



EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

Requested by FI EMN NCP on 28th June 2017

Protection

Responses from [Austria](#), [Belgium](#), [Croatia](#), [Cyprus](#), [Czech Republic](#), [Estonia](#), [Finland](#), [France](#), [Germany](#), [Ireland](#), [Italy](#), [Latvia](#), [Lithuania](#), [Luxembourg](#), [Malta](#), [Netherlands](#), [Slovak Republic](#), [Slovenia](#), [Sweden](#), [United Kingdom](#), [Norway](#) (21 in total)

Disclaimer:

The following responses have been provided primarily for the purpose of information exchange among EMN NCPs in the framework of the EMN. The contributing EMN NCPs have provided, to the best of their knowledge, information that is up-to-date, objective and reliable.

Note, however, that the information provided does not necessarily represent the official policy of an EMN NCPs' Member State.

EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

Background information:

In the beginning of February 2017, the Finnish Immigration Service (FIS) has launched an 18-month AMIF-project called “Quality management – a systematic approach for evaluating and creating statistics on the quality of asylum decision making.”

The key tasks of the project are to:

- 1) develop a method(s) for evaluating the quality of asylum decision making (such as a standardized form you might use to conduct evaluations) in the first instance.
- 2) Develop the appropriate tools to create visual statistics on possible quality challenges.

The emphasis of the project is to improve and standardize the quality of asylum decision-making already in the first instance. One important aspect of the project is to apply statistical tools in a more visual manner (eg. by using dashboards) in order to see in which areas exactly the possible quality challenges might be. Therefore, it would be important to benchmark practices from other member states in order to have a realistic implementation plan and gain a better understanding of possible quality methods already in place.

The project has begun with two best practices visits (Sweden and the Netherlands) and with creating a standardized form for quality auditing. One essential part of the project is to conduct a questionnaire on quality auditing methods and possible statistical tools used for reporting the audit results in other European asylum, immigration and reception authorities. The project receives 75% of its funding from the EU’s Asylum, Migration and Integration Fund (AMIF).

Summary

1. Are you currently measuring quality in some way (eg. implementing quality audits) or using any other quality control methods in your asylum?

There is a **wide range of different quality control mechanisms or methods** used by EMN MS’s, based on different national practices, some of which are used by several MS’s, whereas others are not. Quality assurance in the first instance can be directed to the written decisions as well as to the interviews or other parts of the Refugee Status Determination process. The replies can be roughly broken down into yes and no -categories as follows, although this division is by no means exhaustive. Some parts of the replies have been quoted and highlighted below to illustrate the main points for sharing best practices among EMN MS’s.

Yes (AT, EE, FI, FR, DE, LT, LU, MT, SK, SE, UK, NO):

EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

AT: Regular quality audits of asylum decisions are usually carried out through **audits of written decisions** in the respective units of the authority (regional directorates, branch offices and first reception centres). To the extent necessary, also units of headquarters of the asylum authority are involved in audits of written decisions.

EE: The quality of the process is assessed via **general internal auditing system** of the Police and Border Guard Board. For instance in 2016 an ad hoc quality audit was carried out concerning one case involving several applications and people. According to the conclusions of the audit some propositions on practical amendments were made concerning the process. In 2012 **a general overall audit** of the asylum process was carried out. From 2009 to 2015, one senior asylum officer of the asylum unit was responsible for the quality of interviewing, COI usage and decision making. The duties involved creating practical tools for caseworkers, providing case by case support and monitoring, including review and co-signing of all the decisions. **Interview skills** of the case workers were regularly supported, monitored and assessed. EASO quality tools, training materials and other relevant materials like Further Developing Quality, CREDO Project etc. were used as a base for setting criteria and giving feedback on the quality. Also the **peer review** was effectively used, especially when training new employers. Regular weekly meetings of caseworkers took place to share experiences, discuss complex cases and further standardizing quality. Close co-operation with translators and interpreters were made, also by sharing relevant practical tools in use and giving feedback.

FI: We have a **yearly legal quality audit plan** that we follow. In a typical year, at least one randomly selected written asylum decision is chosen from each case worker and screened according to a form based on the UNHCR's FDQ form. The results of the audit are then handed back to the case worker and when some clear challenges or problematic areas arise, trainings and discussions are held based on these for all decision makers. Also, the asylum interviews are being audited with a similar logic: team leaders randomly select interviews which they then attend filling in a standard quality form during the interview. Asylum decisions are also made under two names, which also aims at assuring and standardizing quality.

LT: A throughout **evaluation of the quality of asylum decisions** in Lithuania was **implemented by the UNHCR in 2016**. The audit produced the report "Improving the Quality of Asylum Decisions in Lithuania". The objective of the project was to assess and assist decision - making process, the quality of decisions on international protection and to promote introduction of a sustainable asylum quality mechanism in the first instance. The project covered both the accelerated and normal procedures and focused on the applicability of the relevant provisions of the Lithuanian Aliens' Law, interviewing techniques, use of evidence, legal argumentation, including country of origin information, and the internal and external credibility assessment. The project also addressed other factors which may influence decision quality, such as legal representation, interpretation services, adequate staff training and quality control mechanism. Quality assessment tools and recommendations for asylum quality mechanism in Lithuania were developed during the project. Currently, **quality management is done by analysing court rulings** in which the decisions of the Migration department are **challenged and superseded**. This practice provides for ensuring quality control and adherence to EU and international standards in the asylum process.

EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

LU: After a decision has been written, it is usually **proof-read** by one or several other decision makers, depending on the severity of the case. The quality is not measured as such. However, all interviewers and decision takers need to **accomplish the pertinent trainings proposed by EASO** and regularly participate in other trainings in order to ensure the quality of their work.

MT: Quality management within the Office of the Refugee Commissioner is institutionalized through a centralized method whereby all applications closed by the Office on a weekly basis are currently being **reviewed and approved by the Refugee Commissioner** to ensure the quality and consistency of the product. To date no implementing quality audits have been made and none are foreseen for the near future.

SK: The quality of decision-making is assessed through evaluation of fulfilment of **criteria listed in the Form for quality assessment** of first-instance decision on asylum application. This Form was prepared **together with UNHCR in 2011** based on the audit of decisions on individual asylum applications.

SE: The Legal Department conducts **legal quality audits each year**. We use different methods to conduct the audits. In order to assess if we have a high legal quality and uniform case handling in our six operational regions (on a national level) we use a method called national quality audit with a regional focus. **A large number of cases are reviewed. A wide range of questions are examined.** The other method is called thematic quality audit. This method is used when we need to make a **deeper analysis regarding one or a few questions/theme**. There are also **routines for evaluation on a unit-level**: The SMA has internal routines on what methods can be used on the assessment units to evaluate the quality of the work of the case officers and decision makers. According to these routines a coach, usually the team leaders of the unit, shall on a regularly basis sit with the co-workers in the team when they are investigating the needs of the applicant. The SMA has a form for coaching at investigations which the sit down of the team leader should be based on. The purpose of the sit down is to give **feedback and coaching** on the co-workers job and how he or she can get improve. The co-worker shall also fill in the **form for self-evaluation**, both evaluating investigation and decision making. There are also routines on how the team leader can follow up and give feedback on the co-workers decision making. The team leader chooses the cases for the evaluation, written by the co-worker. Then they both review the cases using the form for self-evaluation. The purpose of the evaluation of the co-workers decision making is to give feedback and coaching and discuss how she/he can get improve in her/his job. There is also a routine for evaluation of decisions which can be made in the whole team. The team leader chooses a decision, with the consent of the writer of the decision, to evaluate in the team. It might be a case of a more complicated character to trigger the discussions.

UK: UKVI quality management operates within a **three-line assurance model**: First line assurance: Decision sampling conducted by senior caseworkers in Asylum operational teams. Assessments are conducted on asylum interviews and (more commonly) decisions. A combination of assessment types are conducted by first line assurors, including **routine (random) assessments** and **‘thematic’ assessments of high risk claim types**, as informed by UKVI policy and world events.

EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

Second line assurance: Independent sampling and thematic reviews **conducted by the Assurance and Compliance Team**. This team is semi-independent. It sits within the Operational Assurance and Security Unit (a unit which is not within the Asylum Operations command structure and which operates across all UKVI operational areas). The role of this team is to monitor, support and evaluate first line assurance across UKVI operational teams; to support the identification of risks and issues by conducting targeted assurance activity and in depth thematic reviews; monitor and assess compliance against any second or third line assurance recommendations. In order to monitor first line assurance activity, Asylum decisions (and accompanying interviews) are assessed by this team of independent assurers. Thematic reviews are conducted on specific claim types, decision types, specific processes etc. Secondary checks are also conducted on decisions already assessed by first line assurers, in order to evaluate and improve consistency of first line practices. All first and second line assessments are conducted using marking standards which were devised and agreed with the operational business areas and asylum policy unit, and informed by the UNHCR. All assessments are completed on our purpose built Excel tool (QATRO – see question 2), which enables production of a feedback template which is shared with the decision maker (and their manager) to promote learning and recognise good practice. The assessment is submitted to a database which enables reporting/evaluation on wider themes and patterns.

Third line assurance: Third line assurance is conducted by a range of fully independent third parties including the Home Office Internal Audit Unit and the Independent Chief Inspector of Borders and Immigration whose role is to monitor and report of the efficiency and effectiveness of the performance of UKVI and other immigration functions. Full details can be found at <http://icinspector.independent.gov.uk/>.

NO: The Norwegian Directorate of Immigration (UDI) has a **multi-level approach to quality measurement**: The Asylum Department conducts a **yearly quality check for every case worker** employed there. Yearly quality assessments are conducted in all UDI's areas of responsibility. These are coordinated by the Analysis and Development Department - AUA. The assessments are based on a revision method and random sampling of cases under a case portfolio selected for scrutiny by the different Departments (Asylum Dept., Immigration and Citizenship Dept., Reception Dept.), e.g. “single women from X”, or “unaccompanied minors”. Scrutiny is done by senior officers with good knowledge of the portfolio. Responsibility for the assessment and analysis method lies with the Statistics and analysis unit (ESA under AUA) and the general coordination (planning, completion and reporting) is under the Regulations Unit (RVE under AUA).

The number of cases under scrutiny for each portfolio is based on a **pre-evaluation of risk** by the responsible Department. Low or medium-risk portfolios usually require a **minimum sample of 25 cases and above**, while **high-risk portfolio requires 60 cases**. Scrutineers go through the cases in search of **deviations from established quality standards**. Significant deviation means that the outcome of the case is not correct, or that the case has not been given a thorough process. Deviations are constantly communicated to the coordinator. If one significant deviation is found, the number of cases will be increased to enhance the robustness of the assessment. If more than two significant deviations are found, there is no need to enlarge the scrutiny. The result is promptly communicated to the Asylum Department to study and implement measures to ensure better quality.

EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

AUA is responsible for finalizing a report which is sent to the Asylum Department, which gives comments that include possible steps for quality improvements. AUA reports both the results of the assessments, the comments received and the steps to be taken for improvements to the Director General.

Ongoing quality control on asylum decisions: Decisions in asylum cases are generally subjected to a double check before they are finalized. The decision is usually **signed by two case workers**, the one responsible for considering the merits of the case and the second, usually a senior case worker, is mostly responsible for double-checking. Case workers are generally responsible for interviewing as well as considering the merits of the case. The Directorate offers the possibility that s/he may request the presence of an experienced officer (the Interview Coordinator designated for each geographic region) for observation during interview.

No (HR, CY, SI).

2. Are you currently using any visual tools (such as dashboards) to produce or report statistics on decision quality or possible quality challenges? If so, please report which tool is used for this purpose?

Yes (FR, DE, SE, UK).

No (CY, EE, FI, LT, MT, SK, SI, NO)*.

N/A: AT, HR, LU.

*NB. Various MS's reported on **producing visual aids/graphics** such as charts and/or diagrams eg. via Excel.

3. Does your organization have a separate quality unit or who conducts the quality control?

Again, there are various different national practices in how quality control is being managed within the national systems or organizations - also combinations of a separate unit in collaboration with operational units and/or the UNHCR seem to be in place.

Yes, separate unit: AT, FR, DE, SE, UK, NO.

AT: In the Federal Office for Migration and Asylum, a separate department "Quality Development and Training" has been established. This department is in charge for quality development and quality control. In addition, there is a network of "quality auditors" consisting of lawyers employed in the

EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

Directorate, the regional directorates, the branch offices and the first reception centres. There are regular meetings of all quality auditors and the persons responsible for quality management.

FR: One person in charge of co-ordinating quality management.

DE: Division 232 Asylum Quality Assurance in the BAMF-headquarter and quality promoters/assurer in every branch office.

SE: The Quality Department is responsible to follow up the standards and guidelines of their own production such as administrative routines and the flow of cases in the different processes. The Legal Department is responsible for evaluating the legal quality of the assessments. The Legal Department conducts the audits and not a separate unit.

UK: Please see the response to question 1. The Assurance and Compliance Team within UKVI performs an assurance function which is independent of the operational business areas, while also working with the business to identify and mitigate risks and improve consistency of assurance.

NO: The yearly quality assessments are administered by the AUA's Regulations Unit (RVE) and carried out by the Asylum Department (ASA), on the basis of the quality standards set by the department for interviews and decisions.

No separate unit: HR, CY, EE, FI, LT, LU, MT, SK, SI.

4. Are public reports published on the results of the quality audits? What about internal reports?

Yes, public reports are published (HR, FR, SE, UK, NO).

Yes, internal reports are published (AT, FI, DE, SK).

No reports are published internally or externally (CY, EE, SI, MT).

N/A: LT, LU.

5. Have you found any best practices when it comes to measuring quality in the field of asylum decision-making? And in improving and standardizing quality?

Several best practices were mentioned, including the following:

EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

Continuous work in improving and steering quality matters, cooperation in this field with other MS's; Standardized quality measurement forms, constant training of staff; Enabling feedback, Providing instructions and guidelines for case workers.

Internal newsletters with recommendations for decision-makers, checklists on decisions for decision-makers.

Monthly Quality Reviews undertaken and reports produced; Feedback to staff of relevant findings; Guidelines revised or reissued as necessary.

Template decisions (that need to be updated constantly) can help in unifying the structure of decisions and avoid clerical errors.

Thorough analysis of the rulings in which the decisions of the Migration department regarding asylum are challenged and superseded.

Putting the results of quality measurements into practice.

Evaluating the quality methods themselves on a regular basis: learning from other authorities. Creating the quality methods in conjunction with the case-working units.

Ongoing evaluation of assurance has driven an evolution from random sampling to a combination of random sampling and risk based assurance, which enables the delivery of greater value by identifying best practice and making practical recommendations based on qualitative data, particularly in claim types which pose a greater risk to the claimants, the public and the organisation.

The secondary check process (whereby second line assurers re-assesses a decision already assessed by first line assurers) enables the identification of areas for improving consistency and efficiency to create a more robust first line of assurance. We conduct regular consistency meetings between first and second line assessors to drive consistency and continuous improvement. Engaging with first line assurers assessors on a regular basis to discuss assessments, improve awareness of the assurance process and to ensure prompt action is taken to rectify any significant errors or risks. Representation of the national organization at EASO (European Asylum Support Office) Working Groups to devise and implement quality tools and guidance for use by all EU+ states.

Quality methods might be developed with support from external advice (primarily on the sampling procedure) and experience.

6. Do you have external quality audits in place conducted by eg. the UNHCR or another external actor?

Yes (AT, EE, FR, DE, LT, UK, NO, SI).

No (HR, CY, FI, LU, MT, SK, SE).

EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance


External audits were **typically performed on certain themes or on an ad hoc-basis**. Most responses highlighted close collaboration with the UNHCR in the area of improving and making quality consistent.

