S RESPONSE (INDICATE IF FULLY MET (10 POINTS), PARTLY MET (5 POINTS) OR NOT MET (0 POINTS)) |
|---|---|---|
| Key area 4: code of conduct | | |
| A staff member reports to you (reception centre manager) that they have a suspicion that another staff member is potentially abusing a young person, as they were seen bringing the young person to their office regularly and closing the door. What action would you take and whom would you involve? | Examples of indicators <ul style="list-style-type: none"> — Recognition that this is a serious allegation and should be followed up immediately using internal/appropriate reporting channels — Zero-tolerance policy regarding sexual abuse/harassment (which includes beneficiaries of applicants for international protection) | Comment: Final score: |
| Overall score | | |

Closing

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

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

STAFF WELFARE STANDARDS



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