Consolidated Annual Activity Report 2021

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EUROPEAN UNION
AGENCY FOR ASYLUM

Consolidated Annual Activity Report (CAAR) 2021

Adopted by the Management Board on 22 June 2022

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[1]   Commission Delegated Regulation (EU) 2019/715 on the framework financial regulation for the bodies set up under the TFEU and Euratom Treaty and referred to in Article 70 of Regulation (EU, Euratom) 2018/1046 of the European Parliament and of the Council (OJ L 122, 10.5.2019, p. 1)

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List of abbreviations

AD	Administrator
AIP	Asylum Intervention Pool
AO	Authorising officer
AST	Assistant
BC	Business continuity
BCP	Business continuity plan
CA	Commitment appropriations *(used in a financial context)*
CA	Contract agent *(used in a human resource context)*
CAAR	Consolidated Annual Activity Report
CEAS	Common European Asylum System
CF	Consultative Forum
COI	Country of origin information
CONT Committee	European Parliament's Committee on Budgetary Control
CSO	Civil society organisation
DG HOME	Directorate-General for Migration and Home Affairs
DG NEAR	Directorate-General for Neighbourhood and Enlargement Negotiations
DGMM	Directorate General of Migration Management, Turkey
EAIPS	EASO Asylum Intervention Pool System
EASO	European Asylum Support Office
ECA	European Court of Auditors
ED	Executive Director
EEAS	European External Action Service
EMN	European Migration Network
EP	European Parliament
EPS	Early Warning and Preparedness System
ERDMS	Electronic Records and Document Management System
EU	European Union
EU+	EU Member States and associate countries
EU-FRANK	Facilitating Resettlement and Refugee Admission through New Knowledge project
eu-LISA	European Agency for the Operational Management of Large-Scale IT Systems in the Area of Freedom, Security and Justice
EUAA	European Union Agency for Asylum

EUAN	EU Agencies Network
Eurostat	Statistical Office of the European Union
EURTF	European Regional Task Force
EXO	Executive Office
FG	Function Group
FRA	European Union Agency for Fundamental Rights
Frontex	European Border and Coast Guard Agency
FTE	Full-time equivalent
GDISC	General Directors' Immigration Service Conference
HR	Human resources
IAS	Internal Audit Service
IC	Internal control
ICC	Internal control coordinator
ICF	Internal control framework
ICS	Internal control system/standard
ICSA	Internal control self-assessment
ICRS	Internal Control and Risk Management Sector
IDS	Information and documentation system
IGC	Intergovernmental Consultations on Migration, Asylum and Refugees
IOM	International Organization for Migration
IPA	Instrument for Pre-accession Assistance
ISAA	Integrated Situational Awareness and Analysis
JHA	Justice and Home Affairs
JHAAN	Justice and Home Affairs Agencies Network
KPI	Key performance indicator
LAL	List of available languages
LIBE	Committee on Civil Liberties, Justice and Home Affairs, European Parliament
LMS	Learning management system
MB	Management Board
MedCOI	Medical country of origin information
MENA	Middle East and North Africa
MEP	Member of the European Parliament
MS	Member State

NA	Needs assessment
NCP	National Contact Point
NDU	Network of Dublin Units
NRA	Network of Reception Authorities
OLAF	European Anti-Fraud Office
OP	Operating plan
PA	Payment appropriations
RAO	Responsible authorising officer
RDPP	Regional Development and Protection Programme
RMC	Risk management correspondent
RSF	Resettlement Support Facility
SCIFA	Strategic Committee on Immigration, Frontiers and Asylum
SEM	State Secretary for Migration
SES	Staff engagement survey
SLA	Service level agreement
SNE	Seconded national expert
SPD	Single Programming Document
StratNet	Strategic COI Network
TA	Temporary agent
UNHCR	United Nations High Commissioner for Refugees
VEN	Vulnerability Expert Network
WP	Work Programme

Management Board's analysis and assessment

THE MANAGEMENT BOARD,

HAVING REGARD to Regulation (EU) 2021/2303 of the European Parliament (EP) and of the Council of 15 December 2021 on the European Union Agency for Asylum and repealing Regulation (EU) No 439/2010 (hereinafter 'EUAA' or 'Agency', and the 'EUAA founding Regulation',

HAVING REGARD to Management Board (MB) Decision No. 54 of 14 August 2019 on the EASO Financial Regulation, and in particular Article 48 thereof,

HAVING REGARD to MB Decision no 42 of 21 December 2018 on the Internal Control Framework (hereinafter 'ICF'), and in particular Articles 2(1), 3(6) and 5(1) thereof,

HAVING REGARD to the Decision of the Executive Director (ED) of 3 February 2020 on the Internal Control Framework Monitoring Criteria and Internal Control Self-Assessment Methodology for 2020 and 2021 (EASO/EDD/2020/001),

HAVING REGARD to the Decision of the ED of 3 February 2020 on the Establishment of Internal Controls and Ex-post Controls Function in EASO (EASO/EDD/2020/001),

HAVING REGARD to EASO's Work Programme (WP) 2021 adopted by the MB on 29 September 2020, as amended on 18 February 2021 and 21 June 2021,

HAVING REGARD to the Communication from the Commission of 20 April 2020 on the strengthening of the governance of Union Bodies under Article 70 of the Financial Regulation 2018/1046 and on the guidelines for the Single Programming Document and the Consolidated Annual Activity Report (C(2020) 2297 final),

HAVING REGARD to EASO's Consolidated Annual Activity Report (CAAR) 2021 presented to the Management Board on 22 June 2022,

HAS analysed and assessed the ED's CAAR on the achievements and results of 2021 and acknowledges the Agency's performance, in particular:

General observations

- Welcomes the achievements of the objectives and targets set in the WP 2021 reported in Part I and the results achieved, in particular in the context of another challenging year due to the COVID-19 global pandemic;
- Welcomes the effective and efficient business continuity measures adopted by the ED and the COVID response team (CRT) as a reaction to the COVID-19 pandemic crisis;
- Notes positively that the budgetary authority has granted the budget discharge for the financial year 2020;
- Welcomes that EASO provides quarterly reports to the MB on:
  - o EASO governance monitoring indicators tracking the progress made towards predefined objectives across key areas of governance: implementation of the EASO WP, human resources, staff engagement, internal control, procurement, budget and finance;
  - o the state of play of internal control and risk management processes and, in particular: the state of play of the internal control action plan, control bodies' recommendations and observations, the central risk register and the EASO anti-fraud risk register;
- Welcomes that all pending very important recommendations issued by the Internal Audit Service (IAS) before 2021 have been successfully implemented;

- Welcomes the seamless communication channels established with key stakeholders and the quarterly progress reported towards the achievement of pre-defined objectives;
- Notes that EASO continued the implementation of the internal control action plan and that, as a result of the number of corrective actions implemented, the overall internal control system (ICS) is effective and efficient;
- Notes that at the time of the drafting of this report, the European Court of Auditors (ECA) has not yet issued the final report for the financial year 2021, and that only the preliminary observations are available. The preliminary observations do not include any irregular payments linked to new observations issued for the financial year under assessment;
- Notes the internal actions being taken under the EUAA Transition Programme in preparation for the transition to a fully-fledged European Union Agency for Asylum (EUAA), as well as the regular reports provided by the Agency to the MB.

Specific observations on EASO's policy achievements in 2021

- Congratulates the Agency for exceeding, achieving or nearly achieving 85% of pre-established annual targets set for 2021 in the EASO WP despite the challenges imposed by the COVID-19 spill-over impact.
- Notes positively the solid progress demonstrated in 2021 towards the achievement of multiannual objectives, especially in (i) Operational Support (100% on track as regards its support, implementation is in some instances delayed or lacking due to the incomplete fulfilment of the pre-conditions agreed with the Member State(s) concerned), (ii) Training and Professional Development (83% on track), and (iii) Horizontal Activities (80% on track);
- Notes the significant increase of operational efficiency and productivity the objective of implementing all signed operating plans (OP). Despite challenges posed by COVID-19 and the restrictive nature of the deployment mechanisms, the Agency significantly upscaled its operational presence in Member States. The Agency continued providing operational support to Italy, Greece, Cyprus, Malta and Spain by successfully implementing the agreed operating plans. Operational support was expanded to Latvia, Lithuania and Belgium through new operating plans signed in 2021;
- Notes that, despite insufficient numbers of experts allocated by Member States, the Agency successfully addressed deployment needs in all Member States where tailored operational support was provided through remunerated external experts, contracted temporary agency workers and short-term operational contract agents. This was in line with effective implementation of planned support measures and efficient utilisation of resources as stipulated in the Work Programme and in OPs;
- Notes that the Agency continued delivering operational responses in a coordinated manner and within the European Commission's (EC) framework;
- Notes a high level of participant satisfaction maintained regarding the external dimension networks and related working groups, of EU+ countries involved in activities related to resettlement, humanitarian admission and complementary pathways to international protection, and of partner third countries with capacity building activities;
- Notes that the Agency maintained a high level of satisfaction of participants attending the Asylum Intervention Pool National Contact Points (AIP NCPs) meetings.
- Notes that the Agency implemented all operational interventions through effective and sound programming, monitoring and evaluation processes, in line with a robust project management methodology;
- Notes the continued productivity of high-quality products related to country of origin information (COI), country guidance (CG) and medical COI (MedCOI), and in particular an increasing volume of COI and MedCOI queries, accompanied by high level of participant satisfaction with the meetings and workshops organised for COI and CG networks;

- Notes the increasing demand for data, information, analysis and research products, significant developments of the Agency's information management systems such as the Information and Documentation System (IDS), the case law database, and the query portal, as well as high levels of user satisfaction of those systems and related outputs;
- Notes the high level of participant satisfaction with the wide range of activities of the Asylum Processes Network, the Exclusion Network, the Vulnerability Experts Network, the Network of Dublin Units and the Network of Reception Authorities, combined with increased support through high-quality practical guides and tools, and further diversification of judicial training and professional development activities for members of courts and tribunals;
- Notes a high satisfaction with the EASO training curriculum in various domains, including thematic and national training, train-the-trainer and on-the-job coaching, especially through continually effective management of the learning management system (LMS) platform;
- Notes the increasing number and satisfaction of civil society organisations (CSOs) participating in the Consultative Forum (CF) work, and the positive results achieved in activities addressed to the general public, international organisations and other stakeholders;
- Notes the overall progress maintained in all governance domains, notably in corporate planning, monitoring and reporting, internal control and risk management, legal and data protection, quality management and evaluation, press and external communication. The MB congratulates the ED for a high degree of utilisation of planned activities and resources, along with timely implementation of audit and governance related action plans;
- Notes very positively the recent EC Decision granting for the financial rules of the Agency to depart from Article 93 of the Delegated Regulation (EU) 2019/75 on the Framework Financial Regulation to permit the Agency to also select remunerated external experts to provide operational, technical and administrative assistance to Member States. Such experts may form part of the asylum support teams.

Specific observations on EASO management, external evaluations and internal controls

- Notes that the ED expresses an opinion on whether the resources assigned to the activities described in this report have been used for their intended purpose and in accordance with the principles of sound financial management for 2021, and that the control procedures in place give the necessary guarantees concerning the legality and regularity of the underlying transactions;
- Notes that financial ex post controls have been implemented by the Internal Control and Risk Management Sector (ICRS) and that corrective actions will be reported to the MB through the central register of deficiencies. Furthermore, welcomes the benefit such controls will have in providing additional assurance to the Management on compliance with applicable rules and procedures, as well as on the identification of any internal control weaknesses requiring rectification;
- Notes the significant progress made to build an evaluation culture within the Agency, which has been strengthened by the centralisation of evaluation activities within the Executive Office (EXO) and the establishment of an internal Evaluation Advisory Group to advise the ED, and the results and recommendations reported by the external ex post evaluations of operational support to four Member States (i.e. Cyprus, Greece, Italy and Malta), as well as the project of the Resettlement Support Facility in Turkey, and the internal ex post evaluation of the Preparatory Group of the MB. Moreover, notes the

progress made by the Agency in implementing improvement actions that address evaluation recommendations;

- Notes that the ED approved centrally logged and justified instances of overriding controls or deviations from the established processes and procedures for a total amount of €685,237.27 (0.5% of payment appropriations (PA) executed), constituting a considerable reduction in comparison with 2020 of €890,167.16 (0.8% of PA executed). The total number of exception and non-compliance events was reduced significantly between 2020 (46) and 2021 (25);
- Notes that corrective measures taken during the year led to a significant decrease in the rate of late payments in 2021 and increased budget performance in 2021 compared to 2020;
- Notes that, during 2021, the Agency has made considerable efforts to improve the internal control systems (ICS);
- Welcomes the effective cooperation between EASO and the control bodies, in particular IAS and ECA. During 2021 and quarter 1 2022, EASO does not have any delays in implementing very important recommendations from IAS audits from previous years. The number of pending observations from previous ECA audits was significantly reduced between 2020 and 2021.

Conclusions

- Welcomes the concrete measures introduced by the ED to improve the internal atmosphere within the Agency, including the relationship with staff and the Staff Committee, and for strengthening the relationship with the EU institutions and key stakeholders despite COVID-19 and challenges in remote work;
- Congratulates the ED for the successful preparations towards operationalisation and implementation of the new mandate of the EUAA;
- Welcomes the efforts to increase the effectiveness of recruitment of Agency staff through the introduction of e-recruitment in line with the recruitment plan elaborated by the ED, as well as improved HR policies, procedures and processes;
- Welcomes the results and recommendations made in external ex post evaluations of the Agency's operational support and the lessons learnt that are reinforced by follow-up actions that continually improve the Agency's interventions, as well as those made in the internal ex post evaluation of the Preparatory Group of the MB that have contributed to improvements in the functioning of the group and consequently of the MB;
- Welcomes that the results and coverage analysis of ex post controls, and in particular the analysis of internal control monitoring criteria, are extensively documented and explained in detail in Part III and Annex XI;
- Welcomes all the relevant controls and corrective actions that have been implemented and are described in Part IV as a result of the internal control action plan;
- Welcomes that under the new Management, EASO has considerably improved its working arrangements and communication channels to increase transparency and facilitate the EASO MB role in overseeing the Agency's governance, risk management and internal control practices;
- Welcomes that out of 81 corrective actions agreed by the Management in the 2021 internal control self-assessment and documented in Annex IX, the majority are either already implemented (16%) or in progress (47%);
- Welcomes that both the central risk register, and the fraud risk register are monitored quarterly with feedback provided to the Management through quarterly risk management reports;

- Welcomes that the Agency maintained and consolidated close and trustful relations with its national and international stakeholders, and especially EU Institutions, and effectively continued to expand the visibility of its work and to contribute knowledge and expertise for evidence-based policy and decision-making;
- Welcomes the implementation of financial ex post controls, which identified several areas for improvement. Invites the Agency to continue with such activities, Congratulates the ED for the successful achievement of all financial and budgetary MB key performance indicators (KPIs), a first for the Agency.

The MB wishes to express its gratitude to ED and all staff, and congratulate them for their expertise and commitment, which characterised the Agency's achievements throughout the year. The MB adopts this opinion and requests that the CAAR 2021 be forwarded, together with the analysis and assessment, to the EP, the Council, EC and the ECA.

Executive Summary

Migration and asylum continued to be a key policy priority in the EU during 2021. For the Agency, a milestone was reached when the co-legislators reached the final agreement on the new Regulation replacing EASO with the EUAA in June 2021, followed by the final adoption in December 2021 and the entry into force of the new mandate on 19 January 2022.

This constituted an important breakthrough, not only for the Agency, but also for the EU, as an element signalling progress on the New Pact on Migration and Asylum and potentially contributing further impetus to the remaining work.

In 2021 therefore, the Agency significantly stepped up its preparations for the new mandate, which brought about new tasks, important changes, and much-awaited improvements in the Agency's ability to provide the required support to Member States.

2021 was a year of adaptation, innovation and demonstrating flexibility. With the continued grip of the COVID-19 pandemic and emerging new political instabilities, the Agency worked tirelessly to respond to crises, bridge gaps and strengthen application of the Common European Asylum System (CEAS).

At the same time, the Agency continued to engage closely with its stakeholders, and supported the work of the EC, the Council and the EP on policy and legislative developments, including in relation to the legislative proposals tabled as part of the New Pact on Migration and Asylum.

Additionally, the Agency enhanced its human resources, the finance and procurement function and the related processes improving efficiency and effectiveness within the Agency.

The unqualified opinion issued by ECA confirmed the strengthened governance implemented through the recently established and reinforced services, especially in the areas of internal control; planning, monitoring and reporting; quality management and evaluation. Additionally, the Agency was reorganised to ensure its readiness and efficiency from the outset. The new organigram, along with other important decisions, were adopted by the MB on the first day of the EUAA.

2021 was a crucial year for progressing with various preparatory tasks, especially in relation to the establishment of the new asylum reserve pool of 500 Member State experts, the Fundamental Rights Officer, the Liaison Officers, the Deputy ED and the enhanced role of the CF.

The Agency continued offering and upscaling technical and operational assistance to Member States and applied a multi-annual approach to its interventions. This change manifested increased trust from stakeholders and recognition for more diversified support. In addition to signing operating plans with Belgium, Cyprus, Greece, Italy, Malta and Spain, the Agency demonstrated readiness to effectively respond to the new global challenges. The establishment of an Expert Platform on Safe Pathways for Afghans and the signature of operating plans with Lithuania and Latvia are testament to the Agency's capacity to react swiftly to dramatic events such as the Taliban take-over and humanitarian crisis in Afghanistan and the sharp increase of asylum seekers crossing the border from Belarus.

The Agency responded very quickly to the worsening situation in Afghanistan by also producing relevant country information and analysis, guidance and training within very short timeframes, allowing for a more coordinated response to international protection needs of Afghan applicants among Member States.

The Agency continued to deliver capacity building support to third countries in particular in priority geographic regions i.e. Western Balkans (Albania, Bosnia and Herzegovina, North Macedonia, Serbia, Kosovo[2] and Montenegro), Turkey and the Middle East and North Africa (MENA).

The Agency further expanded and diversified its situational awareness products by focusing on new methods of data collection and consolidating information management systems, further intensified practical cooperation through its thematic networks, and delivered a wide variety of guidance and tools to support Member States in implementing the CEAS. Moreover, in addition to providing training to members of national administrations, justice professionals and deployed personnel, the Agency further developed towards a certified asylum training curriculum. Introduction of the training quality assurance framework, implementation of the European Sectoral Qualification Framework and further development of the training needs analysis tool represent key milestones in becoming an accredited training institution on asylum.

Asylum support remains the Agency's mission, responsiveness and resilience will continue to be at the core of its activities especially now that Europe braces itself for the full impact of the humanitarian crisis following the invasion of Ukraine. In condemnation of this act of violence, the Council of the EU adopted an unprecedented decision offering temporary protection to Ukrainians and certain third country nationals fleeing the war. This equips the Agency to support Member States in the implementation of the Temporary Protection Directive (TPD) together with partners and key stakeholders.

Key conclusions based on Part II and Part III of the SPD

Following the establishment of the Agency's ICF in 2018, EASO developed and implemented new policies and control activities during 2020 and 2021 to ensure that risk and control issues are signalled to and discussed with Management and the MB in a timely manner.

The Agency's main control activities are summarised in Part III of this report. They were analysed while assessing the functioning, efficiency, and effectiveness of the seventeen internal controls principles falling within the five internal control components:
    a) control environment;
    b) risk management;
    c) control activities;
    d) information and communication; and
    e) monitoring activities.

The control activities refer in particular to the reorganisation of the Agency and its new internal structure and rules of procedure, improvements made regarding its ability to identify,

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[2] This designation is without prejudice to positions on status and is in line with UNSCR 1244/1999 and the ICJ Opinion on the Kosovo declaration of independence.

prioritise and manage risks, including the risk of fraud, the business continuity measures adopted as a reaction to COVID-19 circumstances, supervision tools for effective monitoring of late payments, full implementation of the ERDMS, the new communication strategy and the continuous and specific internal control monitoring assessment tools.

The MB adopted the anti-fraud strategy for 2020-2022 that identifies fraud prevention risk management objectives, priority measures and fraud preventive as well as detective control activities. This enables an effective identification and assessment of incentives, pressures, opportunities, and attitude which may lead to any type of fraud.

Overall, the considerable efforts of the ED and the Management to improve the internal control and the tone at the top culture is demonstrated by their commitment towards continuous progress and the Agency's expectations on integrity and ethical values set out by analogy to the EC standards of conduct.

The outcome of the internal control self-assessment for the financial year 2021 carried out by the Management shows that the Agency's ICS is effective and efficient, with the need of some improvements.

Part I: Policy achievements of the year

Detailed statistics on policy achievements in 2021 is provided in Annex I 'core business statistics', addressing multi-annual and annual indicators from the Single Programming Document 2021-2023 and covering all Work Programme 2021 activity areas.

2.1 Operational support

2.1.1 Italy

Indicator	Target	Data source	Result	Status	Comment
Percentage of implementation of the relevant measures of the operating plan.	85%	Progress reports	54%	in delay	54% of measures were implemented (IT1A, IT2, IT3, IT5.2). The result was below the target due to delays in resource/deployment and capacity issues, combined with changes in priorities from the stakeholders. Some activities were therefore postponed to 2022.
National monitoring mechanism supported by EASO through development and implementation of monitoring tools to improve quality of registrations of applications for international protection.	85%	Internal monitoring records, measure-based monthly reports, progress reports ≥ 85% of the relevant output indicators (OP 2021) achieved	73%	nearly achieved	73% of the mechanism was supported (IT1A). The result was slightly below the target due to most activities being on hold and deployment constraints prior to Q4.
Capacity on COI increased at first instance level to strengthen the decision-making process with the support of the Agency.	70%	Monitoring reports, progress	64%	nearly achieved	64% of COI capacity increase (IT2.2). Activities related to the Inter-ministerial COI Unit were postponed to 2022.

Indicator	Target	Data source	Result	Status	Comment
		reports ≥ 70% of the relevant output indicators (OP 2021) achieved			
Number of outgoing Dublin cases processed by the national authorities with the capacity building support of the Agency.	1,000	Monitoring reports, progress reports	2,516	exceeded	2,516 cases were processed (take back and take-charge outgoing Dublin case requests).
Percentage implementation of outputs related to EASO support for the development of the Italian information system SUA.	100%	Monitoring reports, progress reports 100% integration of EASO tools in SUA relevant parts	0	in delay	Actions under IT5.2 were put on hold by the Italian authorities (the Agency will discontinue this support in 2022).
Number of files prepared by judicial authorities with the support of the Agency, including in support of the Court of Cassation.	16,000	Monitoring reports, progress reports	20,535	exceeded	20,535 files were prepared (IT3), in support to the management of judicial backlog.
Number of COI researches supported at second instance.	7,000	Monitoring reports, progress reports	8,937	exceeded	8,937 researches were supported (IT3), in support to the management of judicial backlog.
Percentage of implementation of the relevant measures of the operating plan.	85%	Progress reports	70%	nearly achieved	70% of measures were implemented (IT4). The result was slightly below the target due to deployment related issues, including lack of sufficient resources.
National reception monitoring framework endorsed.	75%	Monitoring reports, Progress reports	88%	exceeded	88% of the framework was endorsed (IT4), in support to the quality management and monitoring of the Italian reception system.
Percentage of SAR disembarkation / voluntary relocation events managed with EASO support.	100%	Internal monitoring reports	100%	achieved	100% of events (44 requests) were managed with EASO support.

2.1.2 Greece

Indicator	Target	Data source	Result	Status	Comment
Percentage of queries responded by the Helpdesk within one month from receipt.	100%	Progress reports	100%	achieved	100% (99.6%) of queries were responded within the established deadline (EL-REC 2.0).
Number of beneficiaries targeted with information provision conducted with EASO support (4 Islands and Fylakio).	13,658	Progress reports	13,591	achieved	13,591 beneficiaries were targeted (EL-REC 2.1). The indicator was introduced in 2021 to establish the baseline.
Number of candidates successfully matched for relocation with EASO support.	1,020	Monitoring report Progress reports	993	achieved	993 candidates were matched (EL-REL 3.2).
Percentage of support measures related to asylum procedures implemented according to the logical framework and the implementation plan, including amendments, if applicable.	85%	Progress reports	80%	nearly achieved	80% of measures were implemented (EL-AS 1). The result was slightly below the target due to decreased number of opinions and second instance reports.
Number of registrations of applications processed with EASO support (islands & mainland).	13,100	Monitoring reports	10,989	nearly achieved	10,989 registrations were processed (EL-AS 1.1, EL-AS 1.2). The result was slightly below the target due to decreased arrivals and administrative changes.
Number of interviews conducted with EASO support (islands & mainland).	18,600	Monitoring reports	20,663	exceeded	20,663 interviews were conducted (EL-AS 1.1, EL-AS 1.2). The result is consistent with the increase in deployed resources.
Number of opinions delivered with EASO support (islands & mainland).	18,900	Monitoring reports	9,196	in delay	9,196 opinions were delivered (EL-AS 1.1, EL-AS 1.2). The result was below the target due to changes in the legal framework, combined with gradual reduction of backlogs.
Number of outgoing Dublin requests processed with EASO support.	2,400	Monitoring reports	2,593	exceeded	2,593 cases were processed (EL-AS 1.3).
Number of second instance reports for the Committees prepared with EASO support.	3,250	Monitoring reports	1,840	in delay	1,840 reports were prepared (EL-AS 1.4). The result was below the target due to mandatory interruptions in deployment of

Indicator	Target	Data source	Result	Status	Comment
					temporary workers, combined with gradual workload decrease.
Percentage of support measures related to national reception system implemented according to the logical framework and the implementation plan, including amendments, if applicable.	85%	Progress reports	94%	exceeded	94% of measures were implemented (EL-REC 2).
Percentage of implementation of activities related to information provision, vulnerability and child protection procedures of first-line reception facilities.	85%	Progress reports	86%	exceeded	86% of activities were implemented (EL-REC 2.1).
Percentage of implementation of activities in the management of second-line reception facilities.	85%	Progress reports	100%	exceeded	100% of activities were implemented (EL-REC 2.2).
Percentage of implementation of activities related to the implementation of the national strategy on unaccompanied minors.	85%	Progress reports	100%	exceeded	100% of activities were implemented (EL-REC 2.3).
Number of individual assessments conducted with EASO support (4 islands and Fylakio).	2,547	Progress reports	2,238	nearly achieved	2,238 assessments were conducted (EL-REC 2.1). The result was slightly below the target. The indicator was introduced in 2021 to establish the baseline.
Number of referrals made following individual assessment/information provision (4 islands and Fylakio).	3,111	Progress reports	2,338	in delay	2,338 referrals were made (EL-REC 2). The result was below the target. The indicator was introduced in 2021 to establish the baseline.
Percentage of long-term accommodation centres (LTACs) supported by personnel deployed by EASO.	100%	Progress reports	100%	achieved	100% of centres were supported (EL-REC 2.2).
Percentage of support measures related to relocation schemes implemented according to the logical framework and the implementation plan, including amendments, if applicable.	85%	Final reports	91%	exceeded	91% of measures were implemented (EL-REL 3).
Number of Best Interests Assessments (BIA) drafted with EASO support.	700	Monitoring report Progress reports	447	in delay	447 assessments were drafted (EL-REL 3.1). The result was below the target due to variations in pledges made and changes in the implementation timeline.

Indicator	Target	Data source	Result	Status	Comment
Number of relocation assessments drafted with support from the Agency (BIA procedure and vulnerable families).	320	Monitoring report Progress reports	301	nearly achieved	301 assessments were drafted (EL-REL 3.1). The result was slightly below the target due to variations in pledges made.
Number of outgoing Dublin requests processed with EASO support.	1,020	Monitoring report Progress reports	831	nearly achieved	831 requests were processed (EL-REL 3.2). The result was slightly below the target due to the relatively low number of candidates matched.
Percentage of support measures related to reception and asylum management implemented according to the logical framework and the implementation plan, including amendments, if applicable.	85%	Progress reports	92%	exceeded	92% of measures were implemented (EL-TF 4).
Percentage of implementation of activities related to information provision, vulnerability, child protection and site management procedures in Mavrovouni.	85%	Progress reports	87%	exceeded	87% of activities were implemented (EL-TF 4.1).
Percentage of implementation of activities related to the establishment and management of multipurpose reception and identification centres.	85%	Progress reports	100%	exceeded	100% of activities were implemented (EL-TF 4.2).
Number of individual assessments conducted by EASO staff seconded to national reception authorities in Lesvos.	6,048	Monitoring reports Progress reports	5,481	nearly achieved	5,481 assessments were conducted (EL-TF 4.2). The result was slightly below the target. The indicator was introduced in 2021 to establish the baseline.
Number of beneficiaries targeted with Information Provision conducted by EASO staff seconded to national reception authorities in Lesvos.	797	Monitoring reports Progress reports	9,893	exceeded	9,896 beneficiaries were targeted (EL-TF 4.1).
Number of referrals following individual assessment / information provision in Lesvos.	3,652	Monitoring reports Progress reports	2,516	in delay	2,516 referrals were drafted (EL-TF 4.2). The result was below the target. The indicator was introduced in 2021 to establish the baseline.

2.1.3 Cyprus

Indicator	Target	Data source	Result	Status	Comment
Percentage of implementation of the relevant measures of the operating plan.	85%	Progress reports	70%	nearly achieved	70% of measures were implemented (a weighted average based on budget allocation of CY1 92.2%, CY3 70.5%, CY4 131.2%). The result was slightly below the target due to constraints in deployment management.
Number of registrations of applications processed with EASO support.	4,734	Monitoring reports	7,880	exceeded	7,880 registrations were processed (60% out of 13,235).
Number of interviews conducted with EASO support.	3,300	Monitoring reports	1,648	in delay	1,648 interviews were conducted. The result was below the target due to constraints in deployment management.
Number of second instance unique files prepared with EASO support.	500	Monitoring reports	639	exceeded	639 files were prepared.
Percentage of cases processed by the Dublin team with EASO support.	100%	Monitoring reports	46%	in delay	46% of cases were processed. The result was below the target due to newly implemented data collection process, which limits the scope and analysis of Dublin cases.
Percentage of EASO files reviewed by Cyprus quality mentor in CAS.	100%	Monitoring reports	10%	in delay	10% of files were reviewed. The result was below the target due to reduced first instance quality support.
Number of interviews conducted in the Asylum Examination Centre adjacent to Pournara First Reception Centre.	692	Monitoring reports	363	in delay	363 interviews were conducted. The result was below the target due to deployment challenges, suspension of activities and partial completeness of the files received.
Number of vulnerability assessments performed by EASO vulnerability officers in Pournara.	1,190	Monitoring reports	1,462	exceeded	1,462 assessments were performed.
Cyprus reception strategy is drafted with technical support of EASO and endorsed by all relevant stakeholders.	100%	Monitoring reports	100%	achieved	100% of planned activities were concluded (the reception strategy reached proof-reading stage).

Indicator	Target	Data source	Result	Status	Comment
Percentage of EASO assigned residents of Kofinou reached on a monthly basis (average annual target).	75%	Monitoring reports	94%	exceeded	94% of residents were reached.
Percentage of implementation of the Early Identification System for vulnerable applicants.	100%	Monitoring reports	100%	achieved	100% of planned activities were implemented (a common tool for identification and assessment of vulnerable applicants).
Level of the development and functioning of the first line reception related workflows as they relate to registration, vulnerability referrals and allocations (Pournara Safe Zone).	100%	Pournara Safe Zone reports	60%	in delay	60% of workflows were developed/ functioning. The result was below the target due to Pournara Safe Zone not being operational (establishment delays).
Percentage and number of ad hoc relocation events managed with EASO support.	100%	Internal records	NA	NA	No relocation support was requested by the Cypriot authorities.

2.1.4 Malta

Indicator	Target	Data source	Result	Status	Comment
Number of information provision sessions delivered by EASO.	550	Monitoring reports	580	exceeded	580 sessions were delivered.
Number of registrations of applications processed with EASO support.	920	Monitoring reports	1,187	exceeded	1,187 registrations were processed.
Number of Dublin files processed with EASO support.	1,000	Monitoring reports	1,334	exceeded	1,334 files were processed.
Number of reception centres with effective referral mechanisms in place through the designation of focal points.	3	Monitoring reports	3	achieved	3 focal points were designated.
Number of referrals made with support from EASO.	200	Monitoring reports	247	exceeded	247 referrals were made.
Percentage of implementation of the relevant measures of the operating plan.	85%	Progress reports	96%	exceeded	96% of measures were implemented (MT 1.0).
Number of interviews conducted with EASO support.	1,400	Monitoring reports	1,004	in delay	1,004 interviews were conducted. The result was below the target due to resource/ capacity issues.