The external auditors mentioned were the following: The National Court of Audit, the UNHCR, IOM, Quality experts from other MS's, thematic audits conducted in cooperation with the UNHCR, Quality initiative projects, Independent Chief Inspector of Borders and Immigration (UK), third parties such as 'Freedom from Torture' (UK), external researchers.


Questions

1. Are you currently measuring quality in some way (eg. implementing quality audits) or using any other quality control methods in your asylum decision-making in the first instance?
2. Are you currently using any visual tools (such as dashboards) to produce or report statistics on decision quality or possible quality challenges? If so, please report which tool is used for this purpose?
3. Does your organization have a separate quality unit or who conducts the quality control?
4. Are public reports published on the results of the quality audits? What about internal reports?
5. Have you found any best practices when it comes to measuring quality in the field of asylum decision-making? And in improving and standardizing quality?
6. Do you have external quality audits in place conducted by e.g. the UNHCR or another external actor?

Responses

	Country	Wider Dissemination	Response
	Austria	Yes	<p>1. Regular quality audits of asylum decision are usually carried out through audits of written decisions in the respective units of the authority (regional directorates, branch offices and first reception centers). To the extent necessary, also units of headquarters of the asylum authority are involved in audits of written decisions. Source: Federal Ministry of the Interior.</p> <p>2. In this regard, no specific information is available. Source: Federal Ministry of the Interior.</p> <p>3. Yes. In the Federal Office for Migration and Asylum, a separate department „Quality Development and Training” has been established. This department is in charge for quality</p>





EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>development and quality control. In addition, there is a network of “quality auditors” consisting of lawyers employed in the Directorate, the regional directorates, the branch offices and the first reception centers. There are regular meetings of all quality auditors and the persons responsible for quality management. Source: Federal Ministry of the Interior.</p> <p>4. The results of quality audits are recorded in internal reports. Source: Federal Ministry of the Interior.</p> <p>5. The Federal Office for Migration and Asylum works continuously on the improvement of measures and comprehensive steering. Source: Federal Ministry of the Interior.</p> <p>6. In the area of quality management, in the framework of quality projects the Federal Office for Migration and Asylum works closely and successfully with IOM and UNHCR. Source: Federal Ministry of the Interior.</p>
	<p>Belgium</p>	<p>Yes</p>	<p>1. Background information: In the coalition agreement from December 2011, the Belgian government committed to enhance the efficiency of the asylum procedure, both in terms of timeliness and quality of decisions issued by the concerned authorities. The government also announced that a permanent monitoring would be put in place. As required by the above-mentioned agreement, the Belgian government tasked Deloitte in 2012 to carry out an external audit among the three Belgian asylum entities, namely the Immigration Office, the Office of the Commissioner General for Refugees and Stateless Persons and the Council for Aliens Law Litigation. The audit aimed to improve several aspects of the asylum procedure, including (i) reducing the length of the procedure, (2) optimizing the processing time and (iii) strengthening the quality. In March 2013, the results of the audit were presented in the House of Representatives. Deloitte concluded that Belgium scored high both in terms of efficiency and quality. 47 measures were identified to further improve the work of the Office of the Commissioner General for Refugees and Stateless Persons. The measures were grouped in 6 areas, one of these focused on quality management to continue to guarantee and standardize the handling of asylum applications. On this basis, various actions were implemented, e.g. internal working groups were created to identify shortcomings and possible improvements, quality standards and indicators were further examined, a quality guide for the processing of</p>


EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>asylum applications was presented to protection officers, visits are organized in other Member States to gather good practices. The process is ongoing. Answer: The Office of the Commissioner General for Refugees and Stateless Persons provides for a systematic “quality control” of all asylum decisions. All decisions prepared by protection officers are reviewed by supervisors and, when applicable, by responsible persons for minor, gender or public order related issues. As from 2016, protection officers follow a “quality guide” for the processing of asylum applications and a similar guide is being developed for supervisors. However the quality is not currently measured or audited in some other way. In the future, a quality unit will be put in place. The unit, which should start to operate in the Office of the Commissioner General for Refugees and Stateless Persons in 2018, will qualitatively monitor and quantitatively measure to what extent quality standards are being enforced and develop actions (training, coaching etc.) to further improve quality.</p> <p>2. No. Not currently but the asylum decision-making entities are very interested in developing such tools.</p> <p>3. Not yet. As mentioned above, a quality unit will be put in place. The unit, which should start to operate in the Office of the Commissioner General for Refugees and Stateless Persons in the beginning of 2018, will qualitatively monitor and quantitatively measure to what extent quality standards are being enforced and develop actions (training, coaching etc.) to further improve quality.</p> <p>4. Reports elaborated in the framework of the audit from 2012 and further work developed on this basis (mainly produced by working groups), as well as the quality guide for protection officers were not publically released. There are meant for internal purposes.</p> <p>5. As mentioned above, the Office of the Commissioner General for Refugees and Stateless Persons developed a "quality guide" which helps improve and standardize the quality by:</p> <ul style="list-style-type: none">• Clarifying roles and responsibilities (protection officer – supervisor)• Determining quality criteria (to ensure decisions of high quality)• Including the content of training modules• Incorporating links to all necessary internal guidelines
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EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			6. No
	Croatia	Yes	<p>1. There are no quality audits or other mechanisms of measuring quality in asylum decision-making process in first instance.</p> <p>2. There are internal records which are used to keep track of decisions number, type and other relevant information.</p> <p>3. No.</p> <p>4. Public reports, just like internal reports are based on internal records.</p> <p>5. Improving and standardising quality is based cooperation with other member states and implementation of best practices.</p> <p>6. There are no external quality audits.</p>
	Cyprus	Yes	1 – 6. No
	Czech Republic	No	This EMN NCP has provided a response to the requesting EMN NCP. However, they have requested that it is not disseminated further.
	Estonia	Yes	<p>1. Currently Estonia does not use any specific quality control methods. The quality of the process is assessed via general internal auditing system of the Police and Boarder Guard Board. For instance in 2016 an ad hoc quality audit was carried out concerning one case involving several applications and people. According to the conclusions of the audit some propositions on practical amendments were made concerning the process. In 2012 a general overall audit of the asylum process was carried out. From 2009 to 2015, one senior asylum officer of the asylum unit was responsible for the quality of interviewing, COI usage and decision making. The duties involved creating practical tools for caseworkers, providing case by case support and monitoring, including review and co-signing of all the decisions. Interview</p>


EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>skills of the case workers were regularly supported, monitored and assessed. EASO quality tools, training materials and other relevant materials like Further Developing Quality, CREDO Project etc. were used as a base for setting criteria and giving feedback on the quality. Also the peer review was effectively used, especially when training new employers. Regular weekly meetings of caseworkers took place to share experiences, discuss complex cases and further standardizing quality. Close co-operation with translators and interpreters were made, also by sharing relevant practical tools in use and giving feedback.</p> <p>2. No.</p> <p>3. No.</p> <p>4. No.</p> <p>5. N/A</p> <p>6. There have been two external audits on the decision making quality during the period of last 10 years carried out by the UNHCR. In cooperation with IOM the project was carried out during 2011 involving quality experts from 4 different Member States, auditing the process and the quality of the decisions and interviews.</p>
	<p>Finland</p>	<p>Yes</p>	<p>1. We have a yearly legal quality audit plan that we follow. In a typical year, at least one randomly selected written asylum decision is chosen from each case worker and screened according to a form based on the UNHCR's FDQ form. The results of the audit are then handed back to the case worker and when some clear challenges or problematic areas arise, trainings and discussions are held based on these for all decision makers. Also, the asylum interviews are being audited with a similar logic: team leaders randomly select interviews which they then attend filling in a standard quality form during the interview. Asylum decisions are also made under two names, which also aims at assuring and standardizing quality.</p>





EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>2. No, not at the moment. But in this project we aim to produce statistics on the issues which are most problematic for the case-workers. This would be done by filling in an electronic standardized quality form in an application called Surveypal, and then operate the data with the IBM Cognos statistics program, which would allow statistics to be created based on the results of the filled forms. When a large number of forms are filled, their results can then be numerically observed.</p> <p>3. The Asylum Unit's Legal and Support Services conducts the quality control among other tasks. Now, in the project, we are trying an approach where different regional offices around the country conduct quality audits in each other's decisions in a randomly selected manner.</p> <p>4. No public reports are published on the findings, but an internal report is written and then used for the purposes of planning training sessions, group discussions and supporting decision makers in a more precise manner.</p> <p>5. A standardized form helps in identifying quality bottlenecks in a systematic way. The form should not be too long and there can't be much space for interpretation on the content of the form: certain quality criteria either exists or it doesn't. It can be quite challenging to develop such a form though. Constant trainings in the most problematic areas, constant feedback to the decision-makers and drafting example decisions have proven to be quite effective. We haven't found very good methods for evaluating and improving challenges such as variation in the quality of interpretations in the asylum interviews though.</p> <p>6. No, not at the moment. We discuss our own quality observations with key stakeholders but there is no systematic external auditing currently in place.</p>
	<p>France</p>	<p>Yes</p>	<p>1. Yes.</p> <p>2. Yes. A number of tables, graphs and histograms are included in the annual report and its annexes (see</p>


EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>https://ofpra.gouv.fr/sites/default/files/atoms/files/rapport_dactivite_ofpra_2016_1.pdf - in French)</p> <p>3. Yes. There is one person in charge of organizing quality control operations. However in-house evaluations are carried out by members of the middle management and experienced case officers.</p> <p>4. Yes. Reports are made public (see: https://www.ofpra.gouv.fr/fr/documents-utiles - in French). For the time being, there are no ‘internal reports’ that would be kept unpublished.</p> <p>5. Yes. The system has been designed with the purpose of enabling ‘feedback’ into practice and training. Some of the lessons learned from quality control have been transposed into instructions and guidelines for case officers.</p> <p>6. Yes. The personal interviews and decisions included in the sample scrutinized for the purpose of quality control are evaluated in parallel by members of OFPRA middle management and by experts (acting on behalf) of UNHCR.</p>
	<p>Germany</p>	<p>Yes</p>	<p>1. The BAMF(Federal Office for Migration and Refugees) division 232 Asylum Quality Assurance is measuring quality within quality audits. The branch offices use brief overviews (Kurzübersichten) to assure quality.</p> <p>2. Statistic on decision quality and possible quality challenges is provided within internal reports to the management level . At the moment there is no special tool available (but there will be changes in the frame of the Quality Offensive).</p> <p>3. Division 232 Asylum Quality Assurance in the BAMF-headquarter and quality promoters/assurer in every branch office</p> <p>4. The reports are used only for internal purposes.</p>



EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>5. Best practices to improve quality : internal newsletter with recommendations to the decision-maker. Best practices to improve and standardize quality: checklists on decisions for the decision-maker</p> <p>6. In the past several thematic audits had been conducted in cooperation with UNHCR.</p>
	Ireland	No	This EMN NCP has provided a response to the requesting EMN NCP. However, they have requested that it is not disseminated further.
	Italy	Yes	<p>1. Yes, since 2015 the National Commission for the Right to Asylum and UNHCR have been involving in a quality monitoring project through a direct observation of the Territorial Commissions' activities and by checking their decisions remotely.</p> <p>2. So far we have not been using any visual tools.</p> <p>3. yes</p> <p>4. There are not public reports but only internal ones</p> <p>5. Yes, we have identified some best practices.</p> <p>6. We do not have external quality audits, as our monitoring processes are carried out in collaboration with UNHCR.</p>
	Latvia	No	This EMN NCP has provided a response to the requesting EMN NCP. However, they have requested that it is not disseminated further.
	Lithuania	Yes	1. A throughout evaluation of the quality of asylum decisions in Lithuania was implemented by the UNHCR in 2016. The audit produced the report "Improving the Quality of Asylum Decisions in Lithuania". The objective of the project was to assess and assist decision - making process, the quality of decisions on international protection and to promote introduction of a


EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>sustainable asylum quality mechanism in the first instance. The project covered both the accelerated and normal procedures and focused on the applicability of the relevant provisions of the Lithuanian Aliens' Law, interviewing techniques, use of evidence, legal argumentation, including country of origin information, and the internal and external credibility assessment. The project also addressed other factors which may influence decision quality, such as legal representation, interpretation services, adequate staff training and quality control mechanism. Quality assessment tools and recommendations for asylum quality mechanism in Lithuania were developed during the project. Currently, quality management is done by analysing court rulings in which the decisions of the Migration department are challenged and superseded. This practice provides for ensuring quality control and adherence to EU and international standards in the asylum process.</p> <p>2. No</p> <p>3. No</p> <p>4. N/A</p> <p>5. As a good practice Lithuania can mention the throughout analysis of the rulings in which the decisions of the Migration department regarding asylum are challenged and superseded. This practice provides for ensuring quality control and adherence to EU and international standards in the asylum process.</p> <p>6. Yes, UNHCR conducted an external audit in 2012.</p>
	<p>Luxembourg</p>	<p>Yes</p>	<p>1. After a decision has been written, it is usually proof-read by one or several other decision makers, depending on the severity of the case. The quality is not measured as such. However, all interviewers and decision takers need to accomplish the pertinent trainings proposed by EASO and regularly participate in other trainings in order to ensure the quality of their work.</p> <p>2. No. N/A.</p>


EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>3. No.</p> <p>4. N/A.</p> <p>5. N/A. N/A.</p> <p>6. No.</p>
	Malta	Yes	<p>1. Quality management within the Office of the Refugee Commissioner is institutionalized through a centralized method whereby all applications closed by the Office on a weekly basis are currently being reviewed and approved by the Refugee Commissioner to ensure the quality and consistency of the product. To date no implementing quality audits have been made and none are foreseen for the near future.</p> <p>2. No.</p> <p>3. Kindly refer to the answer provided for question 1.</p> <p>4. No quality audits or internal reporting on the quality of decisions at a first instance level have currently been made or are foreseen in the near future.</p> <p>5. Kindly refer to the answer provided for question 1.</p> <p>6. No.</p>
	Netherlands	No	<p>This EMN NCP has provided a response to the requesting EMN NCP. However, they have requested that it is not disseminated further.</p>
	Slovak Republic	Yes	<p>1. The quality of decision-making is assessed through evaluation of fulfilment of criteria listed in the Form for quality assessment of first-instance decision on asylum application. This Form</p>


EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>was prepared together with UNHCR in 2011 based on the audit of decisions on individual asylum applications.</p> <p>2. No measurable indicators are used during quality assessment. The aim of the inspection is not to create a graph or table with measurable indicators but to find out whether the criteria according to the Form for quality assessment of first-instance decision on asylum application are met in each individual decision and to eliminate shortages.</p> <p>3. There is no separate quality unit within the Migration Office of the Ministry of Interior, there is one employee of the procedural department responsible for the quality check once in half a year and this person reports to his/her superior.</p> <p>4. The report on the results of the quality audit is not published, it is solely an internal report of the Migration Office and it is communicated to a certain extent to the case workers during staff meetings of the procedural department.</p> <p>5. The Slovak Republic has also created a standardized form for quality auditing. This has been marked as good practice as since its introduction some shortages have been eliminated and thus the practice met its objective. Currently, there have been no major changes planned in this area.</p> <p>6. The external audit was carried out by the UNHCR in 2011 within the project FDQ based on which the above mentioned Form was prepared. Since then, neither the UNHCR staff nor any other external actors participate in the quality audits. It is solely carried out internally by the Migration Office.</p>
	<p>Slovenia</p>	<p>Yes</p>	<p>1. No</p> <p>2. No</p> <p>3. No</p>

EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>4. No</p> <p>5. No</p> <p>6. Yes. External quality audits are conducted by Court of Audit of the Republic of Slovenia and also UNHCR.</p>
	<p>Sweden</p>	<p>Yes</p>	<p>1. The Legal Department conducts legal quality audits each year. We use different methods to conduct the audits. In order to assess if we have a high legal quality and uniform case handling in our six operational regions (on a national level) we use a method called national quality audit with a regional focus. A large number of cases are reviewed. A wide range of questions are examined. The other method is called thematic quality audit. This method is used when we need to make a deeper analysis regarding one or a few questions/theme. There are also routines for evaluation on a unit-level: The SMA has internal routines on what methods can be used on the assessment units to evaluate the quality of the work of the case officers and decision makers. According to these routines a coach, usually the team leaders of the unit, shall on a regularly basis sit with the co-workers in the team when they are investigating the needs of the applicant. The SMA has a form for coaching at investigations which the sit down of the team leader should be based on. The purpose of the sit down is to give feedback and coaching on the co-workers job and how he or she can get improve. The co-worker shall also fill in the form for self-evaluation, both evaluating investigation and decision making. There are also routines on how the team leader can follow up and give feedback on the co-workers decision making. The team leader chooses the cases for the evaluation, written by the co-worker. Then they both review the cases using the form for self-evaluation. The purpose of the evaluation of the co-workers decision making is to give feedback and coaching and discuss how she/he can get improve in her/his job. There is also a routine for evaluation of decisions which can be made in the whole team. The team leader chooses a decision, with the consent of the writer of the decision, to evaluate in the team. It might be a case of a more complicated character to trigger the discussions.</p>

EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>2. We use external survey tool in order to create statistical reports. We use different tools from year to year because of our rules regarding procurement.</p> <p>3. The Quality Department is responsible to follow up the standards and guidelines of their own production such as administrative routines and the flow of cases in the different processes. The Legal Department is responsible for evaluating the legal quality of the assessments. The Legal Department conducts the audits and not a separate unit.</p> <p>4. The reports are public. We have a legal management board that decides which activities need to be conducted after an audit. The board have members from the Legal Department, the Quality Department, the HR Department and from our Department of Operations. As a main rule all documents produced by the SMA is official. With the exception of what falls under the secrecy law.</p> <p>5. We evaluate our methods on a yearly basis and share and look at best practices in this field. We look at other authorities and sometimes at practices in other states. We have an ongoing project called "Analysera rätt - för en ökad kvalitet i tillståndsprövning" which is co-funded by AMIF. This project will focus on creating audit methods that is going to be used by the units. This method is created for the units so that the units can look at their on cases regarding work permit or family reunification (a smaller number) in order to assess the legal quality at the unit and use the result for the daily learning.</p> <p>6. We do not have any external audits in place.</p>
	<p>United Kingdom</p>	<p>Yes</p>	<p>1. UKVI quality management operates within a three-line assurance model: First line assurance: Decision sampling conducted by senior caseworkers in Asylum operational teams. Assessments are conducted on asylum interviews and (more commonly) decisions. A combination of assessment types are conducted by first line assurors, including routine (random) assessments and ‘thematic’ assessments of high risk claim types, as informed by UKVI policy and world events. Second line assurance: Independent sampling and thematic reviews conducted by the Assurance and Compliance Team. This team is semi-independent. It sits within the Operational Assurance and Security Unit (a unit which is not within the Asylum</p>


EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>Operations command structure and which operates across all UKVI operational areas). The role of this team is to • monitor, support and evaluate first line assurance across UKVI operational teams • to support the identification of risks and issues by conducting targeted assurance activity and in depth thematic reviews • monitor and assess compliance against any second or third line assurance recommendations In order to monitor first line assurance activity, Asylum decisions (and accompanying interviews) are assessed by this team of independent assurers. Thematic reviews are conducted on specific claim types, decision types, specific processes etc. Secondary checks are also conducted on decisions already assessed by first line assurers, in order to evaluate and improve consistency of first line practices. All first and second line assessments are conducted using marking standards which were devised and agreed with the operational business areas and asylum policy unit, and informed by the UNHCR (see response to question 6 below). All assessments are completed on our purpose built Excel tool (QATRO – see question 2), which enables production of a feedback template which is shared with the decision maker (and their manager) to promote learning and recognise good practice. The assessment is submitted to a database which enables reporting/evaluation on wider themes and patterns. Third line assurance: Third line assurance is conducted by a range of fully independent third parties including the Home Office Internal Audit Unit and the Independent Chief Inspector of Borders and Immigration whose role is to monitor and report of the efficiency and effectiveness of the performance of UKVI and other immigration functions. Full details can be found at http://icinspector.independent.gov.uk/.</p> <p>2. A purpose built Excel toolkit is used to collate and analyse first and second line assurance data which can then be used to report quality statistics internally and externally.</p> <p>3. Please see the response to question 1. The Assurance and Compliance Team within UKVI performs an assurance function which is independent of the operational business areas, while also working with the business to identify and mitigate risks and improve consistency of assurance.</p> <p>4. One annual report is produced for public consumption which includes quality data. Internally, reports are generated on a monthly basis using Excel and Powerpoint. Additionally, The Assurance and Compliance Team extract data to supplement qualitative reports on</p>
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EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>thematic topics throughout the year. Key findings of thematic reviews are used to develop recommendations. The thematic reports are distributed internally to the Directors and operational leads for the relevant business areas as appropriate. The recommendations are routinely followed up to check on progress/responses to them. The reports of the Independent Chief Inspector of Borders and Immigration are available publically and can be accessed using the link provided in response to question1.</p> <p>5. Ongoing evaluation of assurance has driven an evolution from random sampling to a combination of random sampling and risk based assurance, which enables us to deliver greater value by identifying best practice and making practical recommendations based on qualitative data, particularly in claim types which pose a greater risk to the claimants, the public and the organisation. The secondary check process (whereby second line assurors re-assesses a decision already assessed by first line assurors) enables us to identify areas for improving consistency and efficiency to create a more robust first line of assurance. We conduct regular consistency meetings between first and second line assessors to drive consistency and continuous improvement. We also engage with first line assurors assessors on a regular basis to discuss assessments, improve awareness of the assurance process and to ensure prompt action is taken to rectify any significant errors or risks. Two members of the Assurance and Compliance Team are representing UKVI at EASO (European Asylum Support Office) Working Groups to devise and implement quality tools and guidance for use by all EU+ states. The quality tools used by UKVI have been shared in the working group on quality assurance tools, including a representative from FIS: Daniel Kaspar (Daniel.Kaspar@migri.fi)</p> <p>6. The Assurance and Compliance Team was created in 2007 in response to UNHCR recommendations. UNHCR work closely with the Home Office to support improvements in the quality and efficiency of the asylum system, including undertaking thematic audits of asylum decisions. They produce detailed reports with recommendations designed to deliver improvements across a range of topics. However in addition to the Home Office Internal Audit Unit, external reviews are conducted by the Independent Chief Inspector of Borders and Immigration and also by third parties such as 'Freedom from Torture'.</p>
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EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