Indicator	Target	Data source	Result	Status	Comment
Number of evaluation reports drafted with EASO support.	1,400	Monitoring reports	900	in delay	900 reports were drafted. The result was below the target due to resource/capacity issues.
Percentage of implementation of the relevant measures of the operating plan.	85%	Progress reports	91%	exceeded	91% of measures were implemented (MT 2.0).
Number of vulnerability assessments performed with support from EASO.	1,000	Monitoring reports	810	nearly achieved	810 assessments were performed. The result was slightly below the target due to reduction in arrivals.
Number of age assessments performed with support from EASO.	100	Monitoring reports	NA	NA	The activity was cancelled by the stakeholders.
Percentage and number of ad hoc disembarkation / voluntary relocation events managed with EASO support.	100%	Internal reports	NA	NA	No ad hoc disembarkation events took place in 2021.

2.1.5 Spain

Indicator	Target	Data source	Result	Status	Comment
Percentage implementation of the relevant measure of the operating plan.	85%	Progress reports	96%	exceeded	96% of measures were implemented (ES1).
Percentage implementation of the relevant measure of the operating plan.	85%	Progress reports	82%	achieved	82% of measures were implemented (ES2). The result was slightly below the target due to organisational restructuring of the State Secretary for Migration (SEM), delays in deployment of the Complementary Deployment Management (CDM) system and postponement of some activities to 2022.
Organisational change management plans, tools and mechanisms developed.	75%	Monitoring reports	NA	NA	The activity was de-prioritised due to being closely linked to the development of a new reception model.
Percentage of emergency and temporary specific operational events managed with support from the Agency.	100%	Activity/progress reports	NA	NA	No ad hoc support was requested by the Spanish authorities.

Indicator	Target	Data source	Result	Status	Comment
Number of needs assessments (NA) conducted in areas of particular pressure.	1	NA reports	1	achieved	1 NA was conducted (the Canary Islands).
Percentage implementation of Measure ES 4 of the operating plan (Canary Islands).	85%	Progress reports	79%	nearly achieved	79% of the measure was implemented (ES4). The result was slightly below the target due to organisational restructuring of SEM, delays in deployments and postponement of some activities to 2022.
Percentage implementation of Measure ES 5 (resettlement).	85%	Progress reports	52%	in delay	52% of the measure was implemented (ES5). The result was below the target due to organisational restructuring of SEM, delays in deployments and postponement of some activities to 2022.

2.1.6 Other operational activities

Indicator	Target	Data source	Result	Status	Comment
Number of manuals/user guides prepared/initiated (concept note developed and validated by the end of the year).	1	Contingency planning manual user guide	0	in delay	The design of the contingency planning manual / user guide was postponed due to the Operational First Response Unit establishment as part of the reorganisation.
Percentage and number of timely operational responses.	100%	Operational records and activity reports	100%	achieved	100% responses were delivered (Lithuania, Latvia, Belgium).

2.1.7 External dimension

Indicator	Target	Data source	Result	Status	Comment
Level of satisfaction of the participants who used the knowledge management tools/techniques.	80%	Surveys; statistical data collection	NA	NA	The level of participant satisfaction is not available due to the response rate being too low and therefore not representative.
Level of satisfaction of the participants involved in the EASO resettlement training.	80%	Operational/administrative records;	85%	exceeded	85% participant satisfaction.

Indicator	Target	Data source	Result	Status	Comment
		satisfaction surveys			
Number of networks meetings organised.	8	Operational/ administrative records; meeting reports	9	exceeded	9 meetings were organised.
Specialised Working Groups (WG) in place and active.	4	Operational/ administrative records; meeting reports	4	achieved	4 WG were in place (on cooperation with the Western Balkans, Turkey/DGMM, MENA region, and on community sponsorship).
Level of satisfaction of the participants involved in the networks and the WG.	80%	Surveys; statistical data collection	89%	exceeded	89% participant satisfaction (Resettlement and Humanitarian Admission Network NCPs 89.6% and 86.7%, Third Country Cooperation Network NCPs 84%, WG on cooperation with Western Balkans 96.1% and 97.7%, with Turkey/DGMM 89.2%, with MENA region 81.6%).
Number of tools implemented to enhance the coordination role of the networks.	4	Operational/ administrative records; tools in place	4	achieved	4 tools were implemented (planning calendar, workplan 2020-2021, digital platforms).
Number of knowledge management tools/techniques developed, implemented or updated.	3	Operational/ administrative records, reports; business cases developed	4	exceeded	4 tools/techniques were developed/ implemented/updated (international protection overviews, pilot projects).
Number of meetings organised with relevant stakeholders aimed at enhancing cooperation in the field of Resettlement and Complementary Pathways (including under the Union Resettlement Framework Regulation, if adopted).	6	Operational/ administrative records; meeting reports	10	exceeded	10 meetings were organised.
Level of satisfaction of EU+ countries involved in the above activities.	80%	Operational/admi nistrative records;	84%	exceeded	84% participant satisfaction (virtual field visit to Turkey 88.2%, thematic meeting on

Indicator	Target	Data source	Result	Status	Comment
		satisfaction surveys			security, integrity and fraud risk 94%, information provision 87.3%, monitoring and evaluation 82.3% and 77.8%, urgent and emergency cases 96.7%, pre-departure orientation 64.4%).
Number of participants in the EASO resettlement training (including operational training as from 2020).	20	Operational/ administrative records	29	exceeded	29 participants took part in training.
Number of tools related to resettlement operations used by EU+ countries.	5	Operational/ administrative records; surveys; reports; statistical data collection	5	achieved	5 tools were used (mission preparation form, the RSF data collection scheme, online RSF country areas, surveys).
Number of EU+ countries using the RSF concept for selection missions and pre-departure orientation missions.	10	Operational/ administrative records	6	in delay	6 countries were using the concept (Belgium, Sweden, Switzerland, Germany, Romania, the Netherlands). The result was below the target due to COVID-related restrictions and limited physical processing).
Number of selection missions (physically or remotely) implemented through the RSF concept (or through a similar/adapted concept).	10	Operational/ administrative records	10	achieved	10 missions were implemented.
Number of pre-departure orientation missions (physically or remotely) implemented through the RSF concept (or through a similar/adapted concept).	6	Periodical activity reports	6	achieved	6 missions were implemented.
Concept note (CN) and project plan for additional RSF (similar/adapted) developed.	1	Draft CN and project plan developed	1	achieved	1 feasibility study and CN was developed.
Number of activities aimed at supporting interested EU+ countries in the planning and implementation of Complementary Pathways to international protection in the EU.	6	Operational/ administrative records; periodical activity reports	6	achieved	6 activities were implemented (working group meetings).

Indicator	Target	Data source	Result	Status	Comment
Level of satisfaction of EU+ countries involved in the above activities.	80%	Operational/ administrative records	90%	exceeded	90% participant satisfaction (on community sponsorship 87.3%, 88.2%, 95.6%).
Number of Roadmaps in place and implemented following project management methodology in line with the operations manual, with a clear prioritisation of needs and defined entry and exit strategies.	4	Agreed roadmaps in place	5	exceeded	5 Roadmaps were in place (Albania, Bosnia and Herzegovina, Montenegro, North Macedonia, Serbia).
Number of activities implemented under roadmaps/the IPA-funded project.	35	Operational and administrative records; periodical activity reports and final project reports sent to the European Commission	52	exceeded	52 activities were implemented (WG meetings, workshops, seminars, training sessions, NA, on-the-job coaching, etc.).
Level of satisfaction of the partner countries involved.	80%	Activity evaluation reports	91%	exceeded	91% participant satisfaction (on training needs assessment 94.2%, access to asylum procedure 86%, EU practices and CEAS framework 91%, safe country concepts 94.3%).
Number of Roadmaps in place and implemented following project management methodology in line with the operations manual, with a clear prioritisation of needs and defined entry and exit strategies.	1	Agreed roadmaps in place;	1	achieved	1 Roadmap in place/implemented (EASO-DGMM roadmap for cooperation).
Number of activities implemented as per the agreed roadmaps.	20	Periodical activity reports	17	nearly achieved	17 activities were implemented (country briefings, workshops, meetings, training sessions, etc.). The result was slightly below the target due to the COVID-19 impact, the DGMM reorganisation to Presidency of Migration Management (PMM), challenges to absorb EASO capacity and development support and

Indicator	Target	Data source	Result	Status	Comment
					the PMM focus on concluding the PMM-UNHCR project.
Level of satisfaction of the partner countries involved.	80%	Activity evaluation/feedback reports	91%	exceeded	91% participant satisfaction (COI briefing 84%, training on evidence assessment 90%, workshop on quality and methodology 97%, meetings on Roadmap development 90% and 100%).
Number of roadmaps/projects, as appropriate, established/implemented following project management methodology in line with the operations manual, with a clear prioritisation of needs and defined entry and exit strategies.	3	Agreed roadmaps/ projects under development or in place as appropriate; periodical activity reports, senior official meeting reports	3	achieved	3 roadmaps/projects were implemented (EASO-Egypt roadmap, regional pilot project for North Africa, pilot cooperation document with Niger).
Number of activities implemented as per cooperation documents.	8	Periodical activity reports	9	exceeded	9 activities were implemented (related to North Africa, Egypt, Morocco).
Level of satisfaction of the partner countries involved.	80%	Activity evaluation/ feedback reports	85%	exceeded	85% participant satisfaction (thematic consultations 86.8%, seminars/ conferences 83.6%, 91.1%, 83.6%, 81.3%).

2.2 Operational support and tools, programming, monitoring and evaluation of operations

2.2.1 Operational support and operational tools

Indicator	Target	Data source	Result	Status	Comment
Number of tools/guides developed or updated as a part of the EASO Operations Toolbox[37].	2	Project documentation	2	achieved	2 tools were developed (technology for the development and implementation of an operational tool, business requirements for the reception management information system in Malta).

Indicator	Target	Data source	Result	Status	Comment
EAIPS new functionalities fully completed.	100%	Project documentation	100%	achieved	100% of new functionalities were completed (a new complementary deployment mechanism).
Degree of satisfaction of EU+ countries with the EAIPS.	80%	Satisfaction survey	NA	NA	The satisfaction survey was postponed to 2022, due to several simultaneous activities potentially impacting participation.
Number of complementary deployment mechanisms identified and implemented (contract agents roster and external experts roster).	2	Project documentation	2	achieved	2 mechanisms were implemented (remunerated external experts, recruitment and onboarding of short-term contract agents).
Number of practical cooperation meetings organised, incl. meetings with the NCP network in the EU+ countries.	2	Meeting documentation	2	achieved	2 meetings were organised (AIP NCP virtual meetings).
Degree of satisfaction of NCP meeting participants with the meeting outcomes.	80%	Feedback forms	92%	exceeded	92% participant satisfaction (1st meeting 91.5%, 2nd meeting 92.7%).
Country-specific information for the Agency operations created within the Country Operations Platforms.	5	Country Operations Platforms 1 for each operation	6	exceeded	6 platforms were developed for all country operational offices (Lithuania added).
Percentage of experts having access to the Country Operations Platforms.	100%	Country Operations Platforms statistics	100%	achieved	All experts have access to the platforms.

2.2.2 Monitoring and evaluation of operations

Indicator	Target	Data source	Result	Status	Comment
Number of chapters drafted, validated and promoted as part of EASO operations manual.	4	PMES internal reporting	4	achieved	4 chapters were drafted/validated/promoted.
A C1 programming team is established.	1	PMES internal reporting	1	achieved	C1 (Operational Support Centre) programming team was established.
# of strategic and technical support actions conducted.	3	PMES internal reporting	3	achieved	3 strategic and technical support actions were conducted.

Indicator	Target	Data source	Result	Status	Comment
Number of NA carried out before operations are formulated.	4	NA reports	8	exceeded	8 NA exercises were conducted (Greece, Italy, Cyprus, Malta, Spain, Lithuania, Latvia, Belgium).
# of EASO interventions (including operating plans, roadmaps, etc.) accompanied by a results framework (RF), including SMART indicators and targets.	6	Project documentation (RFs) for each intervention	7	exceeded	7 interventions were covered by the results framework (Greece, Italy, Cyprus, Malta, Spain, Lithuania, Latvia).
# of EASO interventions (including operating plans, special support plans, roadmaps, etc.) having an effective monitoring plan in place.	6	Monitoring plan	7	exceeded	7 interventions had the monitoring plan in place (Greece, Italy, Cyprus, Malta, Spain, Lithuania, Latvia).
# of EASO interventions (including operating plans, special support plans, roadmaps, etc.) for which fidelity monitoring feedback loop mechanisms are established.	6	PMES internal reporting	7	exceeded	7 interventions had the monitoring feedback loop mechanism in place (Greece, Italy, Cyprus, Malta, Spain, Lithuania, Latvia).
Number of evaluation exercises conducted by PMES (internal) or contracted to external evaluators.	6	Evaluation reports	6	achieved	6 evaluation exercises were completed.

2.3 Asylum Knowledge

2.3.1 Country of origin information

Indicator	Target	Data source	Result	Status	Comment
Total number of pages of COI reports, query responses and other products produced/updated (including introductions, bibliographies, etc.).	2,000	Network meeting reports, email exchange, publication on EASO COI Portal, website and internal dissemination in operations, COI networks etc.	2,836	exceeded	2,836 items were produced/updated.

Indicator	Target	Data source	Result	Status	Comment
Number of COI-related workshops, meetings and conferences organised, including minimum 1 specific event for each COI network.	20	Meeting calendar, invitations	17	nearly achieved	17 COI-related events were organised, covering each COI network. The result was slightly below the target due to cancellation of planned in-person meetings.
Level of satisfaction of participants.	80%	Meeting evaluation forms filled in by participants on different aspects of the meeting (averages)	85%	exceeded	85% participant satisfaction (Ethiopia/Eritrea 85%, Somalia 88%, Libya 87%, Belarus 84%, Afghanistan 86%, Syria 81%, Iran 86%).
Exchange on needs, national production plans, knowledge generation effectively managed for each COI specialist network on a dedicated collaborative online platform.	100%	Uploaded documents in platform for each network: NA, mapping national plans, knowledge generation products such as source lists	100%	achieved	Mapping of national plans for all networks, survey on information needs for Central Asia, Afghanistan and West Africa networks, dissemination of the COI Portal user surveys to COI specialist network members (COI researchers).
Organise methodological and skill development workshops.	5	Calendar, participants list - 5 with minimum 80% satisfaction	5	achieved	5 workshops were organised.
Organise methodological and skill development workshops.	80%	Calendar, participants list - 5 with minimum 80% satisfaction	NA	NA	Due to low response rates, it was not possible to evaluate participant satisfaction.
Develop/update relevant COI methodological guides.	1	Publication on website	1	achieved	COI research guide on LGBTIQ was produced.

Indicator	Target	Data source	Result	Status	Comment
Percentage of peer review initiatives facilitated in EASO COI networks and/or for EASO publications, including written peer review and implementation/evaluation meetings where relevant.	90%	Acknowledgements' sections COI publications, network exchange, peer review meetings invitations/ participant list	100%	exceeded	Peer reviews: • EASO COI report on key socio-economic indicators for Baghdad, Basrah and Sulaymaniyah • EASO COI report on Iraq targeting of individuals • Iraq security situation
Number of COI Portal visits.	39,530	Analytics tool for COI Portal	21,684	in delay	21,684 COI Portal visits. The result was below the target due to technical challenges and breakdown of the portal (increased usage in Q4 following continued monitoring and troubleshooting).

2.3.2 MedCOI

Indicator	Target	Data source	Result	Status	Comment
User satisfaction rate.	80%	Survey	NA	NA	Postponed to 2022. Results expected in Q3 2022 from an external contractor.
Number of products produced/updated (a single product should be counted against an average of 100 pages, including introduction, bibliography etc.).	5	Publication on the EASO COI Portal, website and/or dissemination among MedCOI users	2	in delay	2 requests were published. Other reports were postponed to 2022 due to more time taken to ensure quality.
Response rate to individual requests (baseline number of requests expected is about 1,200 per year).	90%	Statistics from MedCOI database	100%	exceeded	100% of individual requests were responded to.
MedCOI Portal and Database fully functional for users, EASO MedCOI team and providers of information.	95%	ICT data	95%	achieved	95% of MedCOI Portal and Database functionality.

Indicator	Target	Data source	Result	Status	Comment
Rate of certification of database users (searching and launching requests) via training (EASO training modules on MedCOI).	100%	Training and database user statistics	100%	achieved	100% certified users of the MedCOI portal (279 as advanced and basic).
Organise user events, in which briefings are given.	1	Agenda, calendar, invitations	2	exceeded	2 MedCOI Advisory Committee meetings were held (in June and October).

2.3.3 Country guidance

Indicator	Target	Data source	Result	Status	Comment
Number of country guidance processes, including country guidance development, review and/or update, which are finalised at the level of the Country Guidance Network and guidance notes presented to the MB for endorsement.	4	Draft notes sent to MB for endorsement	4	achieved	4 country guidance processes were reviewed/updated.
Number of Network meetings organised.	8	Calendar, agendas, invitations	9	exceeded	9 network meetings were organised.
Level of satisfaction among participants with the network meetings.	80%	Evaluation forms filled in after meetings (averages)	93%	exceeded	93% participant satisfaction.
Numbers of surveys to the network launched and processed in the framework of the development, review or update of country guidance.	4	Survey reports	9	exceeded	9 surveys were launched and processed.
Organise or participate in a number of events, and activities, such as training, conferences, brown bag lunches, workshops, giving presentations and briefings on country guidance notes in EASO or externally.	6	Agendas, CG Staff missions, participation in activities	15	exceeded	15 events were organised or participated at.
Launch a study on the use of EASO products in jurisprudence.	1	Project documentation	1	achieved	1 study was launched.

Indicator	Target	Data source	Result	Status	Comment
Number of surveys to the Country Guidance Network on the use of country guidance documents published by EASO.	1	Survey report	1	achieved	1 survey was published.
Number of surveys to other stakeholders on the use of country guidance documents published by EASO.	1	Survey report	1	achieved	1 survey was published.

2.3.4 Data analysis and research

Indicator	Target	Data source	Result	Status	Comment
Number of operational analyses.	4	Internal records and reporting	4	achieved	4 operational analyses were drafted.
Percentage of indicators and breakdowns that are shared by all EPS network members.	80%	Analysis and monitoring of compliance	83%	exceeded	83% indicators/breakdowns were shared.
Number of EPS statistics network and advisory group meetings held, potentially in online formats.	2	Internal records and reporting - 2 with min 80% satisfaction	2	achieved	2 meetings were held.
Number of contributions to the ISAA report (1 contribution = weekly analysis on asylum applications, charts).	50	Internal records and reporting, registration numbers	52	exceeded	52 contributions were made.
Number of ad hoc requests for data overviews/PPTs from EASO staff and core external stakeholders (DG Home F2, GSC, PEC).	60	Internal records and reporting, registration numbers	128	exceeded	128 requests were received.
Percentage of operational measures covered by effective operational data collection.	100%	Internal records and reporting	79%	in delay	79% of measures were covered by data collection. The result was below the target due to not all data being received (sharing from Member States).
Number of contributions to operational needs assessments.	4	Internal records and reporting	5	exceeded	5 contributions were made.

Indicator	Target	Data source	Result	Status	Comment
Number of operational factsheets.	16	Internal records and reporting	16	achieved	16 operational factsheets were drafted.
Number of operational briefs.	4	Internal records and reporting	4	achieved	4 operational briefs were drafted.
Number of Early Warning reports.	4	Internal records and reporting	5	exceeded	5 Early Warning reports were drafted.
Number of Early Warning Advisory and Surveys group meetings.	2	Internal records and reporting - 2 with min 80% satisfaction	1	in delay	1 Advisory Group meeting was held. The second meeting was postponed to 2022 due to changes in HR and reprioritisation of work.
Research published in peer-reviewed journals, or in preparation, or under submission.	3	Internal records and academic journals	4	exceeded	4 papers were published, in preparation or under submission on: • early warning and forecasting system; • push factor index; • scoping review of online surveys; • early warning alerts.
Number of times EASO products are disseminated at high-level meetings (JHA, SCIFA, HLWG, MB).	25	Internal records, reports	39	exceeded	39 meetings had EASO products disseminated at.
Number of times that EASO is invited to EU meetings, other Agencies, Member State events and fora to deliver analytical PPTs.	7	Internal records, reports	63	exceeded	63 meetings/events had analytical PPTs delivered at.
Number of monthly hits to the LAT webpage.	50,000	Internal records, reports	25,462	in delay	25,462 hits to the LAT website. The result was below the target due to target being based on a different counter (Matomo was introduced in 2021, translating 27k equivalent to 50k).
Number of advisory groups.	2	Internal records, reports	2	achieved	2 advisory groups were held.
Number of asylum chapters in the ISAA report.	50	Internal records, reports	46	nearly achieved	46 chapters were drafted. The result was slightly below the target due to fewer ISAA reports produced by DG HOME, in combination with human resource capacity issues in EASO.

Indicator	Target	Data source	Result	Status	Comment
Number of joint analyses performed with EU+ countries and/or partner organisations.	5	Internal records, reports	2	in delay	2 joint analyses were drafted. Further joint reports were postponed to 2022 due to reconsideration of priorities.
Number of Country Intelligence Reports produced.	28	Monthly contacts with service providers; mid-year review of progress reports	21	in delay	21 Country Intelligence Reports were produced. The result was below the target due to quality review of reports received from the contractor being more resource-intensive and time-consuming.

2.3.5 Information and analysis

Indicator	Target	Data source	Result	Status	Comment
Number of joint initiatives in information exchange and analytical products.	2	EASO records of prepared products	2	achieved	2 initiatives were launched.
Percentage share of thematic pages in IDS maintained up to date (updated in the last six months).	70%	Monthly overview of updated thematic pages, via platform user analytics, communication bulletins informing countries about updates in thematic sessions	NA	NA	Page updates were on hold during the last months of 2021 due to the transfer of IDS to the SharePoint online platform.

Indicator	Target	Data source	Result	Status	Comment
EU+ countries' satisfaction on IDS.	75%	One user survey (indicators for surveys - number of respondents, results of qualitative analysis of user satisfaction and experience) 75% satisfaction	92%	exceeded	92% user satisfaction (feedback from 72 respondents, 56% somewhat and 36% very satisfied).
Number of external stakeholders introduced to EASO case law database to contribute.	20	Quarterly, communication with external stakeholders, contribution of external stakeholders	61	exceeded	61 stakeholders contributed.
EASO case law database and thematic extracts referenced in EASO outputs.	20	Quarterly, thematic extracts from EASO case law database and references to EASO case law database and links included in EASO outputs, internal records	24	exceeded	24 references in EASO outputs.

Indicator	Target	Data source	Result	Status	Comment
Users' satisfaction with EASO case law database.	75%	One user survey (indicators for surveys - number of respondents, results of qualitative analysis of user satisfaction and experience)	74%	achieved	Feedback from 24 respondents (3.7 out of 5).
Number of analytical overviews drafted.	20	EASO records of drafted overviews	31	exceeded	31 analytical overviews were drafted.
Number of situational updates on recent developments.	6	EASO records of updates published	10	exceeded	10 situational updates were drafted.
All functionalities of the Query Portal operational (proposing, withdrawal, launching, compilation, reports, repository).	6	Monthly, daily operation of the platform, user statistics, feedback from users (survey)	6	achieved	6 functionalities were maintained operational.
Joint queries launched with other stakeholders.	3	Quarterly, queries referenced as sources on IDS, outputs made available on IDS	NA	NA	This indicator evolved into a different type of activity, upon consultation with partner organisations. Common query initiatives will take place in the imminent future to collect supplementary information in the context of developing the public version of IDS.

Indicator	Target	Data source	Result	Status	Comment
Users' satisfaction with Query Portal.	80%	One user survey (indicators for surveys - number of respondents, results of qualitative analysis of user satisfaction and experience)	98%	exceeded	98% user satisfaction (feedback from 54 respondents, training on the new Query Portal).
Volume of consultations of the Asylum Report.	5,000	EASO website	15,189	exceeded	15,189 consultations (combined data from two reports: 13,451 visits of the Asylum Report 2020 and 1,738 visits of the Asylum Report 2021).
Level of satisfaction of users/readers with the content of the Asylum Report.	75%	Survey	81%	exceeded	81% user/reader satisfaction (feedback from 57 respondents, 54% of much and 26% of great use).
Outputs accompanying the Asylum Report developed and made available.	3	EASO website	8	exceeded	8 outputs were developed and made available. 5 additional extracts were published on: • women and girls; • age assessments; • digitalisation of asylum procedure; • resettlement and humanitarian admission; • family reunification for beneficiaries of international protection.

2.3.6 Asylum processes and quality support to operations

(i) Asylum Processes Network

Indicator	Target	Data source	Result	Status	Comment
Number of practical cooperation meetings of the Asylum Processes Network.	3	EASO admin. records / quarterly	6	exceeded	6 meetings were held.

Indicator	Target	Data source	Result	Status	Comment
Level of satisfaction with Asylum Processes Network meetings.	80%	Meeting evaluation forms	91%	exceeded	91% participant satisfaction.
Number of exchange visits organised.	2	EASO admin. records / quarterly	2	achieved	2 exchange visits were organised.
Number of reports published.	4	Reports published on Network platform / quarterly	7	exceeded	7 reports were published.
Number of operational standards, indicators, guidance, collected best practices and practical tools developed or updated and published.	3	Products published on the EASO website and/or Network platform / quarterly	4	exceeded	4 practical guides were published (on the application of the internal protection alternative, on the application of cessation clauses, on registration: lodging of applications for international protection, on subsequent applications).
The progress of the development process in the development of operational standards, indicators, guidance, best practices and practical tools.	100%	EASO admin. records / quarterly	100%	achieved	All planned practical guides were published (4 more practical guides were initiated).
Number of innovation processes supported, carried out or organised.	2	EASO admin. records / quarterly	2	achieved	2 processes were supported / carried out / organised.
Number of outreach activities to promote and roll out operational standards, indicators, guidance, best practices and practical tools.	6	EASO admin. records / quarterly	6	achieved	2 promotional activities were conducted and 4 deliverables were prepared.
Number of translations of practical tools and guidance.	20	EASO website and/or Network platform / quarterly	33	exceeded	33 translations were completed.

(ii) Exclusion Network

Indicator	Target	Data source	Result	Status	Comment
Number of practical cooperation meetings of the Exclusion Network.	2	Meeting reports available on the Network platform / quarterly	2	achieved	2 meetings were held.

Indicator	Target	Data source	Result	Status	Comment
Level of satisfaction with the Exclusion Network meetings.	80%	Meeting evaluation forms / quarterly	93%	exceeded	93% participant satisfaction.
Number of periodic newsletters shared with members of the Exclusion Network.	4	Newsletters available on the Network platform / quarterly	4	achieved	4 newsletters were shared.
Number of operational standards, indicators, guidance, collection of best practices and practical tools in relation to exclusion developed or updated and published.	2	Tools made available on the Network platform or on operations platforms / quarterly	2	achieved	2 practical guides were published, 'EASO Practical Guide: Exclusion for serious (non-political) crimes' and 'EASO Practical Tool: Identification of potential exclusion cases from Syria'.
The progress of the development process in the development of operational standards, indicators, guidance, best practices and practical tools.	100%	EASO admin. records / quarterly	100%	achieved	All practical guides planned for 2021 were published, development of a new practical tool started.
Number of outreach activities and/or products developed to promote and roll out operational standards, indicators, guidance, best practices and practical tools in relation to exclusion.	2	EASO admin. records / quarterly	3	exceeded	3 promotional activities were completed.

(iii) Quality support to operations

Indicator	Target	Data source	Result	Status	Comment
Number of new tools developed or existing tools refined.	6	Tools made available on operations information platforms / quarterly	7	exceeded	7 tools were developed/refined.
Number of quality assurance activities of the national asylum authorities supported.	10	EASO admin. records / quarterly	12	exceeded	12 activities were supported.
Number of reviewed interview transcripts and opinions or evaluation forms.	60	EASO admin. records / quarterly	166	exceeded	166 reviews were performed.

Indicator	Target	Data source	Result	Status	Comment
Number of quality feedback reports.	5	Reports made available on operations information platforms / quarterly	38	exceeded	38 reports were prepared or reviewed.
Number of asylum processes related activities implemented.	8	Tools made available on operations country platforms / quarterly	10	exceeded	10 activities were implemented.

2.3.7 Asylum thematic cooperation

(i) Vulnerability Experts Network (VEN)

Indicator	Target	Data source	Result	Status	Comment
Number of thematic queries and surveys designed and analysed.	2	EASO admin records/ quarterly	2	achieved	2 queries/surveys were designed/analysed.
Number of meetings of VEN.	3	EASO admin. records / quarterly	4	exceeded	4 meetings were organised.
Level of satisfaction with VEN meetings.	80%	Meetings evaluation forms after each event	88%	exceeded	88% participant satisfaction (feedback from a steering group meeting).
Number of thematic expert meetings.	2	EASO admin. records / quarterly	4	exceeded	4 meetings were organised.
Level of satisfaction with the thematic meetings.	80%	Meeting evaluation forms after each event	83%	exceeded	83% participant satisfaction.
Number of periodic updates shared with VEN.	4	EASO admin records	4	achieved	4 updates were shared.

Indicator	Target	Data source	Result	Status	Comment
Number of operational standards, indicators, guidance, collected best practices and practical tools in relation to vulnerable persons developed updated or published.	4	Mission reports, meeting reports, developed products / quarterly	7	exceeded	7 deliverables were prepared.
Number expert WG meetings for the development of operational standards, indicators, guidance.	9	EASO admin. records / quarterly	4	in delay	4 meetings were organised (testing of IT SNVA tool). 5 meetings were not held due to some tools being finalised ahead of time and some not requiring WG development.
MS satisfaction with newly developed operational standards, indicators, guidance.	80%	EASO admin. records / quarterly	0	in delay	Satisfaction was not measured due to planned evaluation of tools taking place in 2022 and to accumulate Member State tool usage experience.
Number of activities to promote and disseminate operational standards, indicators, guidance, best practices and practical tools.	20	EASO admin. records / quarterly	25	exceeded	25 activities were organised.
Number of translations of practical tools and guidance.	10	EASO admin. records / quarterly	11	exceeded	11 translations were prepared.
Number of activities implemented to support operations.	10	EASO admin. records / quarterly	13	exceeded	13 activities were implemented.

(ii) Network of Dublin Units

Indicator	Target	Data source	Result	Status	Comment
MS satisfaction with newly developed operational standards, indicators, guidance.	80%	EASO admin. records / quarterly	0	in delay	Satisfaction was not measured due to planned evaluation of tools taking place in 2022 and to accumulate Member State tool usage experience.
Number of activities related to support to operations.	2	EASO admin. records / quarterly	5	exceeded	5 activities were organised.
Number of steering group meetings of the Network of Dublin Units (NDU).	2	EASO admin. records / quarterly	2	achieved	2 meetings were organised.

Indicator	Target	Data source	Result	Status	Comment
Level of satisfaction with the NCP meetings of NDU.	80%	Meeting evaluation forms after each event	95%	exceeded	95% participant satisfaction.
Number of thematic expert meetings organised.	2	EASO admin. records / quarterly	5	exceeded	5 meetings were organised.
Level of satisfaction with the thematic meetings.	80%	Meeting evaluation forms after each event	91%	exceeded	91% participant satisfaction.
Number of thematic queries and surveys designed and finalised.	2	EASO admin. records/ quarterly	12	exceeded	12 queries/surveys were designed/finalised.
Number of periodic newsletters shared with members of NDU.	4	EASO admin. records / quarterly	4	achieved	4 newsletters were shared.
Number of operational standards, indicators, guidance, best practices and practical tools in relation to the Dublin regulation developed or updated and published.	2	Mission reports, meeting reports, developed products / quarterly	7	exceeded	7 deliverables were prepared.
Number of expert WG meetings for the development of operational standards, indicators, guidance.	6	EASO admin. records / quarterly	8	exceeded	8 meetings were organised.
Number of activities to promote and disseminate operational standards, indicators, guidance, best practices and practical tools.	8	EASO admin. records / quarterly	8	achieved	8 activities were organised.
Number of translations of practical tools and guidance.	10	EASO admin. records / quarterly / publications on the website	13	exceeded	13 translations were prepared.
Number of exchange activities organised.	2	EASO admin. records, exchange activities reports / quarterly	1	in delay	1 exchange activity was organised (visit on Dublin transfers to Greece). 1 exchange visit (to Germany) was cancelled due to COVID-19 related travel restrictions.

Indicator	Target	Data source	Result	Status	Comment
Level of satisfaction of participants in exchange activities.	80%	Exchange activity evaluation forms after each event	100%	exceeded	100% participant satisfaction.

(iii) Network of reception authorities

Indicator	Target	Data source	Result	Status	Comment
Number of NCP meetings of the Network of Reception Authorities (NRA) organised.	2	EASO admin. records / quarterly	2	achieved	2 meetings were organised.
Level of satisfaction with the NCP meetings of NRA.	80%	Meeting evaluation forms after each event	83%	exceeded	83% participant satisfaction.
Number of thematic expert meetings organised.	2	EASO admin. records / quarterly	2	achieved	2 meetings were organised.
Level of satisfaction with thematic expert meetings.	80%	Meeting evaluation forms after each event	97%	exceeded	97% participant satisfaction.
Number of thematic queries and surveys designed and analysed.	2	EASO admin. records / quarterly	7	exceeded	7 queries/surveys were designed/analysed.
Number of periodic updates shared with members of NRA.	4	Updates / quarterly	4	achieved	4 updates were shared.
Number of Reception Network newsletter shared with members of NRA and relevant stakeholders.	2	Newsletter / quarterly	2	achieved	2 newsletters were shared.
Number of operational standards, indicators, guidance, best practices and practical tools in relation to reception developed or updated and published.	2	Mission reports, meeting reports, developed products / quarterly	2	achieved	2 deliverables were prepared.
Number of expert working group meetings for the development of operational standards, indicators, guidance.	6	EASO admin. records / quarterly	5	Nearly achieved	5 meetings were organised. 1 meeting was not organised as the work continued via email.

Indicator	Target	Data source	Result	Status	Comment
Level of satisfaction with newly developed operational standards, indicators, guidance.	80%	EASO admin. records / quarterly	0	in delay	Satisfaction was not measured due to planned evaluation of tools taking place in 2022 and to accumulate Member State tool usage experience.
Number of activities to promote and disseminate operational standards, indicators, guidance, best practices and practical tools.	2	EASO admin. records / quarterly	9	exceeded	9 activities were implemented.
Number of translations of practical tools and guidance.	10	EASO admin. records / quarterly publications on the website	11	exceeded	11 translations were prepared.
Number of exchange activities organised.	2	EASO admin. records / quarterly	1	in delay	1 exchange visit was organised (to Germany) but under the auspices of the expert working group meeting instead of a separate visit (due to COVID-19 related restrictions), 1 was cancelled due to COVID-19 related restrictions.
Level of satisfaction of participants with exchange activities.	80%	Exchange activities evaluation forms after each event	NA	NA	Participant satisfaction was not measured due to the activity held under the auspices of the expert working group meeting instead (due to COVID-19 related restrictions)..
Number of activities organised.	2	EASO admin. records / quarterly	1	in delay	1 activity was organised (reception authorities' senior managers' and executive directors' meeting on strategic and managerial issues), 1 was postponed due to COVID-19 related restrictions.
Level of satisfaction of participants.	80%	Evaluation forms after each event	85%	exceeded	85% participant satisfaction.

Indicator	Target	Data source	Result	Status	Comment
Number of activities related to support to operations.	8	EASO admin. records / quarterly / mission reports of support activities related to operations	29	exceeded	29 activities were implemented.

(iv) Cooperation with members of courts and tribunals

Indicator	Target	Data source	Result	Status	Comment
Sets of professional development materials (judicial analysis, compilation of jurisprudence, judicial trainers' guidance notes or other material) developed, reviewed or updated.	4	Administrative records / specific contracts signed with the contractor / publications on EASO website	3	in delay	3 sets were developed/reviewed/updated ('Ending International Protection', 'Asylum Procedures', 'Evidence and Credibility Assessment'). Delivery of 1 set ('Qualification for International Protection and Article 15c Qualification Directive') had to be postponed to 2022 (Q1) due to an extension request from the contractor.
Number of professional development activities.	16	Administrative records, meeting agendas	16	achieved	16 activities were implemented (12 online professional development workshops, 2 EASO expert panels, 1 meeting with the Finnish National Judicial Training Body, 1 joint EASO-EJTN workshop).
Number of participants in professional development activities.	350	Invitations letters, participant lists, certificates of attendance	458	exceeded	458 participants in professional development activities.
Level of satisfaction of participants in professional development activities.	80%	Evaluation reports based on evaluation forms	94%	exceeded	94% participant satisfaction (feedback from professional development workshops, expert panels, operations).
Number of meetings of the EASO Network of Courts and Tribunals organised.	2	Meeting agenda, administrative records	2	achieved	2 meetings were organised (annual coordination and planning meeting, biannual meeting).

Indicator	Target	Data source	Result	Status	Comment
Number of biannual periodic newsletters sent to the EASO Network of Courts and Tribunals.	2	Newsletters, administrative records	2	achieved	2 newsletters were shared (July, December).
Number of activities in support of operating plans.	9	Administrative records	10	exceeded	10 activities were organised.
Number of activities in support of the external dimension.	3	Administrative records	3	achieved	3 activities were organised.

2.4 Training and professional development

2.4.1 Development and consolidation of the EASO training curriculum

Indicator	Target	Data source	Result	Status	Comment
Percentage satisfaction with the pilot session of newly developed and review modules.	70%	Evaluation questionnaire of the pilot session	87%	exceeded	87% participant satisfaction.
Number of new modules designed in line with the quality guidelines and standards in the field of higher education and vocational training to address identified training gaps.	2	Documentation and internal records, 2 newly developed modules	2	achieved	2 modules were designed ('Becoming an EASO assessor', 'Management in Reception').
Number of modules reviewed and aligned with the quality guidelines and standards in the field of higher education and vocational training.	5	Documentation and internal records, 5 modules reviewed	6	exceeded	6 modules were reviewed/aligned ('Becoming an EASO trainer', 'Inclusion', 'Asylum Interview Method', 'Evidence Assessment', 'Introduction to the Legal Framework', 'Course for trainers Asylum Core').
EASO Training Catalogue updated.	1	Publication, update of the EASO Training Catalogue	1	achieved	1 training catalogue was published.

2.4.2 Implementation of EASO training curriculum

Indicator	Target	Data source	Result	Status	Comment
Number of national authorities' officials participations in EASO train-the-trainers sessions.	100	Evaluation questionnaire	234	exceeded	234 participations in sessions.
Number of third country participations in train-the-trainer sessions.	25	Learning management system (LMS)	59	exceeded	59 participations in sessions.
Number of third country participations in national sessions.	50	LMS	55	exceeded	55 participations in sessions.
Number of staff training sessions.	8	Documentation and internal records (8 training sessions)	14	exceeded	14 sessions were organised.
Number of EASO staff participations in staff training sessions.	120	LMS	125	exceeded	125 participations in sessions.
Percentage of participant satisfaction.	80%	LMS	89%	exceeded	89% participant satisfaction.
Percentage of EU+ countries implementing one or more modules in their national context.	70%	LMS	72%	exceeded	72% of EU+ countries (21) had implemented one or more modules.
Number of participants completing a train-the-trainer course in EASO modules.	550	LMS	678	exceeded	678 completed participations in modules (incl. 460 participations from EU+ countries).
Overall satisfaction rate of participants trained as trainers.	80%	LMS	87%	exceeded	87% participant satisfaction (consistently high satisfaction rate registered in train-the-trainer sessions, delivered by in-house trainers).
Number of participations in national training implemented in EU+ national administrations.	5,000	LMS	4,009	nearly achieved	4,009 participations in training sessions. The result was slightly below the target

Indicator	Target	Data source	Result	Status	Comment
					due to constant changes to COVID-19 measures.
Number of trainers opting to become certified trainers.	40	LMS	38	nearly achieved	38 trainers opted for certification. The result was slightly below the target due to trainer certification first introduced in 2021.
Annual rate of multiplier effect.	8	LMS	9	exceeded	The annual rate of multiplier effect is 9 at EU+ countries' level.
Number of participations in the induction training, including national training sessions supported by EASO.	300	LMS	470	exceeded	470 participations in sessions.
Number of participations in the thematic training, including national training sessions supported by EASO.	1,100	LMS	1,190	exceeded	1,190 participations in sessions.
Number of participations in the on-the-job coaching.	500	LMS	438	nearly achieved	438 participations in coaching. The result was slightly below the target due to changes in Greek legislation on the safe third country concept: due to the consequent impact analysis on the asylum procedure, coaching activities were put on hold and then resumed.
Percentage of satisfaction of trainees.	80%	LMS	88%	exceeded	88% participant satisfaction (consistently high satisfaction rate registered in induction, thematic and on-job-coaching sessions, delivered online by in-house trainers).
Training interventions to support specific needs of third countries.	10	LMS (10 interventions in 6 separate countries)	19	exceeded	19 interventions were delivered.
Percentage of satisfaction of participants to the regional train-the-trainer sessions organised for the third countries.	70%	LMS	93%	exceeded	93% participant satisfaction.

2.4.3 Management of EASO training curriculum

Indicator	Target	Data source	Result	Status	Comment
User satisfaction rate of LMS.	80%	LMS (80% satisfaction rate)	87%	exceeded	87% user satisfaction.
Annual Training Needs Assessment and the Evaluation Methodology.	100%	Documentation and internal records	100%	achieved	The Training Needs Analysis Methodology and the Evaluation Methodology were delivered in July.
ETNA tool pilot evaluation.	100%	Documentation and internal records	100%	achieved	The ETNA tool evaluation was completed in September.
Feasibility study on national qualifications frameworks completed.	100%	Documentation and internal records	100%	achieved	The feasibility study on national qualifications frameworks was delivered in December (by the contractor).
Automated national EU+ countries training fact sheets.	100%	LMS	100%	achieved	All EU+ countries had automated factsheets on national training available in PowerBI.
Overall number of online sessions administered on the LMS.	460	LMS	671	exceeded	671 online sessions were administered (training and coaching requests increased under operational support).
Timely response to helpdesk requests.	80%	Request monitoring system (ticketing) 80% of the help-desk requests responded to within 3 working days	99%	exceeded	99% helpdesk requests (1,509) were responded to within 3 working days (incl. support requests by internal/external platform users).

2.5 Horizontal activities

2.5.1 Consultative Forum and civil society

Indicator	Target	Data source	Result	Status	Comment
Number of Consultative Forum (CF) meetings organised.	5	Meeting reports	4	nearly achieved	2 CF information webinars, 1 thematic meeting and 1 Plenary Meeting were organised. 1 planned workshop with civil society organisations on the revised CF under the EUAA was postponed to 2022 in view of the EUAA Regulation entering into force in January 2022.
Number of participants in CF meetings and activities and extent of satisfaction.	250 80%	Meeting evaluation forms (250, with min. 80% stakeholder satisfaction)	330 85%	exceeded	330 meeting participants, 85% participant satisfaction.
Number of consultations held with CSOs.	5	Progress report, consultation calendar on CF website	9	exceeded	9 consultations were held: • Asylum Report 2021 (two) • Staff Welfare Guide • Work Programme 2022 • Survey on Annual Plenary Meeting 2021 • General Report 2020 • Case-law database • Survey on country guidance • Preliminary Draft Work Programme 2023
Number and examples of areas (and related Agency activities) in which select CSOs were invited to participate (e.g. activities related to training, COI, asylum processes, vulnerable persons).	5	Internal reports	7	exceeded	7 areas involved CSOs (e.g., COI, training, VGs, external dimension, resettlement and humanitarian admission, operations, reception).
Number of activities of other JHA Agencies' Consultative Fora in which the Agency participated or contributed to.	6	Meeting reports	15	exceeded	15 activities were contributed to (e.g., Frontex CF meetings, exchanges with Frontex' fundamental rights officer).

Indicator	Target	Data source	Result	Status	Comment
Number of civil society networks in which the Agency participated.	3	Mission and meeting reports	5	exceeded	5 networks were participated in.

2.5.2 Governance activities

Indicator	Target	Data source	Result	Status	Comment
Timely assessment of the Agency processes requiring notification to DPO including DPIA (Data Protection Impact Assessment).	100%	DPIA report (for each specific process notified to DPO)	100%	achieved	100% of processes were assessed in a timely manner.
Timely provision of legal advice to ensure compliance with legal, administrative and policy obligations.	90%	Monitoring reports from an IT tool implemented (e.g. JIRA service desk customer portal), annual report of legal affairs	85%	nearly achieved	85% of legal advice was delivered timely. The result was slightly below the target due to change in workload allocation.
Timely replies to enquiries received via the EASO INFO mailbox.	90%	Internal review	100%	exceeded	100% of enquiries were replied timely to.
Percentage of access to documents requests timely responded to.	100%	Internal review	100%	achieved	100% of requests were responded in a timely manner.
Management awareness of the new ICF (percentage of managers attending internal control training).	85%	Course attendance records	87%	exceeded	87% management attendance.
Implementation of the preparatory measures as envisaged in the EUAA Transition Programme.	100%	Internal review	100%	achieved	100% of measures were implemented as envisaged (3 directly related to 'day one' of entry into force, and others continuing in 2022 and beyond).
Adoption and publication of corporate planning and programming documents and mandatory corporate reports in line with new regulatory requirements and within legal deadlines.	100%	MB meeting minutes, EASO website	100%	achieved	100% of documents and reports were adopted in line with requirements and within deadlines (with one *ex ante*

Indicator	Target	Data source	Result	Status	Comment
					exception due to prolonged budgetary consultations regarding 2022).
Timely implementation of the Agency's internal control self-assessment action plan.	90%	State of play of implementation of the IC self-assessment action plan	92%	exceeded	92% of actions were implemented timely.
Timely implementation of agreed risk responses in the Agency's risk register.	90%	State of play of implementation in the EASO risk register	90%	achieved	90% of actions were implemented timely.
Development and Implementation of management approaches in the areas of quality and business continuity. 25% of the three-year plan implemented.	90%	Implementation plans, project phase monitoring	96%	exceeded	96% of approaches were implemented timely (130 out of 136 actions scheduled for 2021 in quality management action plan). 25% target achieved (5% in quality, 45% in business continuity).
Percentage of completed evaluations on the number of planned evaluations to be completed.	90%	Evaluation advisory group	100%	exceeded	100% of planned evaluations were completed.
Percentage of change in the Agency website average monthly users.	+30%	Web analytics	+26%	nearly achieved	+26% increase in users (1.26M total page views in 2021, 997k total page views in 2020).
Total percentage of change in social media followers on all EASO channels.	+20%	Social media analytics	+24%	exceeded	+24% increase in followers (121,155 on 31.12.2021, 97,977 on 31.12.2020).
Percentage of change in monthly average social media reach.	+10%	+10% compared to 2020	+35%	exceeded	+35% increase in reach (3,168,250 in 2021, 2,355,463 in 2020).
Reach of mentions of EASO in press.	6,000,000,000	Meltwater analytical tool	18,100,000,000	exceeded	18,100,000,000 mentions of EASO in press.
Media exposure: number of news publications mentioning EASO.	4,000	Meltwater analytical tool	7,780	exceeded	7,780 publications were mentioning EASO.
Number of press interviews and questions.	150	Internal review	168	exceeded	168 interviews/questions were held / replied to.
Number of VIP meetings held with key stakeholders.	50	Internal review	76	exceeded	76 meetings were organised.

Indicator	Target	Data source	Result	Status	Comment
Number of bilateral and multilateral meetings held at strategic/horizontal level.	100	Internal review	112	exceeded	112 meetings were organised.
Number of external meetings and/or events participated in.	100	Internal review	190	exceeded	190 meetings/events were participated in.
Number of networking/information events organised for stakeholders.	4	Internal review	5	exceeded	5 events were organised.
Timely provision of briefings/LTTs as required.	100%	Internal review	100%	achieved	100% of briefings/LTTs were provided timely.

(i) Executive Director's KPIs

Indicator	Target	Data source	Result	Status	Comment
Implementation of planned activities (WP), utilisation of planned financial (budget) and human (establishment plan) resources (a combined average).	80%	Quarterly monitoring reports	91%	exceeded	92% activities were implemented timely (Work Programme 2021 85%, budget 2021 for CAs 97%, the establishment plan 92% incl. offered posts).
Timely implementation of audit and governance related (internal control self-assessment, risk assessment, *ex post* controls, etc.) recommendations (a combined average).	80%	Quarterly monitoring reports	91%	exceeded	91% recommendations were implemented timely (corrective actions 92%, risk responses 90%; all recommendations/ findings from the IAS and ECA audits were included in the register of deficiencies and corrective action plan).

Part II (a): Management

II.1 Management Board

II.1.1 Significant items approved or decided by the Management Board

The MB gives general orientation for the Agency's activities and ensures that the Agency performs the duties and tasks assigned to it. In 2021 the MB was composed of one representative from each Member State, two members from the EC, and a non-voting representative of the United Nations High Commissioner for Refugees (UNHCR). Denmark was invited to attend MB meetings without the right to vote. Countries that concluded agreements with and participate in the Agency's work, i.e., Iceland, Liechtenstein, Norway and Switzerland, participated as observers in the MB.

In 2021, the MB convened for its 38th meeting on 18th March (videoconference), 39th meeting on 21-22 June (videoconference), 40th meeting on 16-17 September (hybrid meeting) and 41st meeting on 11-12 November (videoconference). MB voting members participated in an extraordinary session on 1 September (videoconference). The MB meetings were preceded by Preparatory Group meetings on 16 February (14th meeting), 21 May (15th meeting), 31 August (16th meeting) and 21 October (17th meeting). According to Article 8 of the Rules of procedure of the MB of EASO[3] decisions of the MB may be taken by written procedure.

The MB adopted/endorsed the following items by means of written procedure in 2021:
1. Country Guidance on Afghanistan (endorsed on 26 January 2021)
2. Preliminary Draft Single Programming Document (SPD) 2022-2024, WP and Budget 2022 (endorsed on 29 January 2021)
3. Country Guidance on Iraq (endorsed on 5 February 2021)
4. Amendment 1 of the SPD 2021-2023, WP and Budget 2021 (adopted on 18 February 2021)
5. Amended Working Arrangement between EASO and UNHCR (endorsed on 12 May 2021)
6. Annual General Report 2020 (adopted on 11 June 2021)
7. Decision no 74 amending MB Decision no 54 of 14 August 2019 on the EASO Financial Regulation (adopted on 28 July 2021)
8. Decision no 75 on the profile of experts made available for the Asylum Support Teams (Asylum Intervention Pool) in view of their participation in the operational support activities coordinated by the Agency (adopted on 28 July 2021)
9. Decision no 76 amending MB Decision no 16 of 23 November 2012, as amended on 8 November 2016 detailing the rules of reimbursement of costs in EASO operational support activities (adopted on 28 July 2021)
10. Decision no 77 on middle management staff (adopted on 26 August 2021)
11. Decision no 78 concerning the function of adviser (adopted on 26 August 2021)
12. Decision no 79 on the types of post and post titles in EASO (adopted on 26 August 2021)
13. Decision no 80 on laying down implementing rules on temporary occupation of management posts (adopted on 26 August 2021)
14. Decision no 81 on setting up a Staff Committee (adopted on 26 August 2021)

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[3] Decision no 9 of the MB of the European Asylum Support Office of 19 June 2012 on the Rules of Procedure of the MB of EASO.

15. Decision no 82 on the Framework for Learning and Development (adopted on 26 August 2021)
16. Decision no 83 on measures concerning unpaid leave for temporary and contract staff of the EU (adopted on 26 August 2021)
17. Decision no 84 on the non-application of the Commission Decision on the maximum duration of the recourse to non-permanent staff in the Commission services (adopted on 26 August 2021)
18. Decision no 86 on the application by analogy of Commission Decision C(2018) 4048 of 29 June 2018 on outside activities and assignments and on occupational activities after leaving the service to EASO (adopted on 13 September 2021)
19. Decision no 87 on the application by analogy of Commission Decision C(2015) 9720 of 8 January 2016 on Article 55a of the Staff Regulations and Annex IVa thereto, concerning part-time work to EASO (adopted on 13 September 2021)
20. Decision no 88 on the amendment of Decision no 23 of the MB of EASO of 1 December 2014 as regards the adoption by analogy of Commission Decision C(2013) 9051 of 16 December 2013 on leave (adopted on 13 September 2021)
21. Decision no 89 on the amendment of Decision No 10 of the MB of EASO of 4 July 2012 as regards the adoption by analogy of Commission Decision C(2011)1278 of 3 March 2011 on the general implementing provisions of Article 11 and 12 of Annex VIII to the Staff Regulations on the transfer of pension rights (adopted on 13 September 2021)
22. Decision no 90 on the application by analogy of Commission Decision C(2019) 6855 of 4 October 2019 on procedures for dealing with professional incompetence to EASO (adopted on 13 September 2021)
23. Decision no 91 on the MedCOI Database Access Policy (adopted on 7 October)
24. Country Guidance on Nigeria (endorsed on 15 October 2021)
25. SPD 2022-2024 including WP and Budget 2022 (adopted on 25 October 2021)
26. Country Guidance on Afghanistan (endorsed on 10 November 2021)
27. Country Guidance on Syria (endorsed on 29 November 2021)
28. Decision no 92 authorising the ED to request the Commission's agreement to the adoption by the Agency of its implementing rules for giving effect to the Staff Regulations of Officials and the Conditions of Employment of Other Servants of the EU regarding the delegation of the powers of the appointing authority and of the authority empowered to conclude contracts of employment to the ED (adopted 8 December 2021)
29. Revision 1 of the SPD 2022-2024, WP and Budget 2022 (adopted on 20 December 2021)

In addition to these, the MB adopted a restricted decision by way of written procedure:
• Decision no 85 (adopted on 20 August 2021)

In line with Article 8 of the MB Rules of procedure, all decisions were taken unanimously.

Significant items approved or decided by the MB at its meetings in 2021:
• New Chairperson of the MB (elected on 18 March 2021)
• EASO Strategy on Reception (adopted on 18 March 2021)
• MB Decision no 71 on Governance Monitoring Indicators and Quarterly Reporting (adopted on 18 March 2021)
• New Deputy Chairperson of the MB (elected on 21 June 2021)
• Annual Accounts 2020 (adopted on 21 June 2021)
• CAAR (adopted on 21 June 2021)
• Asylum Report 2021 (adopted on 21 June 2021)
• MB Decision no 71 on the renewal of the contract of employment of the Accounting Officer of EASO (adopted 21 June 2021)

- Amendment 2 of the SPD 2021-2023, WP 2021 and Budget 2021 (adopted 21 June 2021)
- Revised draft SPD 2022-2024 including WP 2022 and Budget 2022 (endorsed on 21 June 2021)
- Preliminary draft SPD 2023-2025, WP 2023 and Budget 2023 (endorsed on 11 November 2021)

II.1.2 Significant risk and control issues signalled to and discussed with the Management Board

During 2021, the ED, with the support of the Internal Control Coordinator (ICC), effectively implemented the following policies and/or control activities seeking to effectively oversee and report significant risks and internal control issues to the Management and the MB, as well as ensuring the development and performance of internal control:

- In accordance with the ICF of EASO[4] and the ED Decision on the "methodology[5] for the assessment of internal control systems and defined internal control monitoring criteria for 2020-2021", the Management concluded whether components of internal control are present and functioning and ensured that significant risks and control issues were signalled to and corrective actions discussed with the Management and, when appropriate, with the MB;
- Regarding risk management, the annual exercise is aligned with the planning and programming cycle, and that significant and critical risks, together with the appropriate risk responses, were reported to the Management and, when appropriate, to the MB in a timely manner;
- The EASO anti-fraud strategy 2020-22[6] was timely followed up and monitored, and reported to the Management and, when appropriate, to the MB in a timely manner;
- On 7 May 2021, the ED implemented a new Decision[7] 'on the establishment of a Risk-Based Strategy for financial ex post controls'. The results of the implementation of this strategy shall provide one of the sources of information for the ED when providing her declaration of assurance in this report;
- The MB received quarterly reports on the progress of the governance monitoring indicators as per MB Decision 71. Additionally, quarterly progress reports on the implementation of the annual WP were provided to the MB.

More detailed information on the above processes and policies related to reporting and monitoring of significant and critical risks and internal control issues is presented in Part III and Part IV of this report.

Appropriate working arrangements and communication channels, other than the CAAR and the SPD, are in place to facilitate the monitoring of the Agency's significant and critical risks and internal control issues identified by the control activities described above by the MB. For each Preparatory Group and MB meeting, the Agency prepares cover notes, with relevant supporting documentation, on the state of play of internal controls with a particular focus on: (i) follow-up on the implementation of corrective actions related to IAS and ECA findings, (ii) the state of play of the corrective actions of the internal control deficiency register and action

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[4]   Management Board Decision no. 42 of 21/12/2018 adopting a new internal control framework of EASO.
[5]   EASO/EDD/2020/142 of 26/10/2020.
[6]   EASO/MB/2020/067 of 06/07/2020.
[7]   EASO/EDD/2021/010 of 07/05/2021.

plan, and (iii) developments in risk management. Since Q4 2020, the state of play of the implementation of the fraud risk register action plan forms part of the cover notes to the MB.

Further information and details about the internal control action plans are available in Annex IX and Annex XI.

II.2 Major developments

COVID-19 had a significant impact on the organisation. In the human resources (HR) domain, this resulted in an overhaul of recruitment procedures. Due to the high priority given on filling posts – over one hundred new posts were to be filled - some backlog from the past year had to be handled as well as the replacement of departing staff. The Agency therefore swiftly and effectively moved its entire selection procedure on-line. This created a considerable additional workload for HR staff and delayed ongoing selections. Despite of this, the Agency increased its implementation rate of the establishment plan (2019 80%, 2020 83.6% and 92.3% in 2021) and kept turnover levels at healthy levels. Additionally, training sessions and the newcomer staff induction sessions were conducted online.

In 2019, the legal function was re-established, and gradually reinforced throughout 2020 and 2021. In 2021 the Legal Affairs and Data Protection Sector (LDPS) was responsible for matters related to legal affairs, data protection, EU Ombudsman, and public access to documents. During 2021 the LDPS demonstrated its value by advising and supporting the ED and the Management in implementing EASO's mandate. LDPS contributed to ensuring a sound legal environment for the overall functioning of the Agency, by providing legal advice on strategic matters and in all matters having legal implications. Additionally, LDPS handled litigation and pre-litigation, including representing the Agency in court proceedings, in particular before the European Court of Justice.

The Agency continued to strive towards full compliance with all IC principles through regular assessments measuring their effectiveness to improve the efficiency of its IC system. The implementation of the IC framework has been further reinforced with a new ED Decision[8] on a risk-based ex post controls strategy to assess the legality and regularity of operations and to ensure that financial controls strike the right balance with the principles of economy, efficiency and effectiveness. Financial ex post controls increase the assurance on the sound financial management of the Agency's budget and reduce the risk of irregularities by recommending corrective actions to the ED and the Management.

II.3 Budgetary and financial management

The Agency's estimates of revenues and expenditures (budget) and SPD 2021-2023, including the WP 2021 were adopted by the MB on 29 September 2020. The 2021 budget amounting €142 million was in line with the 2021-2027 Multi-Annual Financial Framework (MFF) ceilings and was adopted by the Budgetary Authority on 17 December 2020, following the conciliation procedure. The Agency's staff request was for 550 for 2021.

II.3.1 Implementation of appropriations

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[8]   EASO/EDD/2021/010 of 07/05/2021.

Income in 2021

The main source of income in 2021 was as usual the EU contribution followed by the Associate countries (AC) contributions, a grant from the EC and Member States voluntary contributions. The below graph shows the composition of revenues in 2021.

Budget execution of income appropriations per fund source (does not include the carried over amounts):

Budget Title	Fund source	Description	Current budget (€)	Entitlements established *	Revenue received (€)	Remaining balance (€)
				Income appropriations		
2	IC1	EU contribution (Commission subsidy - titles 1, 2 and 3)	142,114,334.00	142,114,334.00	142,114,334.00	0.00
3	IR1	Associate countries contributions	9,505,536.10	9,505,536.10	9,505,536.10	0.00
4	IC4	Miscellaneous income	0.00	0.00	0.00	0.00
	IR1	Other contributions	1,123,658.00	1,445,500.45	1,445,500.45	0.00
	IR11		0.00	0.00	0.00	0.00
5	IC1	Administrative operations	0.00	0.00	0.00	0.00
	IC1	Miscellaneous income	0.00	0.00	0.00	0.00
	IC4		0.00	54,518.94	54,518.39	0.00
		Total income	**152,743,528.00**	**152,119,888.94**	**153,119,888.94**	**0.00**

* Amounts cashed in Q4 for IPA II project and Member States contributions (Title 4-Other contributions) were not budgeted, only pro memoria tokens were included allowing for the income to be received at a later stage.

Notes:
- *Miscellaneous income was not budgeted.*
- *All miscellaneous income relates to recovery of expenses.*
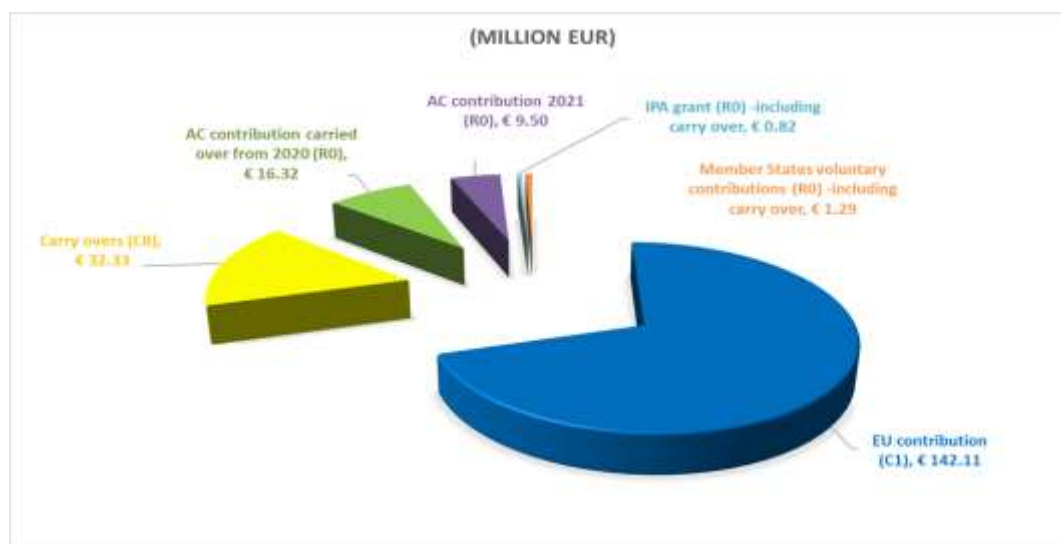
Expenditure in 2021

Overall budget execution (all fund sources)

The following tables show the overall budget execution in 2021 per budget title and fund source for commitment appropriations (CA) and payment appropriations (PA), including:

1. C1: funds from the EU general budget;
2. C4: amounts recovered in 2021;
3. C5: amounts recovered in previous years;
4. C8: automatic carry-overs from previous year(s);
5. R0: associate countries' contributions and grants.