	<p>Norway</p>	<p>Yes</p>	<p>1. The Norwegian Directorate of Immigration (UDI) has a multi-level approach to quality measurement:</p> <ul style="list-style-type: none"> • The Asylum Department conducts a yearly quality check for every case worker employed there • Yearly quality assessments are conducted in all UDI's areas of responsibility. These are coordinated by the Analysis and Development Department - AUA. The assessments are based on a revision method and random sampling of cases under a case portfolio selected for scrutiny by the different Departments (Asylum Dept., Immigration and Citizenship Dept., Reception Dept.), e.g. “single women from X”, or “unaccompanied minors”. Scrutiny is done by senior officers with good knowledge of the portfolio. Responsibility for the assessment and analysis method lies with the Statistics and analysis unit (ESA under AUA) and the general coordination (planning, completion and reporting) is under the Regulations Unit (RVE under AUA). The number of cases under scrutiny for each portfolio is based on a pre-evaluation of risk by the responsible Department. Low or medium-risk portfolios usually require a minimum sample of 25 cases and above, while high-risk portfolio requires 60 cases. Scrutineers go through the cases in search of deviations from established quality standards. Significant deviation means that the outcome of the case is not correct, or that the case has not been given a thorough process. Deviations are constantly communicated to the coordinator. If one significant deviation is found, the number of cases will be increased to enhance the robustness of the assessment. If more than two significant deviations are found, there is no need to enlarge the scrutiny. The result is promptly communicated to the Asylum Department to study and implement measures to ensure better quality. AUA is responsible for finalizing a report which is sent to the Asylum Department, which gives comments that include possible steps for quality improvements. AUA reports both the results of the assessments, the comments received and the steps to be taken for improvements to the Director General. • Ongoing quality control on asylum decisions: Decisions in asylum cases are generally subjected to a double check before they are finalized. The decision is usually signed by two case workers, the one responsible for considering the merits of the case and the second, usually a senior case worker, is mostly responsible for double-checking. • Case workers are generally responsible for interviewing as well as considering the merits of the case. The Directorate offers the possibility that s/he may request the presence of an experienced officer (the Interview Coordinator designated for each geographic region) for observation during interview.
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EMN Ad-Hoc Query on Quality Management best practices within the field of asylum decision-making in the first instance

			<p>2. No</p> <p>3. The yearly quality assessments are administered by the AUA's Regulations Unit (RVE) and carried out by the Asylum Department (ASA, on the basis of the quality standards set by the department for interviews and decisions.</p> <p>4. The results of the quality assessments are published on the Directorate's intranet site In addition, reports are communicated to the Director General and to the Ministry of Justice, and are available to the public upon request.</p> <p>5. See our answer to question 1. These procedures were arrived at through some external advice (primarily on the sampling procedure) and experience. See e.g. General principles for quality in immigration cases: https://udiregelverk.no/no/rettskilder/udi-rundskriv/rs-2010-109/#_Toc248033423 Quality measurement in the Norwegian Directorate of Immigration (in Norwegian): https://udiregelverk.no/en/documents/udi-internal-practices/im-2014-013/ Classification of deviance: https://udiregelverk.no/PageFiles/10103/IM%202014-013V4.pdf</p> <p>6. There have been several projects which involved both researchers and UDI staff members, e.g. a project analysing the use of credibility assessment in asylum cases. Projects are initiated and followed by UDI's Research and Development Network, a network coordinated by a senior officer in AUA. A current R&D project is focused on reception centres, but aspects of asylum procedures have been analysed whenever the Directorate identified the need for a focused approach. Reports from relevant R&D projects (mostly in Norwegian) can be found on https://www.udi.no/en/statistics-and-analysis/research-and-development-reports/</p>
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