Budget execution of commitment appropriations per fund source:

Budget title	Fund source	CA budgeted (€)	CA implemented (€)	CA %
Title 1 -Staff expenditure	C1	41,192,625.00	40,896,519.47	99.28%
	C4	27,481.00	0	0.00%
	C5	1,764.74	1,764.74	100.00%
	C8	1,187,485.55	765,976.76	64.50%
Total Title 1		42,409,356.29	41,664,260.97	98.24%
Title 2 – Infrastructure and operating expenditure	C1	15,637,935.00	14,119,836.72	90.29%
	C4	21,245.40	0	0.00%
	C5	19,880.33	2,523.71	12.69%
	C8	5,539,760.08	4,930,291.34	89.00%
	R0	10,213.40	6,039.08	59.13%
Total Title 2		21,229,034.21	19,058,690.85	89.78%
Title 3 – Operational expenditure	C1	85,283,774.00	82,367,505.08	96.58%
	C4	5,791.99	0	0.00%
	C5	19,258.00	19,185.59	99.62%
	C8	25,606,805.25	23,520,327.54	91.85%
	R0	25,822,199.30	640,575.38	2.48%
Total Title 3		136,737,828.54	106,547,593.59	77.92%
Title 4 – Other external projects	R0	2,113,032.52	1,773,333.81	83.92%
Total Title 4		2,113,032.52	1,773,333.81	83.92%

Budget execution of payment appropriations per fund source:

Budget title	Fund source	PA budgeted (€)	PA implemented (€)	PA %
Title 1 -Staff expenditure	C1	41,192,625.00	39,361,650.51	95.56%
	C4	27,481.00	0	0.00%
	C5	1,764.74	465.63	26.39%
	C8	1,187,485.55	765,976.76	64.50%
Total Title 1		42,409,356.29	40,128,092.90	94.62%
Title 2 – Infrastructure	C1	15,637,935.00	9,672,777.47	61.85%
	C4	21,245.40	0	0.00%

and operating expenditure	C5	19,880.33	2,523.71	12.69%
	C8	5,539,760.08	4,930,291.34	89.00%
	R0	10,213.40	0	0.00%
Total Title 2		21,229,034.21	14,605,592.52	68.80%
Title 3 – Operational expenditure	C1	85,283,774.00	80,154,656.37	93.99%
	C4	5,791.99	0	0.00%
	C5	19,258.00	19,258.00	100.00%
	C8	0.00	0	0.00%
	R0	25,822,199.30	306,645.38	1.19%
Total Title 3		111,131,023.29	80,480,559.75	72.42%
Title 4 – Other external projects	R0	2,113,032.52	999,351.59	47.29%
Total Title 4		2,113,032.52	999,351.59	47.29%

Contribution from the general budget of the European Union (EU subsidy)

The EU subsidy received by EASO increased from €124.07 million of CA and PA in 2020 to €142.11 million of CA and PA in 2021 (+ €18.04 million). EASO implemented 96.67% of the CA and 90.91% of the PA.

Budget title	CA budgeted (€)	CA executed (€)	CA (%)	PA budgeted (€)	PA executed (€)	PA (%)
Title 1	41,192,625.00	40,896,519.47	99.28%	41,192,625.00	39,361,650.51	95.56%
Title 2	15,637,935.00	14,119,836.72	90.29%	15,637,935.00	9,672,777.47	61.85%
Title 3	85,283,774.00	82,367,505.08	96.58%	85,283,774.00	80,154,656.37	93.99%
Total	**142,114,334.00**	**137,383,861.27**	**96.67%**	**142,114,333.00**	**129,189,084.35**	**90.91%**

Despite the complexity related still to the COVID-19 outbreak in terms of budget management, the Agency managed to reach an overall implementation rate of CA for the year of 96.67%, which exceeded the set indicator. The execution rate of PA was 90.91%, which was in line with expectations.

Execution of external assigned revenues - R0 credits

R0 credits of EASO for 2021 corresponded to contributions from:
- AC, namely the Kingdom of Norway, the Swiss Confederation and the Principality of Liechtenstein,
- The ad hoc grant agreement signed by EASO as beneficiary with the EC,
- direct voluntary contributions from Member States for the RDPP NA regional project.

- **AC contributions**
Following the signed political agreements with the Kingdom of Norway, the Swiss Confederation and the Principality of Liechtenstein for their participation in EASO's activities, their annual contribution (calculated in accordance with the Gross Domestic Product (GDP) as a percentage of the GDP of all participating countries in EASO's activities) was established as follows:
- €3,069,712.11 from the Kingdom of Norway

- €6,381,413.90 from the Swiss Confederation
- €54,410.09 from the Principality of Liechtenstein

The arrangements do not earmark the funds for specific activities. EASO has allocated the funds on a separate item of expenditure of the budget 2021 (budget item B03601) to show the funds necessary to cover other operational expenditure which may require quick mobilisation if unforeseen or urgent operational activities arise.

- **IPA grant - Phase II**

On 20 December 2018, EASO signed a grant agreement with the EC for the implementation of the "Regional Support to protection-sensitive migration management system in the Western Balkans and Turkey – Phase II – Contract 3" and the first pre-financing amounting to €742,040.50 was received on 24 January 2019. The amount of €117,532.077 was carried over from 2020 to 2021. The second pre-financing amounting to €585,909.50 was cashed in February 2021 and the third pre-financing amounting to €120,121.33 in December 2021.

- **Direct Member States contributions to EASO revenue and expenditures**

Under the umbrella of RDPP NA, the Agency signed in 2020 agreements with the Czech Republic and Denmark on the modalities for the voluntary financial contribution to the EASO – Third Country Support, Middle East and North Africa (MENA) Activities. In September 2020 the Agency received the contribution from the Czech Republic in one instalment of €550,000 and in February 2021 received the contribution from Denmark amounting to DKK 2.6M (€349,495.25).

Additionally, the Agency signed a 24 months' agreement with Denmark for the contribution to the EASO Cooperation Roadmap with Egypt – for an enhanced protection space for asylum seekers and refugees in Egypt in line with CEAS and EU standards. The first instalment amounting to DKK 1.4 M (€188,253) was received in March 2021 and the second instalment amounting to DKK 1.5 M (€201,721.36) was received in October 2021.

Execution of R0 credits per Title

The R0 credits allocated in Title 2 and 3 correspond to the contributions of the Kingdom of Norway, the Swiss Confederation and the Principality of Liechtenstein received in 2021 and also carried over from 2020 to the 2021. Those in Title 4 correspond i) to the instalments of the IPA II grant agreement fresh credits and also appropriations carried over from 2020 to the 2021 and, ii) to the direct contribution received from Czech Republic and Denmark both in 2021 and carried over from 2020.

Budget title	CA budgeted	CA executed	CA %	PA budgeted	PA executed	PA %
Title 2	10,213.40	6,039.08	59.13%	10,213.40	-	-
Title 3	25,822,199.30	640,575.38	2.48%	25,822,199.30	306,645.38	1.19%
Title 4	2,113,032.52	1,773,333.81	83.92%	2,113,032.52	999,351.59	47.29%
Total	**27,945,445.22**	**2,419,948.27**	**8.66%**	**27,945,445.22**	**1,305,996.97**	**4.67%**

II.3.2 C1 credits commitments for actions extending for more than one financial year

The Financial Regulation provides, generally, that a budgetary commitment needs to be made for an amount covering the total amount foreseen in the respective legal commitment.

Non-differentiated C1 appropriations (Title 1 and Title 2) corresponding to obligations duly contracted at the close of the financial year and not yet paid, are carried over automatically to the following financial year, together with the payment appropriations. €5,983,227.32 have been carried over from 2021 to 2022 in Title 1 and 2.

Differentiated C1 appropriations (Title 3) corresponding to obligations duly contracted at the end of the financial year and not paid yet, are carried over automatically to the following financial year and become C8 appropriations, without corresponding payment appropriations.

A total amount of €25,733,103.84 was carried over from 2021 to 2022 in Title 3, out of which the amount of €526,838.78 corresponds to a carry-over from 2020 to cover payments for ongoing multi-annual contracts / legal obligations.

The main components of the automatic carry-over were pre-recruitment medical expenses, staff training expenses, schooling expenses, temporary workers expenses, in Title 1, building and ICT related expenses in Title 2 and temporary workers, interpretation expenses, containers, various consultancy services, costs related to deployed experts and translations of the Agency's products in Title 3.

II.3.3 Budget transfers

In 2021 seven transfer decisions of appropriations were executed by the ED in line with Article 26 of EASO's Financial Regulation. Four were made within budget titles (from one chapter to another and from one item to another) and three were between titles (one from one title to another up to a maximum of 10% of the appropriations for the year shown on the line from which the transfer is made and two beyond that 10% limit, adopted by the MB). According to Art. 26.4 of the Agency's financial regulation, the MB was informed about all transfers made.

A detailed list of transfers adopted by the ED - summarised per item – is presented in Annex II.

II.3.4 Amending budget

On 21 June 2021, the MB adopted the budget amendment 1 to formally incorporate the following elements:
- AC contributions (as per the bilateral arrangements between the EU and the Kingdom of Norway, the Swiss Confederation and the Principality of Liechtenstein for their respective participation in EASO's activities);
- The outcome of the mid-year budget and planning review (MYBPR21) - the transfers of credits within and between titles;
- The second pre-financing of IPA grant – PHASE II;
- The direct Member States contributions to EASO revenue and expenditures for the regional pilot project under the umbrella of the regional development pilot project North Africa (RDPP NA) - contribution received from Denmark in two instalments.

List of amending budgets adopted by the MB:

	Date of adoption	Main subject Description	Impact on commitment appropriations (€)	Impact on payment appropriations (€)
1	21/06/2021	Incorporate €9.5M of AC contributions, €0.58M of IPA II grant, and €0.54M of Member States contributions	+ 10,629,194	+ 10,629,194

II.3.5 Appropriations carried forward from 2021 to 2022

Non-differentiated C1 appropriations carry-forward (C8) from 2021 to 2022

Non-differentiated C1 appropriations (Title 1 and Title 2) corresponding to obligations duly contracted at the close of the financial year and not paid are carried over automatically to the following financial year, together with the payment appropriations.

Budget title	CA carried over (C1) (€)	PA carried over (C1) (€)
Title 1	1,534,868.96*	1,534,868.96*
Title 2	4,447,059.25	4,447,059.25

* *In addition to C1 appropriations carried over to 2022, in Title 1 €1,299.11 has been carried over from C5 appropriations.*

Differentiated C1 appropriations carry-forward from 2021 to 2022

Differentiated C1 appropriations (Title 3) corresponding to obligations duly contracted at the end of the financial year and not paid, are carried over automatically to the following financial year and become C8 appropriations, without corresponding payment appropriations.

Budget title	CA carried over (€)	PA carried over (€)
Title 3	25,733,103.84	-

Out of €25,733,103.84 carried over to 2022, €526,838.78 was carried over from 2020 to cover payments for ongoing multi-annual contracts / legal obligations.

II.3.6 Appropriations carried forward from 2020 to 2021

Automatic carry-forwards are appropriations that were committed in the current or previous year(s) and not paid by 31 December. The total amount carried forward from 2020 to 2021 was €32.33 million in CA and €6.73 million in PA.

As commitments carried forward on Title 3 refer to differentiated appropriations, only the CA are automatically carried over whereas PA are cancelled. Payments under differentiated appropriations will consume fresh PA credits of the year. In 2021, 9.64% of the automatic carried forward CA have been decommitted and cancelled.

In Title 1 and Title 2, out of €6.73 million carried over, €5.7 million have been paid (84.67%). The cancellations of carried over payment appropriations in 2021 amounted to €1.03 million (15.33%). These were mainly related to COVID-19 outbreak effects during 2021:

- cancelled/postponed missions, administrative training, delays in taking up duties for new staff;
- cancelled canteen services (due to closure), partially cancelled cleaning and security services, utilities' costs lower than expected;
- de-prioritisation and partial cancellation of planned maintenance works of the building in Malta;
- provision of less services than contracted (i.e., interim agents due to unpaid absences, ICT consultancy services due to less hours than contracted).

In Title 3, out of €25.61 million carried over CA, €22.99 million were paid (with C1 PA credits). De-commitments on C8 reached 8%, with a total amount of €2.09 million de-committed and the amount of €0.53 million carried over to 2022.

Similarly, in Title 3 cancellations of carried over appropriations were mainly caused by:
- lower than contracted/expected services and payments due given the limitations in travel and meetings;
- cancelled/postponed/remodulated face-to-face meetings, training courses, events and also deployment of experts (arranged remotely at lower than planned cost);
- temporary workers' absenteeism and earlier resignations.

Budget title	CA budgeted	CA executed	CA cancelled	CA cancelled %	PA budgeted	PA executed	PA executed %
T1	1,187,307.97	765,976.76	421,508.79	35.50%	1,187,307.97	765,976.76	64.50%
T2	5,539,760.08	4,930,291.34	609,468.74	11.00%	5,539,760.08	4,930,291.34	89.00%
T3	25,606,805.25	23,520,327.54	2,086,477.71	8.15%	-	-	-
Total	**32,334,050.88**	**29,216,595.64**	**3,117,455.24**	**9.64%**	**6,727,245.63**	**5,696,268.10**	**84.67%**

II.3.7 Procurement types

In 2021, the Agency launched the following types of procurement procedures:

Type of procedure	Number	Percentage (%)
Open call	26	31.33
Negotiated with minimum five competitors	7	8.43
Negotiated with minimum three competitors	10	12.05
Negotiated with minimum one candidate	35	42.17
Competitive with negotiation (Point 12 of FR Annex	1	1.20
Negotiated without prior publication of a contract notice (Point 11 of FR Annex I)	4	4.82
Total	**83**	**100**

Additionally, one call for expression of interest for remunerated experts (which is not considered a procurement procedure) was launched under Article 237 of EASO Financial Regulation.

II.3.8 Interest on late payments and payments performances

The majority of payments need to be processed within thirty calendar days (the legal time limit) from the receipt of invoice. Late payments may generate late interest to be paid to the recipient.

In 2021 the Agency paid late payment interest amounting to €3,002.57.

In 2021, a total of 6,003 payments were executed out of which 212 were late. This corresponds to a late payment rate of 3.53%. The ratio of late payments is much lower than in 2020 (-2.76% compared to 2020: 3.53% versus 6.29%) and confirms the improvements started in September 2019. In 2021 the Agency stabilised the timely payments below the desired threshold of 5%.

It should be noted that the total number of payments in 2021 (6,003) increased compared to 2020 (5,313). However, 2021 was still affected by COVID-19 outbreak side effects (3,868 less payments than in 2019). The number of late payments in 2021 continued to decrease and resulted in 122 less late payments than in 2020 (212 versus 334, -36.5%).

	2019	2020	2021
Number of PR	9,871	5,313	6,003
Late payments	1,312	334	212
% of late payments	13.29%	6.29%	3.53%
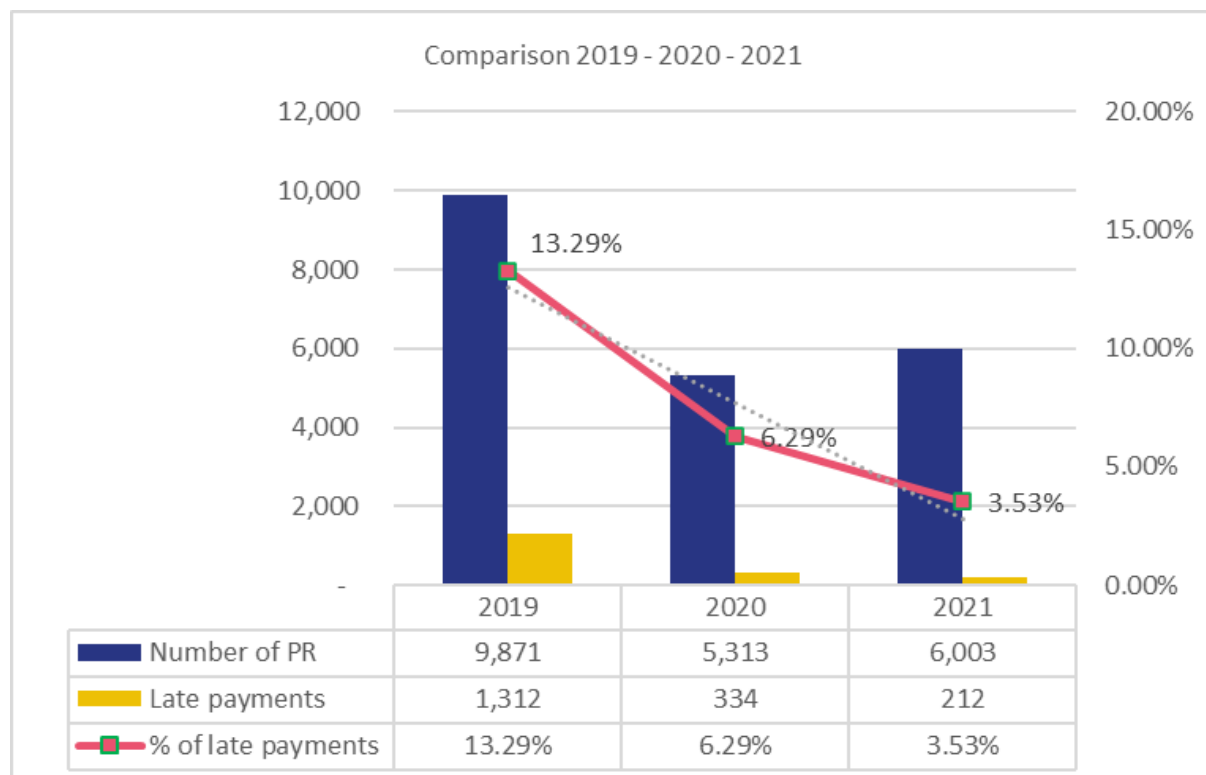
II.3.9 Budgetary operations in 2021

The Agency's budgetary operations in 2021 are reported above.

II.3.10 Budget management controls

Exceptions and non-compliances coverage and results

Exceptions and non-compliance events cover deviations which are not initially foreseen by the procedures and therefore require individual follow-up. If such deviations are approved before an action is taken (ex ante), they are called 'exceptions.' If they are detected after an action was taken (ex post), they are 'non-compliance events'.

Both exceptions and non-compliance events can consist of errors, flaws or even potential cases of fraud. The Agency has therefore put control activities in place to ensure that: (i) all instances of overriding controls or deviations from established processes and procedures are documented in exception (ex ante) or non-compliance (ex post) reports; and (ii) all instances of overriding controls or deviations ex ante are required to be justified and approved before action is taken, and logged centrally, and (iii) corrective actions are implemented in a timely manner.
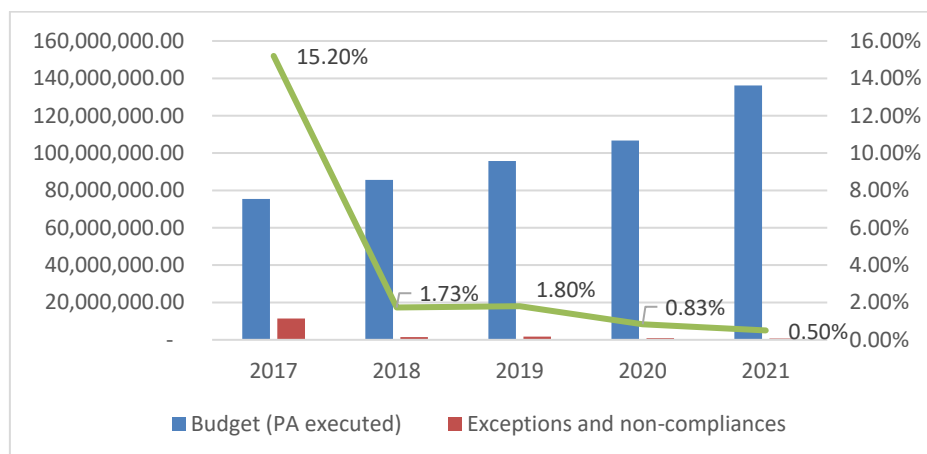
Exceptions and non-compliance events are registered through a dedicated electronic workflow. Approved deviations are recorded in the register of exceptions and non-compliances. Monthly reports are addressed to the Management on the number of exceptions and non-compliances, including an assessment per typology and a trend analysis compared to previous years, to ensure a close follow-up and monitoring of the register. In addition, the implementation of the corrective actions is monitored on a quarterly basis.

During 2021, a total of 23 exceptions and two non-compliance events were recorded, an improvement compared to 35 exceptions and 11 non-compliances recorded during the same period in 2020.

Assessing the financial impact of overriding controls or deviations from the established processes and procedures (exceptions), the ED justified, approved, and logged centrally exceptions and non-compliance events for €685,237.27 which constitutes 0.5% of the Agency's PA executed for the year. This means that the amount is below the materiality threshold of 2% and therefore there is no reason to issue a reservation.

The exceptions and non-compliance events are one of the main indicators of the efficiency and effectiveness of the Agency's ICF. It should be acknowledged that as a result of the improvement of the IC system, the ratio[9] between the value of exceptions and non-compliances in relation to the overall budget has been decreasing since 2019 with a significant reduction of the financial impact of 72% from 2019 (1.8%) to 2021 (0.5%) as demonstrated in the following graph:

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[9]   The ratio is calculated in the following way: total value of exceptions and non-compliances is divided by the payment appropriations executed in the particular financial year: 2017 = 11,458,803.95/75,390,655.13 EUR executed payment appropriations, 2018 = 1,481,220.07/85,666,273 EUR executed payment appropriations and 2019 = 1,721,998.44 / 95,740,025 EUR executed payment appropriations, 2020 = 89,0167.16/106,751,137 EUR executed payment appropriations, 2021 = 685,237.27/136,213,596.76 EUR executed payment appropriations.

In 2021, the Agency maintained the trend of reducing the number and financial impact of exceptions and non-compliances per year since 2019 despite the increased budget. The ED acknowledges the need to further reduce the number of exceptions and non-compliances.

***Ex post* controls coverage and results**

During 2021, the scope of general ex post controls was limited to an assessment of the efficiency and effectiveness of the IC processes and procedures in accordance with IC principles 16[10] and 17[11].

The results and coverage of the general ex post controls, including indicators on the legality and regularity of these, are extensively documented and explained in detail in Part III and Annexes IX ''internal control self-assessment corrective action plan' and XI 'internal control monitoring criteria results for 2021'. These results contribute to the assessment on the achievement of the following IC objectives defined in Article 30.2 of the EASO financial regulation:

- Sound financial management (economy, efficiency, effectiveness and performance of processes and procedures);
- Reliable reporting;
- Prevention, detection, correction and follow-up of irregularities and fraud;
- Safeguarding of assets and information;
- Adequate management of risks relating to the legality and regularity of the underlying transactions.

A financial ex post control internal capability was established in the Agency in 2021 to assess the efficiency and effectiveness of its financial internal control systems as well as the legality and regularity of financial operations. To this end the Agency's Management adopted a risk-based strategy for specific ex post controls of financial operations on 7 May 2021. In order to support the ED in overseeing the internal control system and to increase assurance provided on the functioning of it, the financial ex post controls were implemented for the financial year 2020 and financial year 2021 during the course of 2021 covering the following areas:

- legality and regularity of financial operations;
- contract management and procurement processes;
- review of ABAC access rights (neutral verification), delegations and nominations

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[10]   Principle 16 'The Agency selects, develops, and performs ongoing and/or separate assessments to ascertain whether the components of internal control are present and functioning'.

[11]   Principle 17 'The Agency assesses and communicates internal control deficiencies in a timely manner to those parties responsible for taking corrective action, including the MB and senior management, as appropriate'.

- analysis of results of controls in place and in particular control bodies recommendations and exceptions reports;
- efficiency and effectiveness of financial control systems.

The final financial ex post report is expected to be validated by Q2 2022. Once results are validated the corrective actions will be quarterly reported to and monitored by the Management and MB through Annex IX internal control self-assessment corrective action plan.

II.3.11 Cost and benefits of controls (effectiveness, efficiency and economy of controls)

The Agency, together with other EU bodies, is working on a methodology to ensure a risk approach to its IC systems and to consider the cost effectiveness of controls as part of an overall IC strategy. The Agency has identified ex ante financial verifications, ex post controls and evaluations as the main control activities present in the Agency.

Cost and benefits of *ex ante* financial controls

Completeness of the coverage of **ex ante financial controls** implemented by the Finance and Procurement Unit (FPU):
- Coverage per kind of expenditure operation (financial and in number of transactions);
- Indicators of the 'legality and regularity' of the underlying transactions;
- Corrective actions;
- Late payment analysis trend analysis (simplified/not simplified).

***Ex ante* controls** are various controls and checks put in place by the authorising officer to ensure that the implementation of revenue and expenditure is in accordance with the principle of sound financial management and in compliance with the regulatory framework. They are an essential element of the Agency's ICS. The ED is fully responsible for defining the organisational structure and the control systems on the basis of a risk analysis which takes into account their cost effectiveness and performance.

In line with the existing perception of risks, in 2021 the Agency performed comprehensive *ex ante* controls in 100% of procurement files and budgetary commitments, and 89% of payment transactions corresponding to 98% of the paid budget. The remaining transactions, for which the *ex ante* risk is deemed low, the verification and the authorisation functions are made by the same person.

Cost and benefits of *ex post* controls
The cost and benefits of ex post controls is measured by analysing the resources dedicated to their implementation (measured in number of days during 2021) compared to the added value of the ex post control results measured in terms of corrective actions, recommendations or any other benefit (e.g., recovery orders).

During 2021, 130 working days were dedicated to the implementation of **general ex post controls for the annual IC self-assessment**.

In 2021 130 person-days representing a total of 0.62 Full-time Equivalents (FTEs)[12] were dedicated to the implementation of general ex post controls for the annual IC self-

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[12]   1 FTE = 210 days per year. If one staff member works on controls/project for 50 days in one year, the formula is 50 / 210 = 0.24 FTE

assessment. The assessment resulted in 55 recommendations and 81 corrective actions that have been approved by the Management and are available in Annex IX 'internal control self-assessment corrective action plan 2021'.

A risk-based strategy for **financial ex post controls** was developed at the end of 2020. The strategy was adopted by the ED on 7 May 2021 following discussion with the Management and communicated to all staff. This risk-based ex post control strategy provided the Management with:

- a risk analysis per stratum for financial operations;
- the coverage and sampling;
- the financial ex post control methodology;
- the extent of controls to be implemented;
- the reporting methodology including the process for the validation and monitoring of corrective actions and recommendations;
- an analysis and evaluation of the cost and benefits of the financial ex post controls.

As the risk-based financial ex post control strategy takes into account the cost and benefits of controls, the ICRS has designed a planning and monitoring tool for resource allocation. During 2021, the annual resources dedicated to financial ex post controls were calculated by analysing the following three categories of financial ex post controls: a) ex post controls of financial operations, b) ex post controls of procurement files, and c) periodic validation of access rights granted in ABAC:

a) Ex post controls of financial operations

Assessment of person-days of the sample	
Person-days spent for verification of the sampled transactions	127
Mark-up for further research, analysis, reporting	96
Total person-days	223

b) Ex post controls of procurement files

Assessment of person-days of the sample	
Person-days spent for verification of the sampled transactions	20
Mark-up for further research, analysis, reporting	15
Total person-days	35

c) Periodic validation of access rights granted in ABAC

Assessment of person days of Periodic Validation	
Validation person-days	25
Mark-up for further research, analysis, reporting	10
Total person-days	35

Conclusions on the cost effectiveness of financial ex post controls

The major scope of the first financial ex post controls covering two years of financial operations coincided with the major workload estimated at a total of 293 person-days divided as follows:

Ex post verification of financial operations:	223
Ex post verification of procurement files	35
Periodic validation of access rights granted in ABAC	35
Total person-days	**293**

Overall, 293 person-days representing a total of 1.4 Full-time Equivalents (FTEs)[13] were dedicated to the implementation of specific financial ex post controls that resulted in 71 preliminary recommendations and 107 preliminary corrective actions. At the time of the drafting of this report some of these recommendations and corrective actions have not been endorsed by the Management. The recommendations and corrective actions will be included in the central register of deficiencies by Q2 2022 only if fully approved by the Management. Once in the register of deficiencies, the implementation status will be quarterly reported to and monitored by the Management and MB.

Although some tasks took the anticipated time to carry out, the general workload was higher than forecast for several reasons. In particular, the number of preliminary observations, recommendations and corrective actions resulting from financial ex post controls was much higher than estimated. Together with ICT, the ICRS is working on an electronic system to facilitate for and decrease the workload of other services when following up on corrective actions and risk responses (internal control and risk management tool). Until the tool is in place, there is a further increase in workload predicted related to the management of the project.

II.4 Delegation and sub-delegation of the powers of budget implementation to the Agency staff

In accordance with Article 41 of the EASO financial regulation the ED, as the authorising officer (AO), may delegate his/her powers of budget implementation to the staff of the Agency. Those so empowered may act only within the limits of the powers expressly conferred upon them. The delegate may sub-delegate the powers received with the explicit agreement of the ED.

By the end of 2021, the Agency had six AO by delegation (AOD) (one more compared with 2020) who had powers of budgetary implementation up to the authorised appropriations on all budget items. They had sub-delegated their powers to 52 AO by sub-delegation (AOSD) (10 more than in 2020).

The maximum limits and budget lines of the sub-delegates are indicated in each individual decision, following the standardised approach on delegations and sub-delegations put in place by the Agency in 2019 which foresees four thresholds based on the role covered by the staff within the Agency.

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[13]   1 FTE = 210 days per year. If one staff member works on controls/project for 50 days in one year, the formula is 50 / 210 = 0.24 FTE

II.4.1 Information on the controls carried out, any weaknesses identified, and the actions taken to remedy these

The Agency has put in place several preventive and detective measures to ensure that the Agency's budget is implemented in accordance with an effective and efficient IC system.

The following is a non-exhaustive list of the main control activities carried out per IC principle.

Control environment

1.1 Corporate governance structure (including communication arrangement with the MB) in accordance with the Agency's ICF and lines of defence:
a. Rules of procedure of the MB
b. SPD (three years' outlook)
c. MB Decision on governance monitoring indicators and quarterly reporting
d. Quarterly cover notes reporting to the Preparatory Group and MB
e. CAAR
    i. Declaration of assurance of the ED
    ii. Declaration of the ICC

1.1 ED Decision on the internal structure and rules of procedure[14] ('EISRoP')
1.2 ED Decision on the standard operating procedure on drafting, reviewing and approving governance and decision-making documents[15]
1.3 MB Decision No. 57 establishing guidelines on whistleblowing[16]
1.4 Guidelines for applying article 22 of the Staff Regulations (financial liability of officials)
1.5 Practical Guide to staff ethics and conduct (by analogy to the guide published by DG HR)
1.6 MB Decision No.50 on the policy on protecting the dignity of the person and preventing psychological harassment and sexual harassment[17]
1.7 Policy on Prevention and Management of Conflict of Interest[18] a. Declaration of absence of conflict of interest when entry into service b. Declaration of absence of conflict of interest of procurement panels members c. Declaration of absence of conflict of interest of HR selection panel members d. Declaration of absence of conflict of interest of MB members e. Declaration of absence of conflict of interest for outside activities f. Declaration of absence of conflict of interest of experts
1.8 General implementing provisions on the conduct of administrative inquiries and disciplinary procedures
1.9 Training and awareness raising in the field of ethics and integrity; public procurement; finance.
1.10 ED Decision on the use of the Paperless System and electronic signatures[19]
Risk assessment
2.1 Agency compendium of all Units' and sectors' mission, overall objectives, SMART objectives, tasks/activities, KPIs, and targets
2.2 Annual risk management exercise based on ED Decision on the risk management manual (the Agency's central risk register)[20]

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[14] EASO/ED/2020/135 of 16/10/2020.
[15] EASO/ED/2020/136 of 16/10/2020.
[16] EASO/MB/2019/172 of 20/09/2019.
[17] EASO/MB/2019/169 of 16/07/2019.
[18] Adopted on 29/11/2013.
[19] EASO/EDD/2020/102 of 16/10/2020
[20] EASO/EDD/2020/117 of 15/12/2020.

2.3 Register of sensitive function

2.4 Fraud risk management exercise based on the ED Decision on the manual for fraud risk management (Fraud Risk Register) [21]

2.5 Anti-fraud strategy 2020-2022 (MB Decision No. 61)[22]

2.6 Assessment and guidance[23] on the main internal control and governance changes introduced by the agency financial regulation (2019) and the general financial regulation (2018)

Control activities

3.1 Partially decentralised financial circuits with decentralised authorisation and initiation of financial transaction and an independent counterweight with financial verification within the FPU (as for provisions in the Agency's financial regulation)

3.2 ED Decision on the delegation of financial authority and nominations to carry out one or more specific tasks in preparation for/or ancillary to budget implementation [24]

3.3 ABAC access rights procedure linked to a delegation and nomination by an ED Decision

3.4 Deputising arrangements and segregation of duties (i.e. the four-eyes principle, where one person verifies the work of another)

3.5 Exceptions and non-compliances management based on ED Decision on the manual for management of exceptions and non-compliance events[25]

3.6 Review of deputising arrangement and access rights in ABAC by a neutral verifier

3.7 Charter of tasks and responsibilities of responsible AO (RAO) (AO, AOD and AOSD)

3.8 Code of professional conduct for financial verifying agents

3.9 Code of professional conduct for internal control and financial ex post control officers

3.10 Awareness raising actions (e.g. training) on ethical conduct, fraud prevention, conflict of interest

3.11 Establishment of the business continuity governance board[26] and a COVID-19 response team[27]

Information and communication

4.1 MB Decision No. 06[28] laying down practical arrangements regarding public access to the documents

4.2 Whistleblowing guidelines[29] and mechanisms and hotlines in place for reporting suspected fraudulent behaviour

4.3 Communication strategy

4.4 Social media guidelines for staff

4.5 ED Decision on the record retention and disposal policy[30]

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[21]   EASO/EDD/2019/254 of 24/09/2019.
[22]   EASO/MB/2020/067 of 06/07/2020.
[23]   Adopted on 25/09/2020.
[24]   EASO/EDD/2017/308 of 06/11/2017.
[25]   EASO/EDD/2019/417 of 02/10/2019.
[26]   EASO/EDD/2019/219 of 16/04/2019.
[27]   EASO/EDD/2020/096 of 12/06/2020.
[28]   Adopted on 20/09/2011.
[29]   EASO/MB/2019/172 of 20/09/2019.
[30]   EASO/EDD/105 of 01/10/2020.

Monitoring activities
5.1 Evaluations[31]
5.2 ED Decision on the ICF monitoring criteria and internal control self-assessment methodology for 2020 and 2021[32]
5.3 Development on an ex post control internal capability within the ICRS[33]
5.4 Risk based financial ex post control strategy[34]
5.5 Internal control processes and procedures self-assessment (on-going, ad hoc and annual exercise)
5.6 Independent audit engagement by controlling bodies
5.7 ECA annual audit
5.8 ECA performance audits
5.9 Framework contract for annual account validation (support to ECA)
5.10 IAS audit and consultancy engagements
5.11 IAS follow-up audit engagement of previous years recommendations
5.12 Quarterly reports (progress reports on the implementation of the annual WP; governance monitoring reports)
5.13 Monthly reports on governance monitoring indicators to Management

Based on the results of the controls above, and as part of 2021 internal control self-assessment exercise, the weaknesses identified were discussed and corrective action endorsed by the Management. This is documented in Annex IX.

II.5 Human resources management

From 2020 to 2021 the approved staff (temporary agents, contract agents and seconded national experts) remained at 500 posts. On 31.12.2021, 89.6% (448 out of 500) of those posts were filled or offered. EASO had a net increase of more than 80 staff compared to the end of 2020 (from 419 to 448 filled and offered posts and 58 posts filled for the short-term operational contract agents). This was made possible through a sustained additional effort in HR, challenged by the COVID-19 situation, yet supported by a low turnover and the launch of the e-recruitment system. In addition, 58 new short-term (one-year) contract agent posts were created at the end of 2020 in the Italian and Cypriot operations, have been gradually entering into service in the course of 2021 and will phase out in 2022.

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[31] EASO/EDD/2020/034 of 18/02/2021.
[32] EASO/EDD/2020/142 of 26/10/2020.
[33] EASO/EDD/2020/001 of 03/02/2020.
[34] EASO/EDD/2021/010 of 07/05/2021.

Number of days of leave authorised to each grade under the flexitime compensatory leave schemes:

Category	Grade	Flexitime recuperation days in 20201	Average number of recuperation days per grade
Temporary Agents	AD	91	2.42
Temporary Agents	AST	37.5	2.44
Contract Agents	CA	63	2.55
Seconded National Experts	SNE	0	0
TOTAL		**191.5**	**2.45**

II.5.1 Implementing rules

With the adoption in 2021 of decisions listed below, the HR legal framework was aligned with the rules adopted and implemented by the EC.

Model Decisions:
1. Middle management C(2018) 2524
2. Adviser function C(2018) 2209
3. Types of posts and posts titles C(2018) 8800
4. Temporary occupation management post C(2017) 7332
5. Establishment of the Staff Committee C(2016) 3323
6. Learning and development C(2017) 6772
7. CCP – unpaid leave C(2015) 5320
8. Seven years rule C(2016) 2421

Adoption by analogy:
- Outside activities C(2018) 4048
- Part-time Art 55a C(2015) 9720
- Amending decision on leave C(2020) 1559
- Transfer of pension rights C(2020) 4818
- Professional incompetence C(2019) 6855

II.5.2 Screening/benchmarking exercise

The sustained efforts by the Agency to increase the proportion of staff in operational functions is paying off. By the end of 2021, nearly 72% of staff is working in operational roles, due to a relative decrease in both administrative and neutral roles. Further decrease of the latter would not be advised to safeguard appropriate (administrative) support for the operations, regularity and legality of the Agency's processes.

II.6 Strategy for efficiency gains

In anticipation of a broader mandate, the Agency worked to safeguard efficiency and enhance performance by introducing time and cost-savings. To enable better strategic planning and allocation of resources, groundwork was conducted to introduce an organisational portfolio approach to projects and programmes. In parallel, the processes through which the agency produces its corporate plans and reports were revisited, aiming to better capture organisational performance and key results. A competencies-based framework, aligning work profiles to job descriptions, is in its final stages.

Financial processes were also enhanced and streamlined, shifting towards the automation of tasks and a reduction in human error. Through the specialisation of financial support per client and set-up of a community of practice, financial issues are now addressed in a faster and more consistent manner, reducing time on repetitive tasks. Controls were enhanced and their cost reduced. The process of nominating financial actors was revised to facilitate faster, simplified and automated workflows. A mass payment system for deployed experts was introduced to replace individual payments in relation to the numerous contracts required to establish a list of remunerated external experts for deployment to the asylum support teams.

The processes for recruitment and onboarding of new staff have been increasingly automated, leading to time and cost savings. The implementation of an HR tool (SYSPER) which will streamline and facilitate many HR processes is ongoing. Following a phase of data migration and the introduction of four modules in 2021, additional modules will be added in 2022, when the tool will be available to all staff.

The use of Microsoft PowerBI to present financial, HR and performance data visually improved the visibility of internal monitoring and reporting. To further improve these processes, groundwork was completed to introduce a planning, monitoring and reporting tool while steps to ensure closer alignment of the budget to the WP were undertaken.

Upgrades to online platforms and IT tools improved resilience, connectivity and efficiency of communications. The paperless application is being upgraded in version 2.0 with expanded functionalities, streamlining and speeding up processes. By linking key financial transactions, paperless 2.0 will significantly enhance monitoring, follow-up and control of expenditure.

Seamless integration of a recruitment application with the existing Asylum Intervention Pool System (EAIPS) enabled the reduction of manual workflows for processing applications and assessments of candidates for calls for the expression of interest (CEI). The CEI application supported the selection of remunerated external experts as part of the CEI to establish an EASO list of remunerated external experts for deployment in EASO asylum support teams[35], launched in August 2021.

An online salary statement tool was rolled out, replacing paper pay-slips and ensuring prompt access to information. The shift to Microsoft 365 enabled simultaneous multi-user access and auto-storage on the Electronic Records and Document Management System (ERDMS).

Teleworking measures and the availability of secure and resilient online platforms and tools ensured business continuity. The MB convened online, with remote interpretation and online voting. Effective use of online meeting platforms contributed to the success of hybrid events hosted in 2021, including the Agency's 10th anniversary conference, the plenary session of the CF and the launch of the Annual Asylum Report.

Improvements in the ICT infrastructure at the Agency's headquarters and operational locations increased resilience and mitigated external threats. The EASO - eu-LISA service level agreement on the recovery site for EASO ICT logical infrastructure and communications was extended, ensuring continued synergies, pooling of resources and cost-efficiency.

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[35] https://euaa.europa.eu/procurements/call-expressions-interest-cei-establish-easo-list-remunerated-external-experts

Strengthened governance systems, re-engineered processes and improvements to the risk management process contributed to enhanced organisational performance and compliance. Internal governance was streamlined with the introduction of a standardised structure for internal Agency bodies. The process for controlling governance documents was re-designed; the internal document hierarchy was updated, and document controls were strengthened in preparation for the establishment of the new Agency. A security governance framework and a complementary business continuity framework were adopted and implemented. Ex post verification exercises identified further opportunities for improvement and innovation. The internal reorganisation, designed to support the implementation of the broader mandate, should lead to additional efficiency gains.

II.7 Assessment of audit and ex post evaluation results during 2021

II.7.1 Internal Audit Service (IAS)

The IAS is the internal auditor of the Agency. It assesses and makes recommendations on the accomplishment of the following objectives: (i) promoting appropriate ethics and values within the organisation, (ii) ensuring effective organisational performance management and accountability and (iii) effectively communicating risk and control information to relevant organisational entities.

The IAS issued during 2021 a new audit report on IT governance and IT project management as well as a new 2021-2023 strategic internal audit plan:

IAS audit engagement "EASO IT governance and IT project management"

Following remote fieldwork in June 2021, the Agency commented on the draft audit report and a closing meeting was held with the IAS in October 2021. The Agency has accepted all recommendations issued by the auditors.

The audit **did not identify any *critical* or *very important* issues.** The audit report acknowledged the Agency's annual internal control self-assessment and its results in the IT field. Indeed, IAS welcomed the fact that the majority of findings had been detected by the internal control systems and the ongoing corrective actions were reported in the register of deficiencies and the corrective action plan.

2021 – 2023 strategic internal audit plan

Based on the results of an in-depth risk assessment carried out by the IAS the following prospective audit topics were identified:

- Multi-entity audit on the coordination and working arrangements with EU decentralised agencies in DG HOME (other than Frontex)
- Needs and feasibility assessment in operational planning
- Data Management (including both IT and non-IT elements)
- HR Management (reserve topic)

The strategic internal audit plan may be adapted based on the re-assessment of the risk to be implemented annually.

II.7.2 Internal audit capability (IAC)

The IAS of the Commission is the internal auditor of the EUAA providing independent advice to the ED on the efficiency and effectiveness of its internal control systems. The MB decided on proposal of the ED not to implement an IAC and set up, an internal ex-post controls capability within the ICRS instead, which was reinforced during 2021.

II.7.3 European Court of Auditors (ECA)

ECA is the external auditor of the Agency, focusing on financial reporting and the implementation of EU's budget and policies.

For the financial year 2021, the first ECA audit mission was held remotely in December 2021. For the first time, ECA did not issue any preliminary observations during this first mission. A second remote field work in February 2022 served to finalise auditing of sampled operations as well as focusing on-going observations from previous years.

At the time of drafting of this report, two preliminary observations were received following the second mission. A formal adversarial procedure will follow. Neither observations concern irregularities in payment for procurement procedures launched during 2021.

II.8 (a) Follow-up of recommendations and action plans for audits and evaluations

II.8(a).1 Follow-up of recommendations from IAS

There are currently 10 open recommendations and 39 corrective actions to be implemented following the audits implemented in 2021:
- Follow up review of recommendation on human resources management and ethics audit engagement implemented in 2020;
- Audit engagement on IT governance and IT project management implemented in 2021.

Out of the 10 open recommendations only two are delayed beyond the agreed deadline for implementation of the corrective actions:

IAS OPEN RECOMMENDATIONS AND CORRECTIVE ACTIONS 2018-2021

■ Year ■ Number of open recommendations ■ Number of open corrective actions

	2018	2019	2020	2021
Number of open corrective actions			19	39
Number of open recommendations			6	10
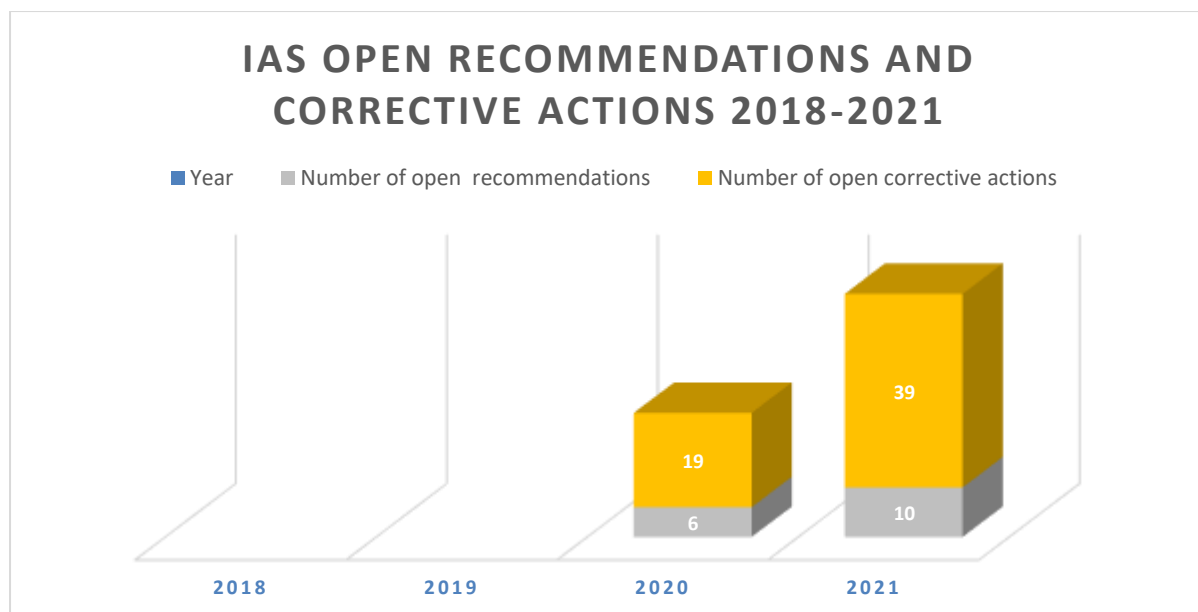
A new multi-entity audit engagement on coordination and working arrangements in DG HOME and the EU decentralised agencies will be implemented in 2022.

The ED continuously monitors and regularly reports to the MB and the IAS on the state of play of corrective measures to address "very important" and "important" IAS recommendations.

The IAS follow-up action plan[36] was incorporated into the Agency's register of deficiencies and corrective action plan (Annex IX to this report) which includes the recommendation severity, the description of the corrective action, the target date, and the state of play per internal control principle referenced to the IAS report. Corrective actions remain marked as "in progress" until they are formally closed by the IAS.

The register of deficiencies and the corrective action plan are updated as soon as recommendations or observations are issued or closed.

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[36] For the deficiencies listed in the EUAA register of deficiencies and the corrective action plan stemming from pending IAS recommendations, please refer to deficiencies no. 2, 3, 11 to 21, 25 to 27, 32-45 and 52 in Annex IX.

II.8(a).2 Follow-up of recommendations from ECA

The ED continuously monitors and reports to the MB on the state of play of corrective measures implemented following outstanding ECA observations.

The ECA follow-up action plan is incorporated in the Agency's register of deficiencies and corrective action plan[37] (Annex IX to the report). Corrective actions remain in the central register of deficiencies until they are formally closed by ECA.

II.8 (b) Follow-up of recommendations issued following investigations by the European Anti-Fraud Office

Following the OLAF report issued at the end of 2018, the Agency had initiated three disciplinary procedures, two have been concluded and one is currently still ongoing.

II.9 Follow-up of observations from the Discharge Authority

The Discharge Authority relies in their recommendations and discharge decision on observations related to findings issued by ECA. In April 2021, the EP voted in favour of adopting the discharge decision in respect of the implementation of EASO's budget for the financial year 2019.

The procedure for the discharge relating to the financial year 2020 began. The Agency submitted to the EP its replies to the horizontal questions and standardised questionnaire, a progress report on the recommendations made in relation to the preceding year as well as replies to the individual questionnaire. The Agency was not required to attend the EP Committee on Budgetary Control (CONT Committee) hearing in relation to the discharge for financial year 2020 but did participate in the Council's Budget Committee meeting on the subject in January 2022, where the progress made in addressing outstanding measures was broadly recognised.

Communication with both the Council and the EP was taken forward, with a view to ensuring that all necessary information relating to the Agency's efforts was shared and acknowledged. In May 2022 the EP voted in favour of granting the Agency the discharge for the financial year 2020.

II.10 Environment management

The Agency stepped up its activities in the area of environmental management during 2021. A set of objectives for achieving environmental protection and sustainable development have been identified and are being elaborated further. In particular, the Agency continued to analyse possible measures aimed at:
- Shaping the Agency towards a mature use of resources, setting out organisational choices that take into account environmental impacts;

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[37] For the deficiencies listed in the EUAA register of deficiencies and corrective action plan which are stemming from pending ECA observations from the previous years, please refer to deficiency no. 1, 7, 22, 23, 28, 46, 47 and 52 in Annex IX and also available in the ECA report for FY 2020.

- Establishing and achieving objectives and targets for reasonable reduction of the impact of its administrative activities on the environment, and putting in place a system to monitor its performance;
- Promoting behaviours respectful of the surrounding environment, and ensuring awareness among staff of individual environmental responsibilities with the support of the Agency's Green Team;
- Reducing the Agency's carbon footprint, thus contributing to the implementation of the European Green Deal;
- Undertaking green public procurement initiatives in the sourcing of supplies, services and works to reduce the environmental impact;
- Striving for continual improvement of its environmental performance;
- Maintaining an open dialogue to promote and share environmental knowledge, experiences and best practices with its stakeholders, including other EU institutions, and with other EU agencies via participation in initiatives of the EU Agencies Network.

In 2021, the Agency further leveraged the changes imposed by and lessons learnt from the COVID-19 pandemic. It explored several environmental measures, the feasibility of which is currently being assessed, also in light of similar approaches taken by the EC and other EU agencies and taking into account the specificities of its operational model and locations.

Furthermore, during the year the Agency invested considerably in internal capacity and knowledge-building to strengthen its ability to achieve the planned objectives. Amongst other, the Agency's staff participated in network meetings at EU agencies' level, particularly in EU Agencies network (EUAN) and the Justice and Home Affairs Agencies' network (JHAAN) meetings and benefitted from training opportunities at EU level.

II.11 Assessment by Management

The Management looks back at a very demanding and work intense, yet very successful and rewarding year 2021. Political and policy changes influenced the agenda of the Agency; and preparatory work to equip and get the Agency ready for its new mandate and new functions were intensified.

In particular, the Management welcomes:
- The reorganisation of the Agency proposed by the ED in 2021 and endorsed by the MB (in force from 19 January 2022), which has substantially reinforced the internal control and governance structure of the Agency in order to ensure the achievement of the objectives of its new mandate;
- The renewed focus on new methodologies, data collection, analysis and presentation of asylum information;
- The introduction of a training quality assurance framework and the development of the required tools to support the implementation of the European sectoral qualification framework;
- The introduction of a multi-annual approach for technical and operational assistance and the expansion of operational support to Lithuania, Latvia and Belgium;
- The effective and efficient business continuity measures adopted by the ED and the COVID response team as a reaction to the COVID-19 pandemic; the supervision tools in place allowing effective monitoring of late payments; the adoption of a number of important policies and procedures contributing towards re-enforcing the control environment and in particular the ED Decision on the internal structure and rules of

procedure, the adoption of the business continuity framework and the security governance framework;

- The effective cooperation between the Agency, the stakeholders and the control bodies IAS and ECA;
- The continuous improvements made by the Agency regarding its ability to identify, prioritise and manage risks, including the risk of fraud. During 2021, the Agency identified and documented objectives across the organisation in accordance with strategic planning priorities. Quarterly risk management reports were issued and shared with staff, and the anti-fraud strategy action plan was updated;
- The initiatives commenced to reduce the environmental impact of the Agency and to promote environmental conscious behaviour;
- The innovative practices deployed by the Agency to ensure agility, connectivity and resilience of the Agency's ICT tools and infrastructure, and to further improve and automate processes to enhance efficiency and effectiveness;
- The adaptability of the Agency and staff to adjust to the ever changing and demanding working environment;
- The improvements made in finance and procurement ensuring positive finance and budget execution results;
- The low turnover of staff confirming the attractiveness of the Agency as employer;
- The insightful reports issued by Agency in the different operational areas to keep the stakeholders informed;
- The continuous and specific assessment tools used by the ED to ascertain whether each of the five components of internal control are present and functioning. Assessments are built into business processes at different levels of the Agency and inform of any governance, internal control or risk management deficiency.

Internal controls on the efficiency and effectiveness of the internal control system show improvements in the performance of the system compared to previous years. Nevertheless, corrective actions were identified to be continuously built into the business processes to increase the assurance provided to the Management and the ED.

The Management will continue to work on establishing adequate and cost-effective measures to increase assurance of the effectiveness, efficiency and economy of operations, the reliability of reporting, the safeguarding of assets and information, the prevention and detection and correction of fraud and irregularities and their follow-up, and the adequate management of risks relating to the legality and regularity of underlying transactions.

A detailed list of corrective actions proposed by the ICC and endorsed by the Management are available in Annex IX of this report.

Part II (b): External evaluations

External evaluations

During the first half of 2021, four external ex post evaluations of EASO's OPs for 2020 agreed with Italy, Greece, Cyprus and Malta, and an ex post evaluation of the pilot project of EASO's Resettlement Support Facility (RSF) located in Turkey were completed (all were started at the end of 2020). These were accompanied by an additional horizontal report focusing on cross-country findings and recommendations. The evaluations provided recommendations to support EASO's internal decision-making and to improve operations in Member States and

future interventions. The status of implementation of the respective actions at the end of 2021 is reported in the tables below.

The recommendations stemming from the evaluation of the **Greece OP for 2020** were as follows.

Recommendation	Proposed action	Status 2021
1. Enhance the provision of support at a strategic level.	1. OP for 2021 already includes relevant activities.	Implementation concluded
2. Identify concrete steps to strengthen the sustainability of the operation.	1. Three-year planning cycle has already been introduced. Long-term approach will also require changes in the planning of other actors.	Implementation concluded
3. Develop a concrete workplan and establish procedures for the use of teleworking.	1. OP for 2021 already foresees the use of remote interviews across the mainland. Clear procedures have been agreed with the Greek Asylum Service (GAS).	Implementation concluded
4. Replicate Project North, keeping in mind the different contexts that implementation modalities need to be adapted to.	1. OP for 2021 already includes relevant activities in the South.	Implementation concluded
5. Further develop and implement a training programme for reception authorities.	1. OP for 2021 already includes relevant activities.	Implementation concluded
6. Expand joint target and common indicator setting with authorities to the reception area.	1. Data collection is already being piloted, and targets and objectives are set per expert profile.	Implementation concluded
7. Focus support on the implementation of a monitoring tool for reception conditions.	1. OP for 2021 foresees such support. It is, however, not the development of the tool (which is already in place and piloted) but rather the full implementation of such a self-assessment tool that is needed.	Implementation concluded
8. Focus on provision of targeted support at the second instance.	1. OP for 2021 foresees such activities and additional cooperation is negotiated via EASO headquarters. Support is systematic rather than ad hoc.	Implementation concluded

The evaluation of the **Italy OP for 2020** made the following recommendations.

Recommendation	Proposed action	Status 2021
1. Agree, together with the Ministry of Interior, on a medium-term phase-out plan.	1. Most recommended actions are included in the OP for 2021 and in the medium-term strategy. A long-term strategy will be undertaken with the relevant stakeholder(s) once adequate human resources are in place.	Under implementation
	2. Coaching missions to selected Immigration Offices and definition of the relevant methodology are foreseen in the second half of 2021.	Under implementation
2. Increase support to search and rescue (SAR) disembarkation and relocation.	1. Discussions are ongoing to ensure proper support to SAR disembarkation events and voluntary relocation. Temporary measures (e.g., deployment of EASO statutory staff) to mitigate the impact of the pandemic and staff shortage are being implemented.	Implementation concluded
3. Support the setting-up and roll-out of a reception quality monitoring system at central and local level.	1. Updates to the EASO quality standard indicators are planned, in line with national practice, to include them in the most appropriate monitoring reception tool.	Under implementation
	2. Qualitative and quantitative strengthening of the reception system monitoring through an increased presence at local level. Coaching on the monitoring of reception conditions in line with the EU standards and indicators is ongoing.	Under implementation
	3. Enhancement of the monitoring framework related to the second line reception system, including COVID-19 related issues and data on material reception condition and services. Updates on tool for data consolidation and analysis of results of monitoring visits.	Implementation concluded
4. Promote synergies across all levels of the judicial authorities involved in EASO operations to maximise impact and sustainability.	1. Organisation of meetings and thematic roundtables to share best practices and issues faced at local level.	Implementation concluded
	2. Feasibility study for the creation, in the coming years, of an Inter-ministerial COI Unit to support cooperation among relevant stakeholders.	Pending
5. Establish cooperation with the Asylum, Migration and Integration Fund	1. This recommendation highly depends on the commitment and interest of the relevant stakeholders. Besides cultural mediation services, AMIF can also be used for research officers in the long run.	Implementation concluded

Recommendation	Proposed action	Status 2021
(AMIF) Managing Authority.	2. Contacts have already been established with DG HOME in Rome. The National Programme is, however, independent from EASO.	Implementation concluded
	3. Discussions with stakeholders exploring the recovery fund as potential source of funds.	Under implementation
6. Increase the capacity of partners through an enhanced training strategy.	1. Capacity-building activities are organised for registration support officers and research officers, including training, refresher sessions and/or thematic sessions.	Implementation concluded
	2. Capacity-building activities and/or coaching on the job are also planned in the OP, including support to the authorities in the implementation of the national training session.	Under implementation
	3. On-the-job coaching led by asylum support teams on managing and processing of Dublin requests, litigation, and transfer monitoring tool.	Discontinued
	4. Training on MedCOI portal.	Implementation concluded
	5. Roundtables on best practices for judges.	Implementation concluded
	6. Support for the coordination of three professional development activities.	Discontinued
7. Consider multi-annual planning for operational support to Italy.	1. Adapt programming based on a multi-annual planning approach while ensuring flexibility to adapt to evolving settings and context (such as availability of adequate resources for asylum support teams).	Implementation concluded

The evaluation of the **Cyprus OP for 2020** recommended the following.

Recommendation	Proposed action	Status 2021
1. Enhance stable and sustainable deployment of experts and staff.	1. Recruit temporary interim workers, under the amended Cyprus labour law.	Discontinued
	2. Recruit temporary interim workers, under the amended labour law. Recruit external remunerated experts via the comprehensive deployment mechanism.	Under implementation
2. Support the development of a comprehensive data management system.	1. Share digital data between measures and between EASO and external stakeholders.	Under implementation
	2. Use of an integrated digital data management system (relies on national systems and legal framework).	Under Implementation
3. Support comprehensive and integrated vulnerability procedures.	1. Conduct vulnerability screening, identification and referral using a standardised and harmonised tool across measures (registration, first instance examination, reception).	Under implementation
	2. Revise standard operating procedure (for Pournara (vulnerability workflow).	Under implementation
	3. Strengthen the prioritisation system for vulnerable applicants.	Under implementation
4. Aim for proportionality of EASO support Introduce proportionality as a general principle to ensure capacity of national authorities to absorb EASO support.	1. At second instance, align deployment of research officers with the appointment of the International Protection Administrative Court judges.	Implementation concluded
	2. At first instance, align deployment of EASO caseworkers in the Pournara Examination Centre with the deployment of Cyprus Asylum Service (CAS) CWs.	Under implementation
5. Support mainstreaming of the reception strategy and its implementation.	1. Support the drafting and the endorsement of a comprehensive reception strategy at national level.	Under implementation
6. Intensify coordination and communication with stakeholders.	1. Operationalise the steering committee with signatories of the OP for 2021. Dedicate specific resources to communication activities, both internal and external.	Implementation concluded
7. Consider a strategic planning framework.	1. Organise internal consultation on how to move towards a more strategic support during the drafting process for the OP 2022.	Implementation concluded

The evaluation of the **Malta OP for 2021** recommended the following.

Recommendation	Proposed action	Status 2021
1. Establish a methodological approach when launching a new measure.	1. A new joint reporting and monitoring approach is being piloted with the national authorities, including baselines and targets to maximise the ownership and effectiveness of the operations. Methodological approaches are developed and adjusted to the operational context of the specific operations.	Under Implementation
2. Adjust and tailor targets to the situation in Malta to ensure they are realistic.	1. Revision of targets is currently underway based on assumptions laid out in the results framework not being met.	Implementation concluded
3. Put in place a clear structure for the coordination team to ensure that the mandatory roles for an operation are covered.	1. Having defined profiles of core staff would be key to ensure the proper implementation of the operation. To support in defining roles and terms of reference.	Under implementation
4. Explore the possibility of setting-up a pool or roster of people who are, to a certain degree, already trained.	1. To support and provide further training possibilities on the ground.	Under implementation
5. Further improve EASO staff training in Malta vis-à-vis reception conditions.	1. The OP for 2021 already includes this, including ongoing communication between operational and training staff.	Implementation concluded
6. Systematically address the inefficiencies encountered in the implementation of the OP.	1. Communication and collaboration with national counterparts improved greatly in 2021. All three main stakeholders are committed to further improving access to applicants. High turnover of operational personnel is not within EASO's control.	Under implementation
7. Complete and adjust the Results Database in an exhaustive and timely manner to allow for better monitoring and reporting.	1. Dedicated project management officer assigned for the OP for 2021 to address this recommendation.	Implementation concluded
8. Conduct joint monitoring with the Maltese national authorities, where appropriate.	1. Implemented in the OP for 2021, with Q1 used as a testing phase. To be fully implemented by end of Q2.	Implementation concluded

The evaluation of the **Pilot Resettlement Support Facility project** recommended the following.

Recommendation	Proposed action	Status 2021
1. In agreement with the relevant governing bodies and international actors, EASO needs to strengthen its commitment to this project, via the relaunching of the pilot, and to resettlement support in general.	1. EASO is currently working on the process for relaunching of the RSF project foreseeing participation from more EU+ countries, bigger volumes, and an improved contractual setting. EASO will also start, in 2021, to look into possibilities for replicability of the RSF concept in other geographical areas.	Under Implementation
2. As the project gradually shifts from a pilot phase to a more established operational activity, consider adopting a more long-term approach to planning and delivery, with due consideration to the unpredictable nature of the operational context.	1. EASO is looking into making the contractual set-up more stable but balancing this with the need for a flexible arrangement to allow for scaling as per EU+ countries' needs.	Implementation concluded
3. Strengthen risk management processes and scenario planning	1. Planning will be reviewed and adjusted where needed every two months, and on an ad hoc basis should the context evolve and require so.	Implementation concluded
4. Carefully design and test new RSF services aiming to support as many as possible EU+ countries - and specifically those who resettle from Turkey- to maximise impact.	1. EASO will further explore possibilities to support EU+ countries outside the one-stop-shop concept and reach out to potentially interested EU+ countries in this regard. Effort has been put into reaching out to EU+ countries not yet participating in the RSF pilot project and EASO is planning to continue strengthening these efforts.	Under implementation
5. Optimise and streamline project management roles, workflows and contract arrangements in light of a post-pilot operational mode.	1. EASO's flexibility and responsiveness is key to the success of the RSF pilot project and requires dedicated EASO staff. The RSF team will also organise a visit by RSF framework contract staff to EASO's headquarters with the purpose of ironing out issues related to workflow management	Implementation concluded

Recommendation	Proposed action	Status 2021
6. Increase and plan further EASO capacity and expertise in the field of resettlement to maximise added value in the mid- and longer term.	1. EASO is in the process of recruiting additional staff. This is positive but may need revisiting to be further increased to adequately manage expectations on EASO in the resettlement field including the continuation of the RSF.	Under implementation
7. When considering adjusting the model beyond the current project in other countries, undertake an objective in-depth SWOT analysis of relevant options in function of key factors such as EU priorities, EU+ countries pledges, security, risks, EASO complementarity and the existence of available support infrastructure.	1. The EASO RST team is engaged in an ongoing consultation process with EU+ countries in view of possible replicability of resettlement operational support in areas other than Turkey. A proper feasibility assessment/study will be conducted as a prerequisite to any further engagement outside of Istanbul.	Under implementation

The strategic recommendations made in the **horizontal report** on the OPs for 2021 and their follow-up are summarised below.

Recommendation	Proposed action	Status 2021
1. Human resources and staffing: Introduce different modus operandi to strengthen the continuity and predictability of resources in operations.	1. Finalise deployment roster (complimentary deployment mechanism). Management approval is ongoing.	Implementation concluded
	2. Assess replicability in other operations.	Under implementation
2. Human resources and staffing: Avoid ambiguity by clarifying the roles and responsibilities of key EASO staff in operations from the start-up phase.	1. Clarify task and levels of responsibilities: clearly define terms of reference of union contact points, measure coordinators, and field coordinators and formalise corresponding reporting and communication lines (internally and externally).	Under implementation
	2. Build a contingency capacity to move away from ad hoc responses.	Under implementation
	3. Establish pre-defined internal contingency capacity, profiles, and roles	Under implementation

Recommendation	Proposed action	Status 2021
	and agreements to deploy teams that are fit for the purpose.	
	4. Develop an internal roster linked with a competency framework.	Under implementation
	5. Develop a cross-agency process for EASO building a contingency capacity.	Under implementation
3. Programming: Consider moving to multi-annual operational programming, at least in Member States where the imminent need for support has stabilised but there is a need for capacity building.	1. Link multi-annual operational planning to the rolling three-year strategic planning in the SPD/WP.	Implementation concluded
	2. Cross-Agency effort: capacity building & training support activities need longer-term interventions to build sustainability.	Under implementation
	3. Adapt multi-annual plans to operational reality and budgetary cycle, linked to ongoing validation process.	Implementation concluded
	4. Explore hybrid model approach, for example 1-year plan for an emergency support operation and a longer cycle for established operations.	Implementation concluded
4. Programming: Continue to prioritise and invest in training and coaching activities	1. Strengthen capacity-building interventions building on the experience and good practices acquired in successful training and coaching interventions	Implementation concluded
	2. In the context of training, coaching activities and train the trainers programmes, aim to further strengthen national training pools in all supported Member States.	Implementation concluded
	3. In the context of coaching methods, encourage organisations and individuals to move from skills to autonomy and support therefore the sustainability of EASO's intervention.	Under implementation
	4. Maintain a flexible and bespoke approach by continuing to successfully respond and adapt training to emergency settings.	Implementation concluded
	5. Increase training in the area of reception to respond to capacity-building needs throughout EASO's operations and operationalise EASO's reception strategy.	Implementation concluded
	6. In the context of joint need analysis and planning, include a training need analysis into the comprehensive needs assessment methodology used in the design phase of EASO operations. Derive lessons learnt from the process	Under implementation

Recommendation	Proposed action	Status 2021
	initiated for the planning of EASO's operations in Spain.	
	7. Integrate reporting on training in close cooperation with the regional offices.	Implementation concluded
5. Innovative approaches and new ways of working: Explore the legal feasibility of accommodating teleworking and remote processes where relevant.	1. Explore feasibility contingent on EASO's current regulation and the future EUAA regulation.	Under implementation
	2. Consider restrictions within the asylum process in some countries.	Discontinued
	3. Explore avenue under the current legal constraints, through better engagement with Member States' experts who would be willing to provide expertise through remote working.	Under implementation
	4. Assess internally to analyse if EASO could use remote processing as an underlying business model which can be embedded as the *de facto* solution while working in emergency contexts or a *modus operandi* even beyond.	Pending
6. Monitoring: Consider streamlining the approach to defining certain core indicators to measure progress, when considering the same type of activity in different operational interventions.	1. Fully use a comprehensive project management methodology once staffing issues are solved.	Under implementation
	2. In the context of core indicators, continue developing common monitoring criteria per result area, i.e., reception core indicators deriving from the new EASO reception strategy.	Under implementation
	3. Jointly develop core quality indicators and then tailor to any country specific support activities.	Under implementation
	4. In the context of transparency and impact, agree with concerned Member States certain data sets.	Under implementation
	5. For comparability, continue defining and harmonising language and terminology of consolidated profiles stemming from the complementary deployment mechanism project.	Implementation concluded
7. Monitoring: Improve the usefulness and accuracy of the monitoring process by setting targets in consultation with relevant stakeholders, and, where relevant and logistically feasible,	1. Operationalise monitoring frameworks operationalised with monthly and quarterly monitoring meetings introduced in all operations and applying results-based monitoring against agreed sets of baselines and targets.	Implementation concluded
	2. Formalise the EASO Data Hub role through joint articulation of baseline, targets, and indicators as part of the	Under implementation

Recommendation	Proposed action	Status 2021
jointly monitoring their achievements.	operation planning process and inclusion in the monitoring process.	
8. Evaluation procedures: Adapt the evaluation cycle to make results more useful to EASO.	1. Legal constraints relating to EUAA Regulation requirement to complete evaluations of OPs within 60 days of the end of OPs including consultation with the fundamental rights officer. As of 2021, initiate country evaluations in Q3 to be completed by end of next February.	Implementation concluded

In October 2021, EASO started the external evaluations of the OPs for 2021 focusing on interventions in Greece, Italy, Malta, Cyprus and Spain. As with previous exercises, this evaluation exercise includes a horizontal report that will tackle cross-country findings and strategic recommendations. The six reports are expected to be completed by April 2022 and will be reported in the CAAR 2022.

In the CAAR 2020, EASO reported on the status of implementation of actions stemming from recommendations made in the external ex post evaluations of OPs for 2019. An update on the status of actions that were under implementation at the time is provided in the following tables.

Status update on the follow-up to the evaluation of the **Greece OP for 2019**:

Recommendation	Status 2021
Make internal inquiries on the use and usefulness of the information and documentation system operational platform for Greece.	Discontinued
Assess and address – together with national authorities – data protection issues regarding work performed by personnel deployed by the EASO intervention at appeals.	Under implementation
Create ways for team leaders to respond/discuss feedback received and/or to review feedback before it is shared, to strengthen the quality assurance tool.	Implementation concluded
Enhance the recording of the results of multidisciplinary teams in reception and identification centres (RICs).	Implementation concluded

Status update on the follow-up to the evaluation of the **Italy OP for 2019**:

Recommendation	Status 2021
EASO deployment of temporary workers for registration at Questure is considered indispensable by authorities' representatives. EASO might revisit and better plan its phasing out. (Measure 2)	Under implementation
EASO should follow up the inclusion of C3 annexes in Sistema Unico per l'Asilo to guarantee the improved quality of registration. (Measure 2)	Discontinued
EASO's efforts in the reception system would be more impactful under a multi-year plan, given the complexity and multi-layer approach of the Italian reception system. (Measure 4)	Implementation concluded

Status update on the follow-up to the evaluation of the **Cyprus OP for 2019**:

Recommendation	Status 2021
Further embed vulnerability assessments in workflows on registration via additional capacity building on registration and vulnerabilities (for Aliens and Immigration Unit officers).	Implementation concluded
Explore synergies across measures 1 and 3: registration templates could be improved to capture more information on the applicant at registration stage. While variations in how registrations are carried out exist from one police district office to another, doing so could improve time efficiencies for EASO caseworkers when checking basic information on the applicant during an interview.	Implementation concluded
Enhance coordination mechanisms in Pournara by advocating for a permanent Cyprus Asylum Service manager in Pournara, dedicate EASO resources to ensure follow-up and coordination of activities and develop standard operating procedures with other stakeholders to ensure effectiveness of referrals.	Implementation concluded
Organise capacity-building activities targeting non-permanent staff contracted by CAS in reception and vulnerability assessments to enhance implementation of CEAS standards in Cyprus.	Implementation concluded
Enhance the practical part of content of EASO's module on vulnerability (e.g., case studies used).	Discontinued
Assess further the type of concrete support EASO could bring to the implementation of databases and to increase ownership by national authorities of the process. The type of support could be more tailored to the needs of national authorities given the emergency context and capacity constraints (e.g., capacity building activities).	Under implementation

Status update on the following-up to the evaluation of the **horizontal report for 2019**:

Recommendation	Status 2021
SR1: Consider different modus operandi to strengthen the continuity and stability of resources (including human resources) for the intervention.	Implementation concluded
SR2: Align and enhance the contents and structure of strategic planning documents (multi-annual roadmap, OP, etc.).	Implementation concluded
SR3: Advance the level of maturity of results-based planning, implementation and monitoring.	Implementation concluded
SR4: Harmonise the implementation of quality management in operations with those of national authorities and investigate how productivity and efficiency considerations can be better embedded as quality requirements.	Under implementation
SR5: Improve the intervention logic where it is not sufficiently clear.	Implementation concluded
SR 6: Further enhance the sustainability and impact of capacity-building.	Implementation concluded

Internal evaluations

In addition to the above-mentioned external evaluations, EASO concluded an ex post internal evaluation of the Preparatory Group of the MB focusing on activities in the period April 2019 to October 2020. This evaluation made six clusters of recommendations, which are being addressed through follow-up deliverables. As of December 2021, five of the planned deliverables were concluded, with eleven additional deliverables planned to be completed by the first half of 2022.

Evaluation Governance

An internal Evaluation Advisory Group was established in February 2021 with the aim of providing advice to the ED on evaluation matters, as well as ensuring the Agency has a harmonised approach and framework to evaluations. A draft evaluation framework that aims to define a common approach to evaluations, including minimum criteria and standards, has been developed. This draft framework, built on current Agency practices and guidance from the EC's Better Regulation Guidelines, is being piloted in ongoing evaluations and is expected to be adopted in the first half of 2022 after lessons learnt are taken on board.

Part III: Assessment of the effectiveness of internal control systems

III.1 Effectiveness of the internal control systems

The Agency's IC framework[38] is based on the COSO 2013 Internal Control-Integrated Framework.

III.1.1 Methodology and control activities applied for the assessment of effectiveness

In line with the relevant ED Decision[39] , the internal control function assesses the state of play of the IC system and its compliance with internal control objectives. The methodology for the annual assessment is documented in the ED Decision on the internal control framework monitoring criteria and internal control self-assessment (ICSA) methodology for 2020 and 2021.[40]

Main steps in the implementation of the internal control annual assessment:
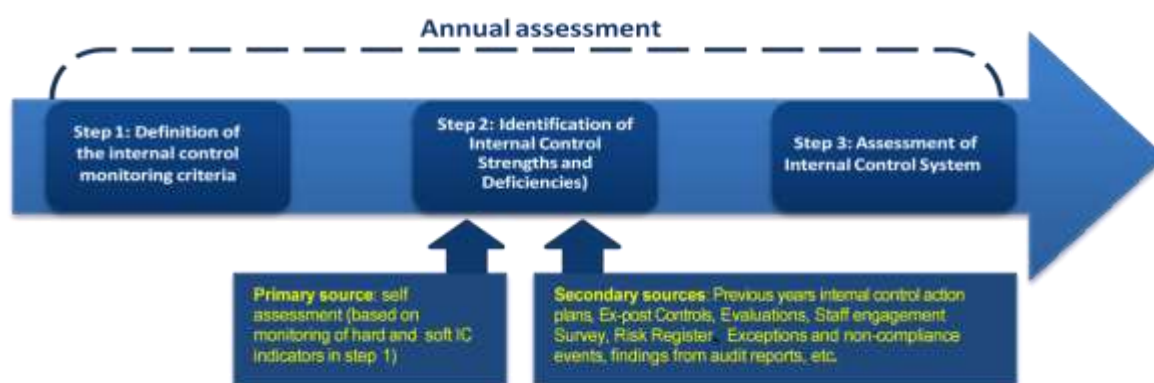
The following are consulted and analysed to identify internal control strengths and deficiencies:
- Qualitative and quantitative internal control indicators (Annex XI);
- State of play of previous years' ICSA action plans;
- Internal ex post controls based on desk reviews;
- Register of exceptions and non-compliance events;
- Agency risk register;
- Meetings with process owners;
- IAS audit reports[41];
- ECA audit reports[42].

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[38]   EASO/MB/2018/159 of 21/12/2018.
[39]   EASO/EDD/2020/001 of 03/02/2020 – in particular, Art. 2.
[40]   EASO/EDD/2020/142 of 26/10/2020.
[41]   IAS: for the internal control self-assessment 2021, the Agency is following up on the recommendations stemming from IAS Audits.
[42]   ECA: for the internal control self-assessment 2021, the Agency is following up on ECA Report for Financial Year 2020, including delayed observations from previous years.

The severity of internal control deficiencies is classified as follows, based on an informed risk assessment by the Management:

- Minor deficiency (desirable) - it has a minor impact on the presence and/or functioning of an IC principle. Minor improvements are needed to ensure that the principle is observed in practice;
- Moderate deficiency (important) – it has a moderate impact on the presence and/or functioning of an IC principle;
- Major deficiency (very important) – it has a significant impact on the presence and/or functioning of an IC principle, which is thereby only partially observed;
- Critical deficiency - it has a fundamental impact on the presence and/or functioning of an IC principle, which is thereby considered as not observed in practice.

The severity of deficiencies was in some cases re-assessed and documented based on the following (residual risk):

- Mitigation of the identified risk of deficiencies by control/s in place;
- New corrective action agreed by the Management;
- State of play of the new corrective action agreed by the Management (to be implemented during the year in which the assessment takes place);
- Risk tolerance re-assessment by the Management from previous years.

Following re-assessment of deficiencies and considering their final severity, the IC principles are classified as follows:

- Category 1 "fully effective" - the principle is effective: present and functioning well, only minor improvements needed. Only minor deficiencies remain;
- Category 2 "effective" - the principle is effective: present and functioning, but some improvements are needed. No more than one moderate deficiency remains;
- Category 3 "partially effective" - the principle is not effective: it is partially present and functioning, major improvements are needed. No more than one major deficiency or combination of several moderate deficiencies;
- Category 4 "not effective" - the principle is not present and functioning. There are several major deficiencies or a critical one.

After concluding on the efficiency and effectiveness of each IC principle based on the categories shown below, the five components[43] and the overall ICS are assessed by the same rationale, by attributing categories at the level of each component and the ICS as whole.

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[43]   The Agency's internal control framework consists of five internal control components (control environment, risk assessment, control activities, information and communication and monitoring of activities) that are built on 17 principles, based on the COSO 2013 internal control-integrated framework, and further supported by a number of characteristics.

III.1.1.1 Control environment

Principles
1. The Agency demonstrates a commitment to integrity and ethical values.
2. The MB demonstrates independence from management and exercises oversight of the development and performance of internal control.
3. The Management establishes, with political oversight, structures, reporting lines, and appropriate authorities and responsibilities in the pursuit of objectives.
4. The Agency demonstrates a commitment to attract, develop, and retain competent individuals in alignment with objectives.
5. The Agency holds individuals accountable for their internal control responsibilities in the pursuit of objectives.

The ED continued the efforts to improve the **tone at the top**[44] regarding IC, by ensuring that:
- The staff is provided with a summary of Management meeting minutes;
- Internal communication tools facilitating communication between the Management and the staff both in headquarters and geographical locations are available;
- Communication is enhanced between the Management and the Staff Committee in relevant matters (including COVID-19 matters).

Additionally, several workshops were run to gather feedback on staff perception of the 'tone at the top' following previous years' staff engagement surveys. Similarly, several workshops and info sessions were held at the Management and staff levels to increase awareness about governance, risk management, internal control and decision-making processes in the Agency.

The Agency's expectations on **integrity and ethical** values are set out by analogy to the corresponding standards of conduct of the EC and are understood at all levels of the organisation. Awareness was raised through Management meetings, COVID-19 response team meetings, all staff meetings, MB briefings, brown bag lunches, etc. Work in this area was acknowledged in the IAS comprehensive audit on human resources management and ethics, with no findings related to ethics[45].

The Agency went one step further and based on internal control recommendations, decided to establish a network of **confidential counsellors**. The corrective actions related to this policy had been pending since 2019 due to COVID-19 related circumstances. Nominations[46] were followed by a mandatory training of the counsellors, which was pre-selected following a common procedure amongst several agencies.[47]

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[44] 'Tone at the top' refers to the ethical behaviour and internal control atmosphere that is created in the workplace by the organisation's leadership. If the tone set by the managers upholds the internal control principles, employees will be more inclined to uphold the same values.

[45] Ref. Ares(2020)7244708 of 01/12/2020. In its final report, the IAS noted that: *"the Agency's ethical framework, incorporating policies that ensure staff and other workers associated with or representing the Agency always act in compliance with the law and the Agency's code of ethics, is an important internal control in the effective management of the Agency's human resources".*

[46] EASO/EDD/2021/064, EASO/EDD/2021/065, and EASO/EDD/2021/066.

[47] The common procedure with the European Union Agency for the Cooperation of Energy Regulators (ACER) was launched together with the Community Plant Variety Office (CPVO), the European Global Navigation Satellite Systems Agency, the European Union Agency for Cybersecurity (ENISA) and the Body of European Regulators for Electronic Communications (BEREC).

In line with Art. 42.4 of the EASO Financial Regulation, declarations of **conflict of interest** are updated by the MB members every year and published on the Agency's website (monitoring criteria 1.3.1). The main measures to prevent recurrence of conflict of interest were presented in the CAAR 2020. The SPD 2021-2023 sets out the strategy for preventing the recurrence of cases of conflict of interest.

The following measures ensure an effective and efficient **organisational structure** of the Agency:

- The internal control and ex post controls function was reinforced with the adoption of a risk-based strategy for specific ex post controls of financial operations on 7 May 2021. Financial ex post controls (together with neutral verification of ABAC access rights) implemented for FY 2020 and FY 2021 are expected to be validated by Q2 2022;
- Administrative Circular[48] on the declarations on the budget implementation by the AOD and AOSD was adopted to enhance supervision structures and reinforce accountability. The 'charters of tasks and responsibilities of RAOs' stipulate that the AODs report regularly to their respective AOD on the implementation of programmes, operations or measures in respect of which powers have been sub-delegated to her/him, and subsequently, that the AODs provide the ED with adequate and timely information for the CAAR. The document established clear obligations to AODs and AOSDs to provide signed declarations to the AO or AODs accordingly. In 2021 and 2022 the declarations were timely provided and supported the preparation of the CAAR 2021.

Regarding **corporate governance**, controls in place ensure that the MB oversees governance, risk management and internal control practices and takes overall political responsibility for management carried out by the ED. In particular:

- The Agency continued reporting quarterly to the MB on the governance monitoring indicators (monitoring criteria 2.1.1) regarding its WP, HR, staff engagement, internal control, procurement and budget and finance[49];
- The ED reports quarterly to the MB on the implementation of the WP;
- In addition, the ED also provides information on the internal control systems with a particular focus on the follow-up on the implementation of corrective actions regarding IAS and ECA findings, the state of play of the internal control action plan and developments in risk management.

The ICC supports the ED in the preparation of the CAAR and provides a declaration and recommendations on the state of play of the internal control system. The ED ensures that the annual ICSA report and the corrective action plan on internal control are reported in the CAAR and communicated to the MB.

In 2021 the Agency continued establishing better structures, reporting lines and appropriate mandates and responsibilities in pursuit of its objectives. A number of policies and procedures contribute to a **re-enforced control environment**, in the context of the new mandate. The most important ones are listed below:

- EASO/ED Decision/2021/011 of 01/02/2021 on the identification, management and register of sensitive functions, adopted following the revision of ED Decision 301, including a dedicated risk assessment for each potentially sensitive function. This

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[48] EASO/AC/2021/003.
[49] MB Decision no. 71 of 18 March 2021, replacing MB Decision no. 60 of 18 February 2020.

measure seeks to address potential risk of jobholders deliberately using their decision-making power or influence to gain personal advantage (financial or otherwise);

- EASO/ED Decision/2021/059 of 31/05/2021 on the business continuity management strategy and framework establishing roles and responsibilities in the area of business continuity management. The Business Continuity Board was established as the main body responsible for this process;
- EASO/ED Decision/2021/061 of 12/04/2021 on the security governance framework, establishing roles and responsibilities in the area of the Agency's security governance. The Security Advisory Board was established as the principal body managing the process;
- EASO/ED Decision/2021/092 of 11/06/2021 on the policy on management of premises and related services, clarifying roles and responsibilities for premise management between operations and the support services in the Agency;
- EASO/ED Decision/2021/105 of 19/11/2021 on the establishment of an Information and Communication Technology (ICT) and Cybersecurity Governance Board. The board was established to oversee strategy, policies and procedures promoting effective ICT management at the Agency by taking into consideration available resources and ICT security perspectives. The functioning of two separate bodies - the Information Security Governance Board and the ICT Governance Board - were discontinued accordingly;
- EASO/ED Decision/2021/111 of 16/08/2021 on the EASO internal structure and rules of procedure, repealing and replacing EASO/ED Decision/2020/135 on the EASO internal structure and rules of procedure. The organisational structure was revised in anticipation of the new mandate. The ED Decision provides an overview of the key responsibilities of centres/units/sectors as well as a detailed organogram. The ED Decision was updated at the beginning of 2022 with ED Decision No 20/2022 implementing MB Decision no. 97 of 19 January 2022 establishing the Agency's internal structures and laying down the internal rules of procedure (ISROP) of 19/01/2022.

Finally, the EUAA demonstrated **continuous commitment to attract, develop, and retain competent individuals**.

Regarding **staff attraction and retention**:
- Internal control monitoring criteria 4.2.1 measures staff turnover as the rate of statutory staff leaving the Agency before completing half of their contract. For 2021 the measured value is 4.1%, which is below the established target of <5%. The corresponding value for 2020 was 3.3% and 4.93% for 2019;
- Internal control monitoring criteria 4.4.1, that measures the rate of absenteeism, is 2.1% for 2021, which is below the established target of <5%;
- The implementation rate of the recruitment plan went up from 83.8% at the end of 2020 to 89.6% at the end of 2021. This excludes 58 short-term Contract Agents and is therefore a comparable metric to the one reported in previous years. With the short-term Contract Agents, the implementation rate is 90.68%;
- All selection procedures were implemented online;
- The e-recruitment tool was available for candidates to apply for vacancies as well as for HR to manage the procedure in an automated way.

Regarding **staff development and appraisal**:

- The **appraisal exercises** in 2020 and 2021 were run via an automated tool in e-HR and info sessions on reclassification were organised for staff and managers. The reclassification process is also well presented on the intranet, together with lists of staff proposed for reclassification and the ED Decision on staff to be reclassified. Before the launch of the performance appraisal exercise for 2021, the electronic performance appraisal system was revamped. Apart from technical improvements, it now includes job descriptions to ensure that these are reviewed and as necessary updated annually. As a next step, deploying the job description project will rationalise (i.e., significantly reduce) the number of job descriptions and attach them to the role rather than to the person, as well as link them to the competency model.

Staff development via internal training was continuous, with 224 training events attended by a total of 2,808 participants. Internal training capabilities in areas of finance, procurement, internal controls and risk management were strengthened.

III.1.1.2 Risk assessment, including risks of fraud

Principles
6. The Agency specifies objectives with sufficient clarity to enable the identification and assessment of risks relating to objectives.   7. The Agency identifies risks to the achievement of its objectives across the organisation and analyses risks as a basis for determining how the risks should be managed.   8. The Agency considers the potential for fraud in assessing risks to the achievement of objectives.   9. The Agency identifies and assesses changes that could significantly impact the internal control system.

The Agency is continuously improving its ability to identify, prioritise and manage risks as part of its **annual risk management process**.

By May 2021, the **objective setting exercise** was implemented to agree clear objectives for the Agency's organisational units. The exercise was coordinated by the ICRS. Each Unit's mission, objectives, tasks/activities, specific targets and key performance indicators relevant to their activities, processes and procedures were discussed and updated.

The output of this exercise was documented in a compendium that has been endorsed by the Management and made available on the intranet. In this manner the Agency's objectives and targets are consistently filtered down from the top to the various levels of the organisation by making it available on the Agency's intranet, so that it is communicated and are understood by the Management as well as staff.

Objectives and indicators covering the delivery of priorities related to the core business and operational management are established in the Agency's multiannual SPDs, including annual WPs.

The Agency monitors the implementation of objectives through the key performance indicators available in the compendium of objectives, the internal control monitoring criteria

(Annex XI) and the WP. It also periodically reports to the MB and the Management on a number of governance and management indicators.

Based on the objectives, targets and performance indicators set by all units, new risks are identified and/or existing ones are monitored. This **exercise for identification of new risks and a monitoring of the risks previously identified** is performed quarterly, combining a bottom-up and top-down approach. The identified risks are assessed based on their likelihood of occurrence and the significance of potential impact at a residual level, taking into consideration the existing controls. The ICRS monitors and reports centrally on identified critical and significant risks. The MB is updated quarterly on risk responses and/or the need for further actions.

The central risk register includes significant and critical risks validated by the Management as well as the action plans for addressing these risks, including risk responses. All new significant and critical risks identified during quarterly reviews are documented in quarterly reports, approved by the ED and made available to all staff on the intranet.

The Agency is also closely monitoring the implementation of risk responses related to significant and/or critical cross-cutting risks. At the time of writing, out of 26 risk responses in the central risk register, six were implemented (23%), 17 were in progress (65%), one was not yet started (4%), and two were cancelled (8%). No risk response was delayed beyond the original target date.

The Agency is actively **reinforcing a culture of awareness of the risk management** process with a bottom-up approach where both staff and the Management are involved. As part of this process, several workshops for risk management correspondents (RMC) were held and related information was made available to the staff on the intranet.

The IAS audit on the IT governance and IT project management identified important recommendations related to project-level risks. In particular, it highlighted that some IT project related risks may not be reflected in the central risk register as project managers apply different approaches to risks. Several corrective actions were established in the overall action plan to address audit recommendations, detailed in Annex IX of this report. The Agency intends to take these recommendations into account during the 2022 annual risk assessment exercise and apply corrective actions accordingly.

Several control measures were implemented to **identify and mitigate the risk of fraud** in 2020 and 2021:
- The fraud risk register action plan was implemented and as a result the anti-fraud strategy 2020-2023 was adopted by the MB (described in detail in Part II.1.3);
- The fraud risk register action plan foresees the assessment of sensitive functions based on pre-defined risk factors: (a) decision making capacity; (b) capacity to influence decisions; (c) regular access to sensitive information; (d) high level contacts; (e) high level of expertise. This risk assessment was carried out prior to the adoption of the ED Decision[50] on the identification, management and the establishment register of sensitive functions;
- An internal control and ex post controls' function was established and reinforced with a risk-based financial ex ante control strategy to detect and prevent the risk of management overriding controls;

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[50]   EASO/ED Decision/2021/011 of 01/02/2021.

- The target value of 50% for staff trained on fraud prevention was exceeded, with 54% of statutory staff having participated in such training within past three years (2019-2021) (monitoring criteria 8.1.1.).

The Agency considered and **managed changes in the internal and external environment, in policies and operational priorities**.

Building on previous work, during 2021 the Corporate Planning, Monitoring and Reporting Sector assumed responsibility for EUAA programme planning. Special focus went to ascertaining readiness of the Agency for its new mandate. A concept note and a business case provided a high-level overview of the so-called EUAA Transition Programme and its objectives. The EUAA transition mapping document presented main outputs and tasks as per the EUAA regulation, indicating project ownership.

Subsequently to the adoption of the EUAA Transition Programme 2021-2023, six priority projects[51] were initiated and implemented, ensuring the necessary compliance on day one of the new mandate (see further below). A specific risk register was set up, to monitor eight risks identified in relation to the EUAA Transition Programme. One critical risk is documented in the Agency's central risk register and followed up on a regular basis.

The staff is regularly updated on the EUAA transition. In all, seven meetings[52] were dedicated to the new mandate/tasks/structure. This was further supported by a dedicated intranet page and communication and information materials (including videos).

Upon entry into force of the EUAA regulation (19 January 2022), the MB adopted the following decisions:
- Decision no 95 on the rules of procedure of the MB;
- Decision no 96 on the transition to the EUAA;
- Decision no 97 on the Agency's internal structures;
- Decision no 98 on the delegation to the ED of the EUAA of the powers conferred by the Staff Regulations of officials of the EU on the appointing authority and by the conditions of employment of other servants of the EU on the authority empowered to conclude contracts of employment.

Further MB and ED decisions are being prepared and finalised for adoption.

The Agency successfully implemented a number of practical changes on day one of its new mandate. These included the change in visual identity, timely provision of the EUAA templates to staff, the launch of the new website and intranet, and the transition of email accounts and IT programmes/applications.

The **Management's attitude towards the internal control system** is positive and active. Various aspects of the IC system were discussed continuously on Management meetings, with the support of the ICC. In addition, by Q4 2021 the vast majority of managers had participated in training on internal control, fraud prevention and risk management.

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[51] Communications; Liaison Officers; Operational and Technical Assistance; Governance of the Agency – legal framework; Fast Track Project; Fundamental rights.

[52] The EUAA – Getting Ready – June 2021; Core Business Briefing – July 2021; Core Business Briefing – September 2021; All staff meeting – October 2021; The EUAA Transition Programme – November 2021; Core Business Briefing – December 2021.

III.1.1.3 Control activities

Principles

10. The Agency selects and develops control activities that contribute to the mitigation of risks to the achievement of objectives to acceptable levels.
11. The Agency selects and develops general control activities over technology to support the achievement of objectives.
12. The Agency deploys control activities through corporate policies that establish what is expected and in procedures that put policies into action.

During 2021, the Agency implemented several **control activities to ensure the mitigation of risks** related to the achievement of policy, operational and internal control objectives. The following are examples of processes and procedures that were either introduced or updated:

ED Decision	Date of entry into force	Document reference
ED Decision on the rules for reimbursement of expenses incurred by participants invited to attend EASO activities	14 January 2021	EASO/EDD/2021/006
ED Decision on the identification, management and register of the sensitive functions within EASO	1 February 2021	EASO/EDD/2021/011
ED Decision on the establishment of an evaluation advisory group	18 February 2021	EASO/EDD/2021/034
ED Decision on the appointment of neutral verifiers	23 March 2021	EASO/EDD/2021/058
ED Decision record retention and disposal policy	12 April 2021	EASO/EDD/2021/068
ED Decision on the security governance framework	12 April 2021	EASO/EDD/2021/061
ED Decision on the establishment of a risk-based strategy for financial ex post controls	7 May 2021	EASO/EDD/2021/010
ED Decision on the nomination of confidential counsellors	7 May 2021	EASO/EDD/2021/064 EASO/EDD/2021/065 EASO/EDD/2021/066
ED Decision on video surveillance rules in EASO	7 May 2021	EASO/EDD/2021/075
ED Decision on the business continuity management strategy and framework	31 May 2021	EASO/EDD/2021/059
ED Decision on the policy on management of premises and related services	11 June 2021	EASO/EDD/2021/092
ED Decision on the security notification and reporting protocols	22 June 2021	EASO/EDD/2021/102
ED Decision on the EASO internal structure and rules of procedure (repeals and replaces previous ED Decision on this topic)	16 August 2021	EASO/EDD/2021/111
ED Decision on the establishment of an Information and Communication Technology (ICT) and Cybersecurity Governance Board	19 November 2021	EASO/EDD/2021/105

As regards **business continuity**, a deficiency related to the absence of a formally approved business continuity plan (BCP) for the Agency was pending for implementation since the ICSA of 2017. The importance of having a formalised, up-to-date business continuity plan in place was also stressed by ECA in its report on financial year 2020. The BCP implementation was therefore prioritised, with an extensive package of measures prepared and specific corrective actions (identified during previous ICSAs) were implemented:

- ED Decision on the business continuity management strategy and framework;
- Business impact analysis and mapping of the process landscape;
- Business continuity plans for critical processes with recovery time within 24 hours and one week;
- Precautionary measures in relation to the outbreak of the novel coronavirus (COVID-19);
- Security governance framework;
- Agency's IT and cybersecurity incident response plan.

In its report on the financial year 2020, ECA acknowledged that '(3.20.17) (…) following our audit, the Office approved its business continuity plan on 31 May 2021'. It is important to note that a business continuity board (BCB) was established and replaced the COVID-19 response team. The BCB has been meeting on a regular basis during Q3-Q4 2021 to address important business continuity issues, in particular COVID-19 related challenges. 14 BCB meetings were organised since its establishment. The reports of the meetings are available to staff on the intranet and were shared by email. The Head of the administration centre was assigned the role of the business continuity coordinator.

Regarding the Agency's **IT governance and control over technology**, the IAS audit in 2021 provided assurance that IT governance controls are adequately designed and working as intended. To respond to the IAS audit recommendations, the Agency has prepared an action plan.

Several corrective actions foreseen in the plan have been implemented ahead of agreed deadlines. Corrective actions implemented in 2021 address the following:

- ICT projects continue to be governed by practices already in force in the Agency for a number of years. All new projects that meet the established criteria to become projects follow the procedure and are sponsored at Management level;
- Additional governance practices are expressed by way of product and application steering committees, which govern the direction of the products that are in a formal maintenance mode. While the appropriate governing practices are a work in progress, all products have governing committees. At the level of technical changes, the established practice of the Change Advisory Board (CAB) is producing tangible and controlled results that are improving, on a weekly basis, the services offered by ICT;
- Software development practices are in line with current technological trends (such as Agile methodology) but are not yet formalised in a working instruction. A roadmap was agreed at Agency level targeting, among other, the establishment of a software development life cycle code of practice. A first draft was ready at the time of writing of this report;
- Additional IT governance practices were established by way of a note to the file on "information systems governance" practices, as transposed from Directorate General for Informatics (DG DIGIT) internal assessment and resulting actions. A number of best practices were proposed and accepted by the ICT governing body.

Furthermore, during 2021, the ICT Unit has contributed to the successful and smooth transition to the EUAA, as is the conclusion of the fast-track projects to enable the complete transformation of the technical landscape to the Agency. In addition, the Unit:

- Continued to improve the equipment distribution and quality of access to services throughout the organisation;
- Implemented cloud migration and single-sign-on for the majority of ICT products;
- Developed a value-added methodology for prioritising projects that should yield results in 2022;
- Brought online several new work sites (such as Lagadikia or Pournara);
- transitioned the full scope of IT applications and services to the organisation backup site in Strasbourg, for a full 48 hours, in a successful switchover test;
- Refreshed the videoconferencing capacity of the MB room;
- Supported the launch of multiple software releases to our application portfolio, at the rate of 1.3 per week;
- Implemented operational business continuity by way of sustaining the throughput of asylum claim interviews via remote means.

The active role of ICT and daily interaction with staff led to positive feedback recorded in a survey on ICT client-driven service desk.

The Agency continued to effectively respond to cyber incidents (around 55% of which are handled by machine learning and automated playbook practices). Response actions were established to minimise cyber-attacks along with a cybersecurity incident response plan which seeks to ensure business continuity. Two phishing campaigns were launched to raise awareness among staff. A brown bag lunch introduced the password length complexity change.

ICT security controls are further ensured by having the Information Security Officer and security assistants in the meetings of the CAB. Training sessions and cyber awareness campaigns for all staff to increase competences on the ICT security aspects were organised in 2021 and will progress in 2022.

III.1.1.4 Information and communication

Principles
13. The Agency obtains or generates and uses relevant quality information to support the functioning of internal control.
14. The Agency internally communicates information, including objectives and responsibilities for internal control, necessary to support the functioning of internal control.
15. The Agency communicates with external parties about matters affecting the functioning of internal control.

Information and document management is an important tool for the organisation to carry out internal control and to support the achievement of objectives. Further to the full implementation of the electronic records and document management system (ERDMS) in 2020, all entities were working in the SharePoint online-based system during 2021. Weekly drop-in support sessions continued until February 2021.

ERDMS training sessions were organised for staff (12 sessions included 184 users in total, of which 40% responded with 95% satisfaction rate in a follow-up survey). From Q3 2021

onwards, the ERDMS training is included in the newcomer induction. Online satisfaction survey confirmed user satisfaction with the new system and the way it facilitated their day-to-day activities.

First meetings of the ERDMS Steering Committee were organised in Q3 and Q4 of 2021. Preparatory actions on the records management policy implementation in ERDMS were done. A proof of concept for the application of the retention labels using an auto-apply mechanism was deployed during March and June 2021. The updated business classification scheme (BCS)[53] revised the Agency's filing systems across relevant sectors of activity. The records retention and disposal policy[54] was also updated and aligned with the revised BCS.

Data protection matters were dealt with by the Agency's Data Protection Officer (DPO) within the LDPS (MB Decision 64 on internal rules concerning restrictions of certain rights of data subjects in relation to the processing of personal data in the framework of the functioning of the Agency was adopted on 06/07/2020). A dedicated intranet site for data protection provides detailed information about the data protection legal framework, roles, and responsibilities of staff and the DPO as well as templates, such as the data protection (privacy) notice and the records and the data breach notification form. During 2021, the DPO provided advice on a number of ongoing or newly undertaken processing operations, including the preparation of data protection impact assessments (DPIAs) for several projects. The DPO also facilitated cooperation with the European Data Protection Supervisor (EDPS) as well as DPOs of other Justice and Home Affairs agencies.

The **access to public documents** procedure[55] is managed by the access to documents coordinator, in close collaboration with the Legal Officer. In 2020 and 2021, the process was reviewed and streamlined to ensure the respect of the (statutory) legal deadlines for the Agency's formal responses. This has been done, inter alia, by ensuring better coordination between the involved actors and establishing proper communication channels. A revision of the internal documentation and decisions governing this process is planned to continue in 2022. Detailed information on public access to documents is available on the Agency's website, which also includes a dedicated application form for external requestors.

The Agency adopted a security governance framework (SGF)[56] to guide the implementation of security mechanisms in the Agency, including those for **security information**. One of the pillars of the SGF are 'security measures regarding information'. The Agency is bound by the security principles contained in Commission Decision (EU, Euratom) 2015/444 of 13 March 2015 which lays down basic principles and minimum standards for protecting EU classified information. Appendix 2 of the SGF contains a table of equivalence setting out how certain terms established in the Commission Decision should be understood within the Agency.

Regarding **internal communication**, the Agency continued operating in accordance with the instructions provided for each phase in the 'return to the office' strategy. Internal events were mostly organised in a hybrid format or entirely virtual, and most of the communication to staff happened through e-mail, Intranet postings, and the internal newsletter. Other sources of information for staff related to core business and transition to the EUAA were the regular core business briefing (CBB) updates (six), all staff meetings chaired by the ED (two), special EASO-

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[53]   Administrative Circular EASO/AC/2021/004 of 04/05/2021.
[54]   EASO/ED Decision/2021/068 of 12/04/2021.
[55]   As per Regulation (EC) No 1049/2001.
[56]   EASO/EDD/2021/061.

EUAA transition brown bag lunches (seven) events and info sessions (five). The average attendance rate of internal events remained high (ca. 170 participants on each event). The Communication and Public Relations Unit managed to respond to all requests for campaigns and initiatives.

The Agency also launched its third staff engagement survey, which was followed by a presentation of the results and the next steps towards setting up a comprehensive action plan. In addition, five other internal initiatives were organised and around 60 requests were completed to increase internal awareness through the intranet.

The Agency continued operating in accordance with the instructions provided for each phase in the 'return to the office' strategy. A dedicated section on the intranet provides information related to COVID-19. The page includes contact numbers for national authorities, COVID-19 data, the minutes of the BCB meetings, updates on new ED Decisions as well as the decisions themselves and any other documentation of relevance to staff. Staff were updated on any COVID-19 cases within the Agency, without disclosing any personal information.

Summary reports of all Management meetings and of internal and governance documents were stored on the ERDMS and made available to all staff on the intranet. Induction training sessions continued to take place remotely and are currently covering three full days of presentations.

Since the adoption of the Agency's guidelines on whistleblowing in 2019, the Agency has been increasing its efforts to raise staff awareness on the procedure and the dedicated **whistleblowing channels**. Information is clearly presented in the ICRS intranet page (whistleblowing hotlines, including fraud allegation online forms) with links to additional information and guidance from OLAF.

The Agency's **external communication** activities were increased for a fourth consecutive year, notably with redoubled focus on audio-visual and social media outputs in line with stakeholder expectations. All actions were implemented in a timely manner, with efficiency, cost-effectiveness and a high return on investment underpinning the Agency's communication activities. The Agency continued to effectively communicate clear and understandable information on the Agency's activities to make it as relevant as possible to a broader public discourse. Communication activities were aligned with the EU broader policy narrative on migration and asylum.

The Agency recorded an increase in its online press audience reach for the fourth consecutive year, reaching 18.4 billion, compared to 16.5 billion in 2020 (+11.5%) and 2.1 billion in 2017 (+776.2%). Throughout 2021, a minimum of 7,840 online articles referred to the Agency, its activities or its reports, compared to 6,770 in 2020 (+16%). The Agency appeared/was referenced in media outlets across Europe, including Politico, Euronews TV, New York Times, Le Figaro, Spiegel amongst others, as well as all major international and national news wires. Almost all news references to the Agency were either positive or neutral (as a source, reference or best practice). The Agency's social media presence continued to grow. The Agency now has one of the largest social media footprints among EU agencies. A notable increase was registered in social media followers: more than 48,000 followers on Twitter, with a total of 121,155 followers combined on Twitter, Facebook, LinkedIn, Instagram and YouTube (+23.6% in 2020), and a +34% increase in the monthly average reach at the end of the year. The Agency's website received 1.26 million pageviews by the end of 2021 (+26% in 2020). Throughout 2021, the Agency ran several social media digital campaigns, such as 'From EASO to the EUAA - what will change'', 'we are what we do'' and 'did you know?' that

yielded positive results both internally and externally. Around 40 videos and animations were produced in-house in 2021.

The Agency's quarterly newsletter was launched in a modern format on the website and also as a stand-alone version showcasing latest activities, products and highlights. Despite the COVID-19 pandemic, the Agency's regular large-scale stakeholder events such as the launch of the asylum report, the EASO 10-year anniversary conference and the CF annual meeting took place in a hybrid format. The events were a success in terms of engagement and high-level speaker attendance. The growing recognition of the Agency was also manifested in an increase in press requests and queries from the general public. Several presentations to wider audiences on the work of the Agency took place in a hybrid format. In terms of publications, 279 public and limited reports were produced, marking it the highest number of publications since the establishment of the Agency. Out of these, 185 were limited and 94 public, the latter being promoted through the Agency's social media channels, website and networks/stakeholders.

III.1.1.5 Monitoring activities

Principles
16. The Agency selects, develops, and performs ongoing and/or separate assessments to ascertain whether the components of internal control are present and functioning.
17. The Agency assesses and communicates internal control deficiencies in a timely manner to those parties responsible for taking corrective action, including the MB and senior management, as appropriate.

Continuous and specific assessment tools are used to ascertain whether each of the five components of internal control are present and functioning.

During 2021, the list of deficiencies was compiled using the following sources:

Internal Control Deficiencies and Sources 2021

- IAS — 30 / 55%
- EUAA ex-post controls — 17 / 31%
- ECA — 8 / 14%
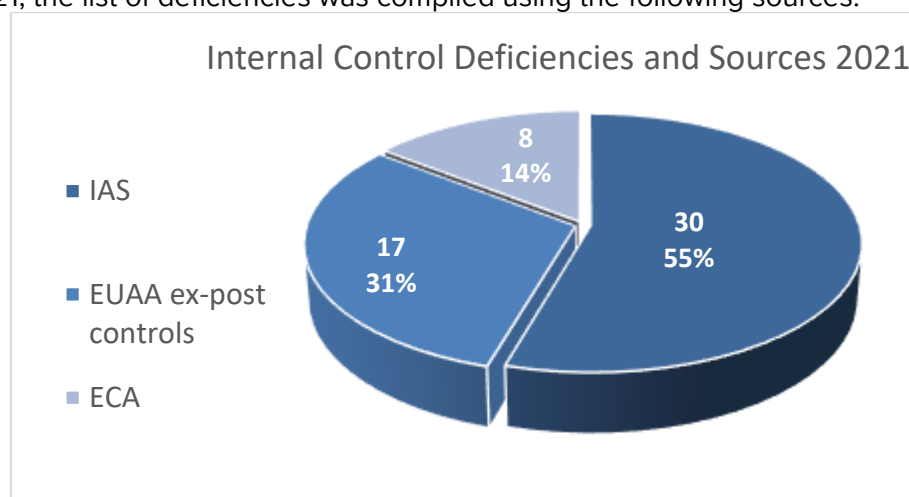
The majority of deficiencies identified by control bodies (either IAS or ECA) have also been identified by the internal control, which can be accessed via the link provided in Annex IX.

The primary source of information for the IC self-assessment are **34 internal control monitoring criteria indicators (ICMC)**[57] adopted by the Management for the financial year 2021 (detailed results compared to the baselines and agreed targets by the Management are available in Annex XI).

Following the analysis of the IC monitoring criteria, it was concluded that 97% of indicators were either achieved (88%) or partially achieved (9%) as shown in the graph below.
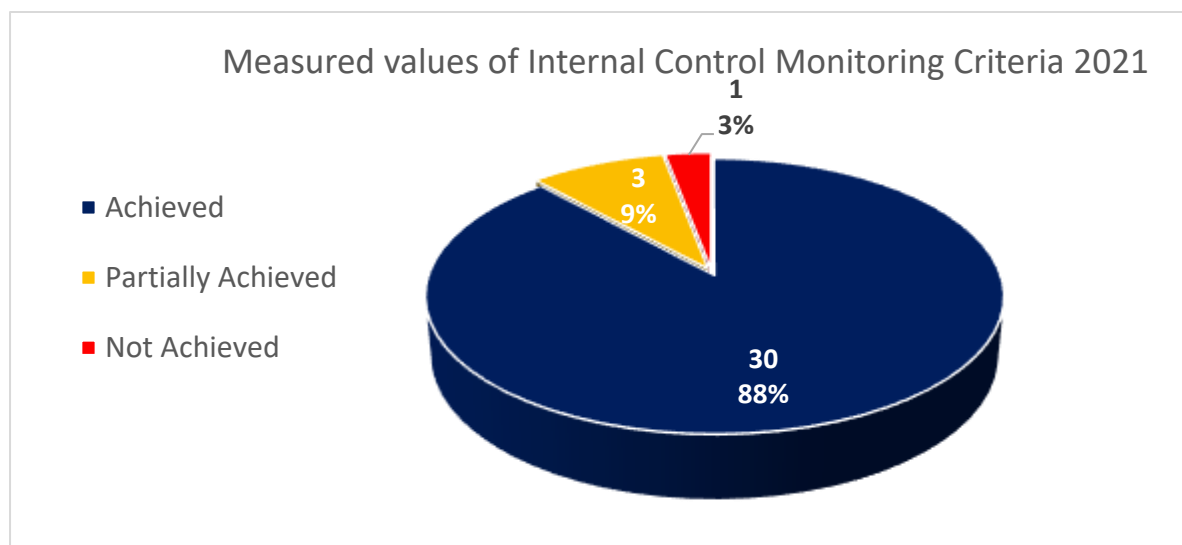
The achievement of targets in 2021[58] also shows some improvement compared to past results:
- 88% achieved in 2021, compared to 81% in 2020;
- 9% partially achieved in 2021, compared to 17% in 2020;
- 3% not achieved in 2021, compared to 2% in 2020.

The overall status of the internal control system shows continuous improvement as reflected in the following graphs.

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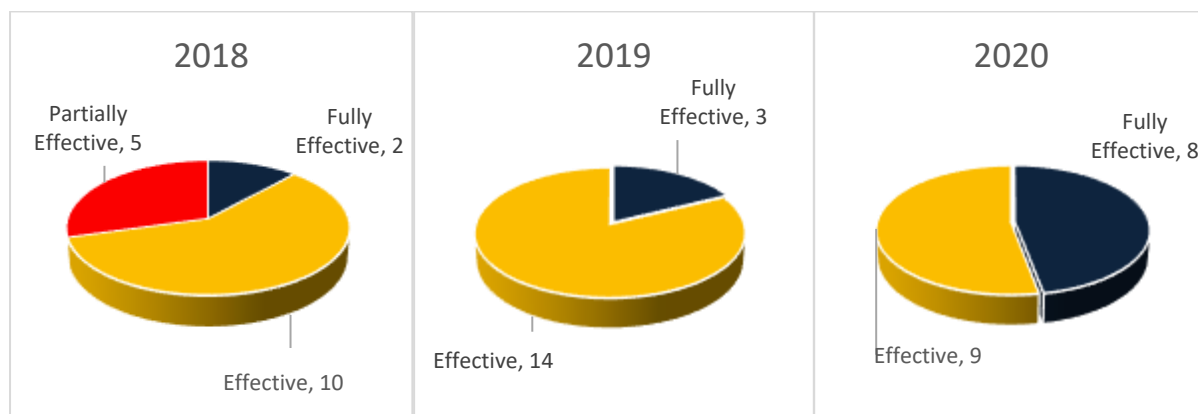
[57] The ICMC are indicators of performance and compliance with internal control principles defined by the Management for a given period of time. For each indicator, the Management defines the baseline value at the beginning of the period as well as the expected target to be achieve at the end of the period under assessment.

[58] Some results from 2021 are not available because in 2022 the Agency did not run a staff engagement survey for that year. The staff engagement survey is conducted every other year, some monitoring criteria will therefore be assessed for the internal control self-assessment of 2022.

Status of Internal Control Systems 2021

- Fully Effective
- Effective

9
53%

8
47%
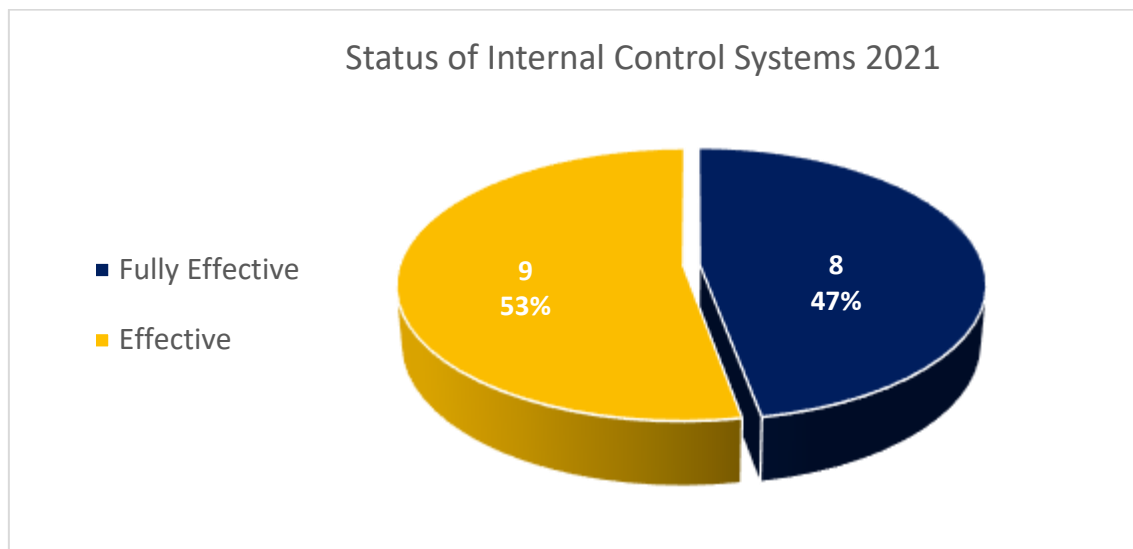
III.1.2 Information on how effectively the internal control principles are implemented

The ICSA identified eight fully effective and nine effective internal control principles. Overall controls in place are working as intended and certain principles require some improvements. Details on how effectively the ICC principles are implemented is presented in Part III.1.1.

Component	No.	Description of principles	Assessment & category 2019	Assessment & category 2020	Assessment & category 2021
Control environment "Effective"	1	Demonstrates commitment to integrity and ethical values	Category 2 "Effective"	Category 2 "Effective"	Category 2 "Effective"
	2	Exercises oversight responsibility	Category 2 "Effective"	Category 2 "Effective"	Category 2 "Effective"
	3	Establishes structure, authority and responsibility	Category 2 "Effective"	Category 1 "Fully Effective	Category 1 "Fully Effective"
	4	Demonstrates commitment to competence	Category 2 "Effective"	Category 2 "Effective"	Category 2 "Effective"
	5	Enforces accountability	Category 2 "Effective"	Category 1 "Fully Effective"	Category 1 "Fully Effective"
Risk assessment "Fully effective"	6	Specifies suitable objectives	Category 2 "Effective"	Category 1 "Fully Effective"	Category 1 "Fully Effective"
	7	Identifies and analyses risk	Category 1 "Fully Effective"	Category 1 "Fully Effective"	Category 1 "Fully Effective"
	8	Assesses fraud risk	Category 2 "Effective"	Category 1 "Fully Effective"	Category 1 "Fully Effective"

Component	No.	Description of principles	Assessment & category 2019	Assessment & category 2020	Assessment & category 2021
	9	Identifies and analyses significant change	Category 1 "Fully Effective"	Category 1 "Fully Effective"	Category 1 "Fully Effective"
Control activities "Effective"	10	Selects and develops control activities	Category 2 "Effective"	Category 2 "Effective"	Category 2 "Effective"
	11	Selects and develops general control over technology	Category 2 "Effective"	Category 2 "Effective"	Category 2 "Effective"
	12	Deploys through policies and procedures	Category 2 "Effective"	Category 2 "Effective"	Category 2 "Effective"
Information and communication "Effective"	13	Uses relevant information	Category 2 "Effective"	Category 2 "Effective"	Category 2 "Effective"
	14	Communicates internally	Category 2 "Effective"	Category 1 "Fully Effective"	Category 1 "Fully Effective"
	15	Communicates externally	Category 1 "Fully Effective"	Category 1 "Fully Effective"	Category 1 "Fully Effective"
Monitoring activities "Effective"	16	Conducting ongoing and /or separate assessments	Category 2 "Effective"	Category 2 "Effective"	Category 2 "Effective"
	17	Assessing and communicating internal control deficiencies	Category 2 "Effective"	Category 2 "Effective"	Category 2 "Effective"

III.1.3 Information on the principles with which the Agency does not comply yet

The Management, with the support of the ICC, identified 81 corrective actions (down from 88 in 2020) to immediately address 55 documented deficiencies of the internal control system. For the majority of these deficiencies, the assigned corrective actions are being implemented.

State of Play of corrective actions ICSA 2021

- Planned — 30, 37%
- In progress — 38, 47%
- Implemented — 13, 16%
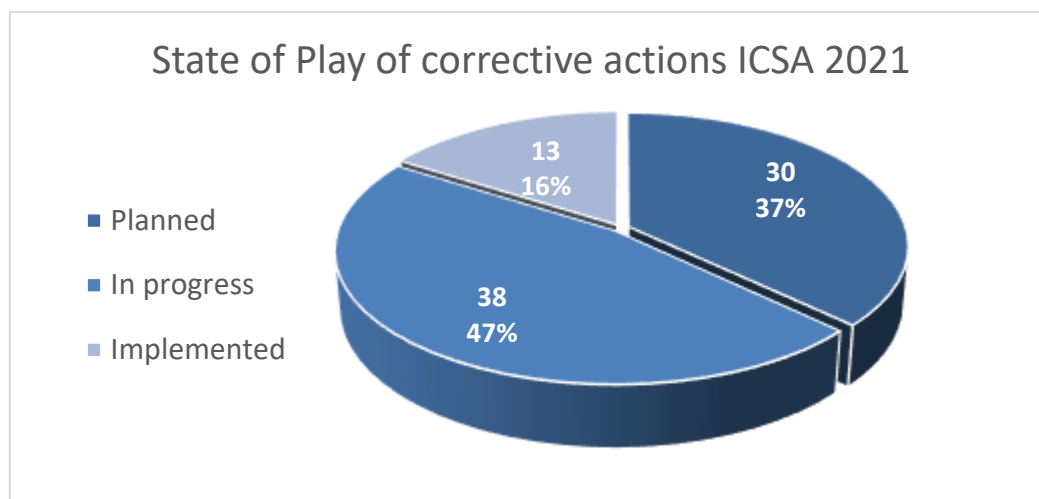
Only 30 corrective actions (37%) identified during the 2021 ICSA are still in the 'planned' stage. Implemented corrective actions that remain in the central register of deficiencies refer to corrective actions that the ICC has assessed as effectively implemented but are still not closed by control bodies (IAS or ECA).

The improvements needed in the Agency's internal control system are listed in detail in the register of deficiencies and corrective action plan available in Annex IX.

III.1.4 Prevention, detection and correction of fraud

The **anti-fraud strategy 2020-22**[59] aims to maximise likely fraud prevented detection by creating a strong fraud-deterrence.

III.1.4.1 Implementation of the anti-fraud strategy

The Agency has identified **five fraud prevention risk management objectives** to enable the identification and assessment of incentives, pressures, opportunities and attitudes which may lead to any type of fraud. These five fraud risk management objectives fully support, are consistent with, and correspond to ICF's 17 internal control principles and five components. Based on the pre-defined fraud prevention risk management objectives, the Management, with the support of the ICC, has adopted **priority measures** for 2020-2022 to address possible incentives, pressures, opportunities and attitudes which may lead to any type of fraud, notably fraudulent reporting, loss of assets, disclosure of sensitive information and corruption.

For each priority measure, the Management has documented the **control activities[60]** defined or planned to provide reasonable assurance to the ED on the achievement of the fraud prevention objectives and priority measures. The control activities linked to the priority measures and fraud prevention objectives are documented in Annex X.

III.1.4.2 Mechanisms put in place for the anti-fraud strategy monitoring

The proposed fraud control activities and fraud risks identified were introduced into the anti-fraud strategy for 2020-2022 and were re-assessed by the Management, based on a pre-defined methodology approved by the ED[61]. Following this, the Management endorsed the fraud risk register action plan.

The action plan stemming from the strategy was fully implemented by the end of 2021.

III.1.4.3 Implementation and monitoring of the EUAA's policies for the prevention and management of conflicts of interest

Based on the guidelines drafted by the EC, the Agency adopted a policy which sets out a number of principles, procedures and tools aimed at preventing, identifying and managing situations of conflict of interest. The comprehensive audit on human resources management and ethics implemented by the IAS in 2020 confirmed, 'the Agency's ethical framework,

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[59] EASO/MB/2020/067 of 06/07/2020.
[60] This overview entails a 'snapshot' of the situation at the time of adoption of this present MB Decision. As such, the most up to date overview is subject to regular change over time.
[61] EASO/EDD/2020/078 of 08/04/2020.

incorporating policies that ensure staff and other workers associated with or representing the Agency always act in compliance with the law and the Agency's code of ethics, is an important internal control in the effective management of the Agency's human resources'.

The Agency's policy for the prevention and management of conflicts of interest is being reviewed against the new regulatory provisions and newly mandated functions and activities.

III.2 Conclusions of assessment of internal control systems

III.2.1 The overall result of the management assessment of the effectiveness of internal control systems

The assessment of the ICS was carried out by the Management in coordination with the ICC. At the level of the IC principles, it was concluded that eight principles are fully effective and nine are effective (please refer to the table in Part III.1.2).

At the level of the IC components (based on the analysis of results at the IC principle level), it was concluded that all components are effective, whilst improvements are needed as shown in the table below.

Overall assessment form[62]

Internal control component	Categori-sation 2019	Categori-sation 2020	Categori-sation 2021	Explanation/ conclusion
CONTROL ENVIRONMENT	Effective (Category 2)	Effective (Category 2)	Effective (Category 2)	All five principles are effective but need some improvements (2 principles category 1 and 3 principles category 2), the Management concludes that the component is present and functioning and that the system of internal control is effective, but some improvements are needed.
RISK ASSESSMENT	Effective (Category 2)	Fully Effective (Category 1)	Fully Effective (Category 1)	All four principles are fully effective, only minor improvements are needed

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[62] Category 1 "Fully effective" - The component is effective: present and functioning well, only minor improvements needed. Only minor deficiencies remain.
Category 2 "Effective" - The component is effective: present and functioning, but some improvements are needed. No more than one moderate deficiency remains.
Category 3 "Partially Effective" - The component is not effective: it is partially present and functioning, major improvements are needed. No more than one major deficiency or combination of several moderate deficiencies.
Category 4 "Not Effective" - The component is not present and functioning. There are several major deficiencies or a critical one.

				(category 1), the Management concludes that the component is present and functioning and that the system of internal control is fully effective, but minor improvements are needed.
CONTROL ACTIVITIES	Effective (Category 2)	Effective (Category 2)	Effective (Category 2)	All three principles are effective, but need improvements (category 2), the Management concludes that the component is present and functioning and that the system of internal control is effective, but some improvements are needed.
INFORMATION AND COMMUNI-CATION	Effective (Category 2)	Effective (Category 2)	Effective (Category 2)	All three principles are effective, but two of them require some improvements (category 2), the Management concludes that the component is present and functioning and that the system of internal control is effective, but some improvements are needed.
MONITORING ACTIVITIES	Effective (Category 2)	Effective (Category 2)	Effective (Category 2)	Both principles are effective, but need improvements (category 2), the Management concludes that the component is present and functioning and that the system of internal control is effective, but some improvements are needed.
OVERALL ASSESSMENT (1/2/3 or 4)	Effective (Category 2)	Effective (Category 2)	Effective (Category 2)	

Considering that all five components being either effective or fully effective and all principles either fully effective (category 1 – 8 principles) or effective (category 2 – 9 principles), and after considering the residual risk following the approval of the Management of the corrective action plan, the **Management concludes that,** while improvements are needed, **the internal control systems of the Agency are present and functioning (effective)**.

III.3 Statement of the Manager in charge of risk management and internal control

I, the undersigned,

Manager in charge of risk management and internal control within the European Union Agency for Asylum,

In my capacity as manager in charge of risk management and internal control in the EUAA, I declare that, in accordance with Decision No. 42 of the Management Board of 21 December 2018 on the internal control framework, I have reported my advice and recommendations on the overall state of internal control to the ED.

I hereby certify that the information provided in Part II 'Management' and 'External evaluations', Part III 'Assessment of effectiveness of the internal control systems' and Part IV 'Management assurance' of the present Consolidated Annual Activity Report and in its annexes is, to the best of my knowledge, accurate, reliable and complete.

Malta, 3 June 2022

(original signed)
Gerardo KNOUSE RAMIREZ
Internal control coordinator[63]

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[63]   The Internal Control Coordinator took up duties in January 2019 and is the head of the Internal Control and Risk Management Sector.

Part IV: Management assurance

IV.1 Review of the elements supporting assurance

IV.1.1 Brief description of the building blocks of assurance

The Agency's corporate governance framework - namely, the way reliable information and assurance is provided to the MB to effectively monitor the activities implemented by the ED towards the achievement of the Agency's objectives – is ensured through the following three main building blocks of assurance:
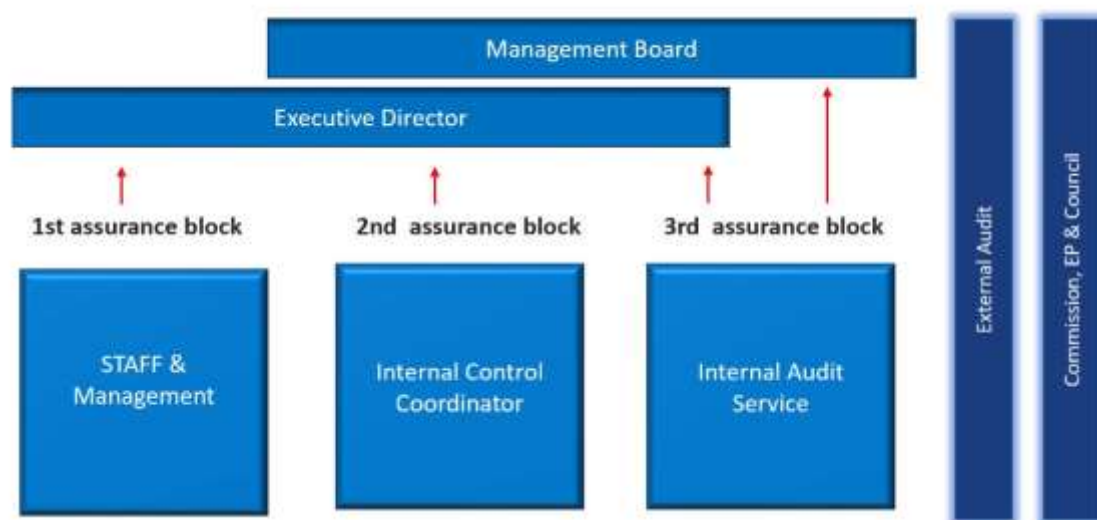
The Agency applies the COSO ICF endorsed by the Commission especially through the internal control components and principles.

The Management (in particular the AODs AOSDs) have, in their role as the first building block of assurance, provided a signed declaration for the preparation of the CAAR 2021 assuming responsibility for the completeness and reliability of management reporting on the results and achievements of objectives.

The Agency's ex post controls' function is coordinated by the ICC within the ICRS. The ICC is, among other duties, responsible for supporting the ED and the Management in the development, setting up and assessment of the Agency's internal control systems. The ICC's role as a centre of competence (adviser), is a second building block of assurance, that is key to ascertain the performance of the new processes and internal control systems developed, to build business processes adapted to the EUAA's changing conditions, to increase the assurance and to identify recommendations and corrective actions addressed to the Management and the ED.

The assurance received from the IAS (as the third building block of assurance) is explained in Part II.7.1. In addition, ECA has provided an additional level of assurance by implementing an exhaustive audit on the functioning of the Agency's internal control systems as described in Part II.7.2. Last but not least, the role of the budget authority in the discharge process is described in Part II.9.

IV.1.2 Summary analysis of the conclusions of any significant weaknesses reported in Part II and Part III

The analysis and assessment by the ED of the efficiency and effectiveness of the building blocks of assurance defined in Part IV and of any significant weaknesses reported in Part II and Part III are the basis for the AOs final declaration of assurance as well as the declarations of assurance provided by the AOD to the ED.
The summary of the weaknesses is available in Annex IX, which includes all deficiencies addressed and assessed by the Management together with approved corrective actions.

The register of deficiencies and corrective action plan takes into account weaknesses identified by control bodies during their last audit engagements for which the observation and/or recommendations are in "on-going" status and therefore not closed by the auditors. However, the internal control self-assessment for the financial year 2021 does not include observations (if any) from ECA 2022 report on the financial year 2021 as they are not final at the time of the drafting of this report. Nevertheless, the internal control self-assessment takes into consideration previous findings from IAS and ECA if the corrective actions are not implemented or if the finding is not yet closed by these institutions.

The inherent risk level at the end of 2021 of these weakness, for the functioning of the building blocks of assurance was initially assessed as "major/moderate" by the Management. However, the final Management conclusion and assessment of significant weaknesses based on the acceptance of the new corrective actions planned, together with the actions already in progress and implemented since January 2022, allowed the Management to reassess the risk as "moderate/minor" and to conclude that all the building blocks of assurance as well as the overall ICS is effective whilst improvements are needed.

The implementation of the recommendations and corrective actions suggested by the ICC and endorsed by the Management available in Annex IX, are designed to further reduce the risk to "minor" and thus reach a fully effective and efficient internal control system.

IV.1.3 Assessment of significant weaknesses joint combined impact on the declaration of assurance

At the time of drafting of this report, the Agency is yet to receive the ECA final audit report[64] for the financial year 2021[65]. These payments could therefore be still considered as irregular by ECA in the final report for the financial year 2021, however, not expected to exceed the materiality threshold.

The ED has taken initiatives to address deficiencies identified by ECA and, in particular, implemented during 2020-2021 a number of corrective actions related to the procurement procedures declared as irregular in previous years. Moreover, diligent attention was dedicated to the follow-up on pending observations from previous audits, seeking to streamline the Agency's processes and procedures.

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[64] At the moment of drafting this report, the ECA's final opinion had not been issued, the observations are still preliminary, therefore, there is still the possibility that they are revised based on the reaction on these preliminary observations by the Agency.

[65] In audit report 2019, ECA issued a qualified opinion mainly related to several irregular procurement payments reported in previous years reports. The total amount paid out irregularly represented 14.6% of all payments made by EASO in 2019.

Moreover, the ED has made considerable efforts to further improve the Agency's governance, internal control systems and risk management processes.

The Agency has established seamless communication channels with key stakeholders. The Agency continues working closely with the EC (in particular with DG for Migration and Home Affairs (HOME), DG Budget (BUDG), IAS, European Anti-Fraud Office (OLAF) and DG Human Resources and Security (HR)) for effective and efficient implementation of its governance and internal control processes. The ED continues to provide quarterly reports to the MB in key areas of governance to assess the level of progress towards the achievement of pre-defined objectives.

Consequently, despite of the risk mentioned above related to previous years' procurement procedures, the ED is of the opinion that during 2020 and 2021 she had been provided with reasonable assurance, that suitable internal controls were in place and working as intended, and that significant deficiencies were timely identified, and corrective actions implemented to mitigate their impact

The ED is committed to continued implementation of improvements and reinforcement measures to correct the weaknesses reported in Part II and Part III. Taking into account the state of play of corrective actions (agreed by the Management in April 2021 and summarised in Annex IX) at the date of this report, including those that are planned for, in progress or already implemented in 2022, the ED has re-assessed the degree of severity of deficiencies.

Based on significant improvements made by the Agency, the budgetary authority had decided to grant its discharge to the Agency in implementing the budgets for the financial years of 2018, 2019 and 2020.

IV.2 Reservations

Based on the information provided in Parts IV.1.1, IV.1.2 and IV.1.3, the ED has decided not to introduce any reservations in her declaration of assurance in the CAAR 2021, as the control procedures put in place during 2021 gave her the necessary guarantees concerning the legality and regularity of the underlying transactions for this period, due to the presence of an overall effective and efficient ICS.

Declaration of Assurance

I, the undersigned, Executive Director of the European Union Agency for Asylum,

In my capacity as Authorising Officer,

Declare that the information contained in this report gives a true and fair view.

State that I have reasonable assurance that the resources assigned to the activities described in this report have been used for their intended purpose and in accordance with the principles of sound financial management, and that the control procedures put in place give the necessary guarantees concerning the legality and regularity of the underlying transactions.

This reasonable assurance is based on my own judgement and on the information at my disposal, such as the results of the self-assessment, ex post controls, the work of the Internal Audit Service, and the lessons learnt from the reports of the Court of Auditors for years prior to the year of this declaration.

Confirm that I am not aware of anything not reported here which could harm the interests of the Agency.

Valletta Harbour, 3 June 2022

(original signed)

Nina Gregori
Executive Director

Annexes

Annex I: Core business statistics

The objectives, indicators and targets stem from Amendment 2 of the Single Programming Document (SPD) 2021-2023, including the Work Programme 2021, adopted on 21 June 2021.

The following methodology has been used to categorise results:
- Multi-annual indicators: ≥80% of the target = 'on track'; <80% of the target = 'in delay'; cancellations, postponements, planned for later 'NA' (not applicable);
- Annual indicators: >100% of the target = 'exceeded'; >96% of the target = 'achieved'; >79% of the target = 'nearly achieved'; ≥79% of the target = 'in delay'; cancellations, postponements, planned for later = 'NA' (not applicable).

Multi-annual indicators - implementation of the SPD 2021-2023, status as of 31.12.2021
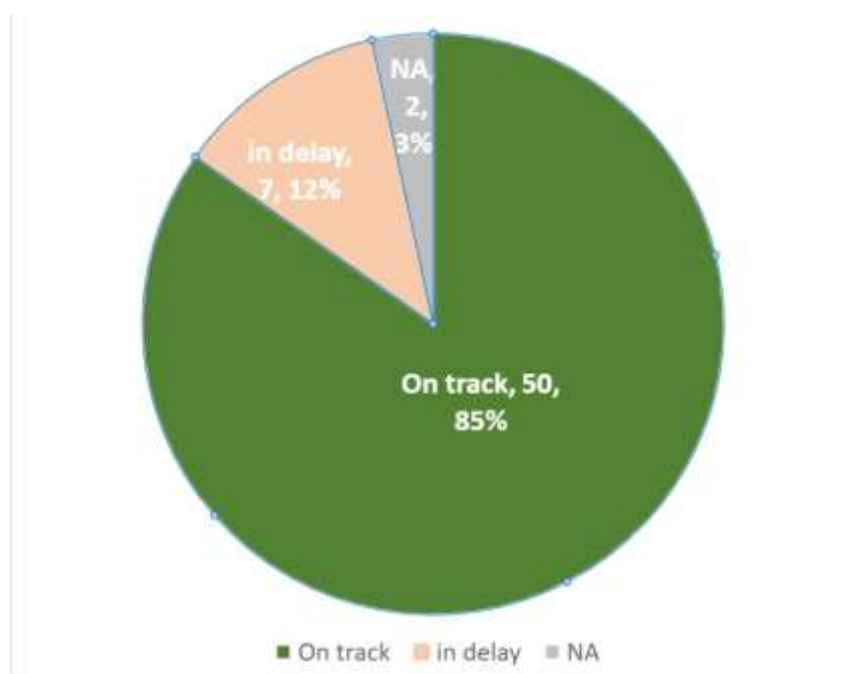
Multi-annual (2021-2023) activity areas	On track	In delay	NA
2.1 Operational support	12	0	0
2.2 Operational support and tools, programming, monitoring and evaluation of operations	0	0	0
2.3 Asylum knowledge	29	6	1
2.4 Training and professional development	5	0	1
2.5 Horizontal activities	4	1	0
	50	7	2

Annual indicators - implementation of Work Programme 2021
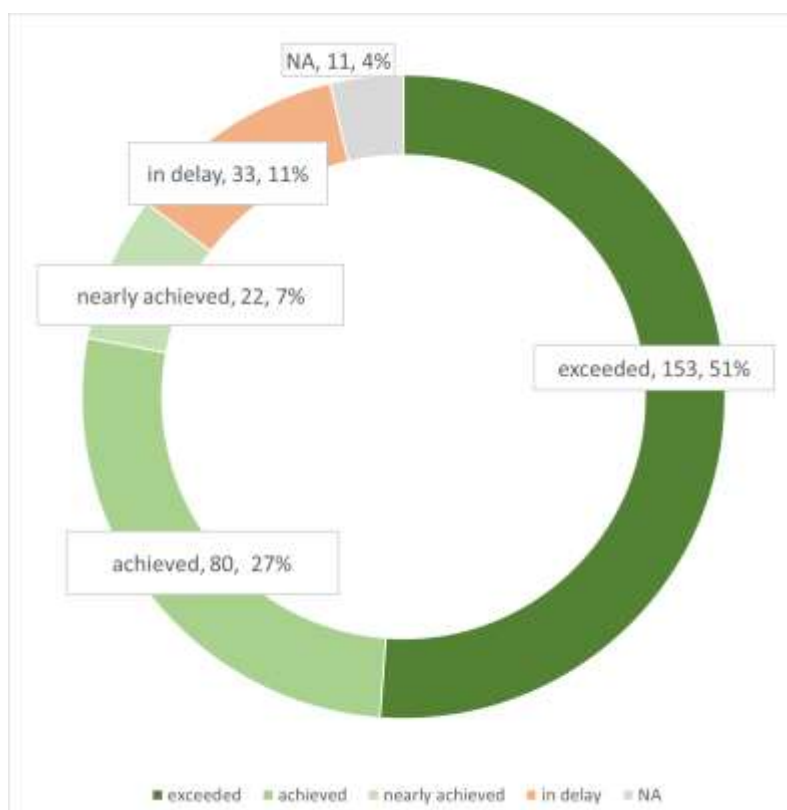
Work Programme (2021) activity areas	Exceeded	Achieved	Nearly achieved	In delay	NA
2.1 Operational support	40	20	13	17	6
2.2 Operational support and tools, programming, monitoring and evaluation of operations	6	9	0	0	1
2.3 Asylum knowledge	65	39	3	16	4
2.4 Training and professional development	20	6	3	0	0
2.5 Horizontal activities	22	6	3	0	0
TOTAL	**153**	**80**	**22**	**33**	**11**

Multi-annual overview - annual indicators - implementation of Work Programme

	2017	2018	2019	2020	2021
Exceeded	41%	40%	43%	43%	51%
Achieved	48%	38%	30%	34%	27%
Nearly achieved					7%
Not achieved	11%	12%	15%	13%	11%
Not applicable	*not shown*	10%	9%	8%	4%
No data	*not shown*	*not shown*	2%	2%	0%

Annex II: Statistics on financial management

Budget outturn

Budget outturn	2019	2020	2021
Reserve from the previous years' surplus (+)			
Revenue actually received (+)	102,820,564	131,061,209	153,119,888
Payments made (-)	-90,853,249	-101,767,298	-130,517,329
Carry-over of appropriations (-)	-17,575,187	-23,762,557	-32,677,194
Cancellation of appropriations carried over (+)	643,599	1,160,180	1,030,978
Adjustment for carry-over of assigned revenue appropriations from previous year (+)	9,272,326	11,431,167	17,035,312
Exchange rate differences (+/-)	-4,433	-3,906	-25,815
Adjustment for negative balance from previous year (-)			
TOTAL	4,303,620	18,118,795	7,965,840

Commitments are entered in the accounts on the basis of the legal commitments entered into up to 31 December and payments on the basis of the payments made by the Accounting Officer by 31 December of that year, at the latest. The Agency has non-differentiated appropriations for titles 1 and 2 (commitment and payment appropriations are equal and linked) and differentiated appropriations for title 3 and title 4.

The automatic carry-over of CA is intended to cover expenditure for the goods/services delivered during the year and not yet paid at the end of the year (several invoices and debit notes from contractors and EU institutions/agencies were pending to be received) or for goods/services to be delivered during the following year as per contract conditions.

Non-differentiated C1 appropriations (Title 1 and Title 2) corresponding to obligations duly contracted at the close of the financial year are carried over automatically to the following financial year only, together with the PA.

Differentiated C8 appropriations (Title 3), from previous years, are carried over automatically to the following financial year(s), under C8 appropriations, without the PA.

CA amounting €4,716,972.73 were cancelled in 2021, which represents 3.32% of the budgeted (C1) CA. PA amounting €6,943,321.44 were cancelled in 2021, which represents 4.89% of the budgeted (C1) PA. Out of the €6,727,245.63 PA carried over in 2021, €1,030,977.53 (15.33%) were cancelled.

The total amount of appropriations carried over from 2020 to 2021 was €32.33 million in CA and €6.72 million in PA. Out of the €32.33 million carried over in CA, €25.6 million correspond to T3 differentiated C1 appropriations corresponding to obligations duly contracted at the end of the financial year. In Title 3, out of the total amount of €25.6 million carried over to 2021, the amount of €0.77 million was still carried over from 2019.

CA were cancelled mainly due to continued disruptions due to COVID-19 (delays in taking-up duties, moving to online recruitment, and meetings, cancelled missions, cancelled events and services etc.). PAs were cancelled mainly due to delayed provision of services or partial delivery of the services in COVID-19 circumstances.

The cancellations of carried over payment appropriations in 2021 amounted €1,103,977.53 (15.53%). In Title 1 and 2 cancellations were mainly due to COVID-19 related cancellations at the beginning of 2021 (cancelled face-to face recruitment and pre-medical check-ups, cancelled face-to face training and meetings, partially cancelled canteen, cleaning and security services) but also provision of less services than contracted (interim agents). Similarly, in Title 3 services were cancelled and payments due were lower than expected given the limitations in travel and meetings. Face-to-face meetings, training courses, events and also deployment of experts were for the largest part cancelled/postponed/remodulated (arranged remotely at lower than planned cost). Additionally, temporary workers' absenteeism and earlier resignations led to cancelled carried over appropriations.

Detailed budget execution per fund source and budget item

1. Funds from the EU general budget (C1)

Title 1

Budget line	Commit. Approp. budgeted (1)	Executed Commitment Appropr. (2)	% Committed (3=2/1)	Credit Not Used (4=1-2)	Payment Approp. budgeted (5)	Executed Payments (6)	% Paid (7=6/5)	R A L (8=2-6)
A-1101	27,274,185.00	27,274,185.00	100.00 %	0.00	27,274,185.00	27,274,185.00	100.00 %	0.00
A-1102	7,313,450.00	7,312,890.41	99.99 %	559.59	7,313,450.00	7,312,890.41	99.99 %	0.00
A-1103	372,990.00	372,554.93	99.88 %	435.07	372,990.00	372,554.93	99.88 %	0.00
Total	**34,960,625.00**	**34,959,630.34**	**100.00%**	**994.66**	**34,960,625.00**	**34,959,630.34**	**100.00%**	**0.00**
A-1201	185,400.00	168,244.37	90.75 %	17,155.63	185,400.00	107,144.37	57.79 %	61,100.00
Total	**185,400.00**	**168,244.37**	**90.75%**	**17,155.63**	**185,400.00**	**107,144.37**	**57.79%**	**61,100.00**
A-1301	150,500.00	150,500.00	100.00 %	0.00	150,500.00	125,483.70	83.38 %	25,016.30
Total	**150,500.00**	**150,500.00**	**100.00%**	**0.00**	**150,500.00**	**125,483.70**	**83.38%**	**25,016.30**
A-1401	81,700.00	64,025.43	78.37 %	17,674.57	81,700.00	24,512.09	30.00 %	39,513.34
A-1402	65,000.00	65,000.00	100.00 %	0.00	65,000.00	28,163.01	43.33 %	36,836.99
A-1403	2,326,000.00	2,264,206.24	97.34 %	61,793.76	2,326,000.00	1,871,129.96	80.44 %	393,076.28
Total	**2,472,700.00**	**2,393,231.67**	**96.79%**	**79,468.33**	**2,472,700.00**	**1,923,805.06**	**77.80%**	**469,426.61**
A-1501	696,500.00	687,607.44	98.72 %	8,892.56	696,500.00	411,592.07	59.09 %	276,015.37
Total	**696,500.00**	**687,607.44**	**98.72%**	**8,892.56**	**696,500.00**	**411,592.07**	**59.09%**	**276,015.37**
A-1601	2,336,900.00	2,188,367.48	93.64 %	148,532.52	2,336,900.00	1,625,365.03	69.55 %	563,002.45
A-1602	216,500.00	216,500.00	100.00 %	0.00	216,500.00	145,263.02	67.10 %	71,236.98
A-1603	164,000.00	130,610.00	79.64 %	33,390.00	164,000.00	61,538.75	37.52 %	69,071.25
Total	**2,717,400.00**	**2,535,477.48**	**93.31%**	**181,922.52**	**2,717,400.00**	**1,832,166.80**	**67.42%**	**703,310.68**
A-1701	9,500.00	1,828.17	19.24 %	7,671.83	9,500.00	1,828.17	19.24 %	0.00
Total	**9,500.00**	**1,828.17**	**19.24%**	**7,671.83**	**9,500.00**	**1,828.17**	**19.24%**	**0.00**
Total T1	**41,192,625.00**	**40,896,519.47**	**99.28%**	**296,105.53**	**41,192,625.00**	**39,361,650.51**	**95.56%**	**1,534,868.96**

Title 2

Budget line	Commit. Approp. budgeted (1)	Executed Commitment Appropr. (2)	% Committed (3=2/1)	Credit Not Used (4=1-2)	Payment Approp. budgeted (5)	Executed Payments (6)	% Paid (7=6/5)	R A L (8=2-6)
A-2101	4,076,950.00	3,871,513.46	94.96 %	205,436.54	4,076,950.00	3,366,492.24	82.57 %	505,021.22
A-2102	1,246,800.00	1,212,463.66	97.25 %	34,336.34	1,246,800.00	887,314.76	71.17 %	325,148.90
A-2103	1,175,600.00	766,806.42	65.23 %	408,793.58	1,175,600.00	413,143.55	35.14 %	353,662.87
A-2104	372,695.00	222,555.14	59.72 %	150,139.86	372,695.00	195,391.14	52.43 %	27,164.00
Total	**6,872,045.00**	**6,073,338.68**	**88.38%**	**798,706.32**	**6,872,045.00**	**4,862,341.69**	**70.76%**	**1,210,996.99**
A-2201	1,589,930.00	1,582,456.05	99.53 %	7,473.95	1,589,930.00	1,165,287.46	73.29 %	417,168.59
A-2202	1,297,610.00	1,292,651.13	99.62 %	4,958.87	1,297,610.00	1,195,944.97	92.17 %	96,706.16
A-2203	3,069,000.00	2,939,585.61	95.78 %	129,414.39	3,069,000.00	1,354,651.33	44.14 %	1,584,934.28
A-2204	597,110.00	596,996.82	99.98 %	113.18	597,110.00	347,957.19	58.27 %	249,039.63
A-2205	115,600.00	115,594.18	99.99 %	5.82	115,600.00	64,340.11	55.66 %	51,254.07
Total	**6,669,250.00**	**6,527,283.79**	**97.87%**	**141,966.21**	**6,669,250.00**	**4,128,181.06**	**61.90%**	**2,399,102.73**
A-2301	131,330.00	94,559.37	72.00 %	36,770.63	131,330.00	64,870.43	49.39 %	29,688.94
A-2302	2,500.00	2,500.00	100.00 %	0.00	2,500.00	1,811.86	72.47 %	688.14
A-2303	100,000.00	84,485.01	84.49 %	15,514.99	100,000.00	16,526.67	16.53 %	67,958.34
A-2304	169,000.00	61,448.70	36.36 %	107,551.30	169,000.00	61,434.68	36.35 %	14.02
A-2305	140,970.00	116,893.90	82.92 %	24,076.10	140,970.00	94,953.95	67.36 %	21,939.95
A-2306	560,460.00	310,264.00	55.36 %	250,196.00	560,460.00	37,500.00	6.69 %	272,764.00
A-2307	372,780.00	307,180.00	82.40 %	65,600.00	372,780.00	270,380.90	72.53 %	36,799.10
A-2308	79,000.00	18,290.00	23.15 %	60,710.00	79,000.00			18,290.00
A-2309	435,000.00	433,620.81	99.68 %	1,379.19	435,000.00	96,040.57	22.08 %	337,580.24
A-2310	20,600.00	19,096.22	92.70 %	1,503.78	20,600.00	14,096.22	68.43 %	5,000.00
A-2311	85,000.00	70,876.24	83.38 %	14,123.76	85,000.00	24,639.44	28.99 %	46,236.80
Total	**2,096,640.00**	**1,519,214.25**	**72.46%**	**577,425.75**	**2,096,640.00**	**682,254.72**	**32.54%**	**836,959.53**
Total T2	**15,637,935.00**	**14,119,836.72**	**90.29%**	**1,518,098.28**	**15,637,935.00**	**9,672,777.47**	**61.85%**	**4,447,059.25**

Title 3

Budget line	Commit. Approp. budgeted (1)	Executed Commitment Appropr. (2)	% Committed (3=2/1)	Credit Not Used (4=1-2)	Payment Approp. budgeted (5)	Executed Payments (6)	% Paid (7=6/5)	R A L (8=2-6)
B3-101	477,000.00	322,465.63	67.60 %	154,534.37	416,000.00	254,642.23	61.21 %	67,823.40
B3-102	494,680.00	296,867.41	60.01 %	197,812.59	406,000.00	207,893.10	51.21 %	98,661.46
B3-103	1,456,630.00	1,350,729.47	92.73 %	105,900.53	1,054,000.00	785,589.19	74.53 %	888,128.53
Total	**2,428,310.00**	**1,970,062.51**	**81.13%**	**458,247.49**	**1,876,000.00**	**1,248,124.52**	**66.53%**	**1,054,613.39**
B3-201	2,400,000.00	2,329,009.89	97.04 %	70,990.11	2,380,000.00	2,253,130.95	94.67 %	933,031.34
B3-202	3,702,900.00	3,080,613.08	83.19 %	622,286.92	2,846,000.00	2,645,011.11	92.94 %	1,134,077.99
B3-203	2,281,000.00	2,161,113.26	95.34 %	106,386.74	2,055,000.00	1,840,375.03	89.56 %	600,443.86
Total	**8,383,900.00**	**7,570,736.23**	**90.30%**	**799,663.77**	**7,281,000.00**	**6,738,517.09**	**92.55%**	**2,667,553.19**
B3-301	74,029,264.00	72,557,982.01	98.01 %	1,471,281.99	75,586,174.00	71,854,202.42	95.06 %	21,450,036.60
Total	**74,029,264.00**	**72,557,982.01**	**98.01%**	**1,471,281.99**	**75,586,174.00**	**71,854,202.42**	**95.06%**	**21,450,036.60**
B3-401	130,000.00	78,546.91	60.42 %	51,453.09	130,000.00	68,015.10	52.32 %	10,531.81
B3-402	312,300.00	190,177.42	60.90 %	122,122.58	410,600.00	245,797.24	59.86 %	32,408.65
Total	**442,300.00**	**268,724.33**	**60.76%**	**173,575.67**	**540,600.00**	**313,812.34**	**58.05%**	**42,940.46**
Total T3	**85,283,774.00**	**82,367,505.08**	**96.58%**	**2,902,768.92**	**85,283,774.00**	**80,154,656.37**	**93.99%**	**25,215,143.64**

2. Amounts recovered in 2021 (C4)

Budget line	Commit. Approp. budgeted (1)	Executed Commitment Appropr. (2)	% Committed (3=2/1)	Credit Not Used (4=1-2)	Payment Approp. budgeted (5)	Executed Payments (6)	% Paid (7=6/5)	R A L (8=2-6)
A-1403	27,481.00			27,481.00	27,481.00			
Total	**27,481.00**			**27,481.00**	**27,481.00**			
A-2101	21,245.40			21,245.40	21,245.40			
Total	**21,245.40**			**21,245.40**	**21,245.40**			
B3-203	1,013.70			1,013.70	1,013.70			
B3-301	4,778.29			4,778.29	4,778.29			
Total	**5,791.99**			**5,791.99**	**5,791.99**			
	54,518.39			**54,518.39**	**54,518.39**			

3. Amounts recovered in previous years (C5)

Budget line	Commit. Approp. budgeted (1)	Executed Commitment Appropr. (2)	% Committed (3=2/1)	Credit Not Used (4=1-2)	Payment Approp. budgeted (5)	Executed Payments (6)	% Paid (7=6/5)	R A L (8=2-6)
A-1201	465.63	465.63	100.00 %	0.00	465.63	465.63	100.00 %	0.00
A-1501	1,299.11	1,299.11	100.00 %	0.00	1,299.11	0.00	0.00 %	1,299.11
Total	**1,764.74**	**1,764.74**	**100.00%**	**0.00**	**1,764.74**	**465.63**	**26.39%**	**1,299.11**
A-2101	17,064.75	0.00	0.00 %	17,064.75	17,064.75	0.00	0.00 %	0.00
A-2204	291.87	0.00	0.00 %	291.87	291.87	0.00	0.00 %	0.00
A-2305	2,523.71	2,523.71	100.00 %	0.00	2,523.71	2,523.71	100.00 %	0.00
Total	**19,880.33**	**2,523.71**	**12.69%**	**17,356.62**	**19,880.33**	**2,523.71**	**12.69%**	**0.00**
B3-301	19,258.00	19,185.59	99.62 %	72.41	19,258.00	19,258.00	100.00 %	4,621.42
Total	**19,258.00**	**19,185.59**	**99.62%**	**72.41**	**19,258.00**	**19,258.00**	**100.00%**	**4,621.42**
	40,903.07	**23,474.04**	**57.39 %**	**17,429.03**	**40,903.07**	**22,247.34**	**54.39 %**	**5,920.53**

4. Automatic carry-overs from previous year(s) (C8)

Title 1

Budget line	Commit. Approp. budgeted (1)	Executed Commitment Appropr. (2)	% Committed (3=2/1)	Credit Not Used (4=1-2)	Payment Approp. budgeted (5)	Executed Payments (6)	% Paid (7=6/5)	R A L (8=2-6)
A-1201	53,546.00	44,450.00	83.01 %	9,096.00	53,546.00	44,450.00	83.01 %	0.00
Total	**53,546.00**	**44,450.00**	**83.01%**	**9,096.00**	**53,546.00**	**44,450.00**	**83.01%**	**0.00**
A-1301	23,000.00	0.00	0.00 %	23,000.00	23,000.00	0.00	0.00 %	0.00
Total	**23,000.00**	**0.00**	**0.00%**	**23,000.00**	**23,000.00**	**0.00**	**0.00%**	**0.00**
A-1401	31,322.39	24,095.05	76.93 %	7,227.34	31,322.39	24,095.05	76.93 %	0.00
A-1402	14,813.37	187.25	1.26 %	14,626.12	14,813.37	187.25	1.26 %	0.00
A-1403	60,008.74	31,143.22	51.90 %	28,865.52	60,008.74	31,143.22	51.90 %	0.00
Total	**106,144.50**	**55,425.52**	**52.22%**	**50,718.98**	**106,144.50**	**55,425.52**	**52.22%**	**0.00**
A-1501	348,747.94	132,128.96	37.89 %	216,618.98	348,747.94	132,128.96	37.89 %	0.00
Total	**348,747.94**	**132,128.96**	**37.89%**	**216,618.98**	**348,747.94**	**132,128.96**	**37.89%**	**0.00**
A-1601	598,282.11	486,619.46	81.34 %	111,662.65	598,282.11	486,619.46	81.34 %	0.00
A-1602	50,000.00	47,177.10	94.35 %	2,822.90	50,000.00	47,177.10	94.35 %	0.00
A-1603	7,765.00	175.72	2.26 %	7,589.28	7,765.00	175.72	2.26 %	0.00
Total	**656,047.11**	**533,972.28**	**81.39%**	**122,074.83**	**656,047.11**	**533,972.28**	**81.39%**	**0.00**
Total T1	**1,187,485.55**	**765,976.76**	**64.50%**	**421,508.79**	**1,187,485.55**	**765,976.76**	**64.50%**	**0.00**

Title 2

Budget line	Commit. Approp. budgeted (1)	Executed Commitment Appropr. (2)	% Committed (3=2/1)	Credit Not Used (4=1-2)	Payment Approp. budgeted (5)	Executed Payments (6)	% Paid (7=6/5)	R A L (8=2-6)
A-2101	841,737.32	677,968.49	80.54 %	163,768.83	841,737.32	677,968.49	80.54 %	0.00
A-2102	91,320.84	74,305.91	81.37 %	17,014.93	91,320.84	74,305.91	81.37 %	0.00
A-2103	519,209.14	404,920.01	77.99 %	114,289.13	519,209.14	404,920.01	77.99 %	0.00
A-2104	230,756.54	230,756.54	100.00 %	0.00	230,756.54	230,756.54	100.00 %	0.00
Total	**1,683,023.84**	**1,387,950.95**	**82.47%**	**295,072.89**	**1,683,023.84**	**1,387,950.95**	**82.47%**	**0.00**
A-2201	1,049,370.61	1,049,370.35	100.00 %	0.26	1,049,370.61	1,049,370.35	100.00 %	0.00
A-2202	137,041.25	123,148.00	89.86 %	13,893.25	137,041.25	123,148.00	89.86 %	0.00
A-2203	1,932,186.14	1,768,517.47	91.53 %	163,668.67	1,932,186.14	1,768,517.47	91.53 %	0.00
A-2204	285,322.09	245,497.13	86.04 %	39,824.96	285,322.09	245,497.13	86.04 %	0.00
A-2205	32,583.23	32,583.23	100.00 %	0.00	32,583.23	32,583.23	100.00 %	0.00
Total	**3,436,503.32**	**3,219,116.18**	**93.67%**	**217,387.14**	**3,436,503.32**	**3,219,116.18**	**93.67%**	**0.00**
A-2301	17,799.57	10,680.36	60.00 %	7,119.21	17,799.57	10,680.36	60.00 %	0.00
A-2302	3,774.50	1,020.01	27.02 %	2,754.49	3,774.50	1,020.01	27.02 %	0.00
A-2303	52,116.25	42,890.83	82.30 %	9,225.42	52,116.25	42,890.83	82.30 %	0.00
A-2304	625.92	225.00	35.95 %	400.92	625.92	225.00	35.95 %	0.00
A-2305	10,208.93	5,867.65	57.48 %	4,341.28	10,208.93	5,867.65	57.48 %	0.00
A-2306	66,480.00	56,440.00	84.90 %	10,040.00	66,480.00	56,440.00	84.90 %	0.00
A-2307	18,789.00	10,328.45	54.97 %	8,460.55	18,789.00	10,328.45	54.97 %	0.00
A-2308	40,316.74	31,060.02	77.04 %	9,256.72	40,316.74	31,060.02	77.04 %	0.00
A-2309	185,104.38	155,115.74	83.80 %	29,988.64	185,104.38	155,115.74	83.80 %	0.00
A-2311	25,017.63	9,596.15	38.36 %	15,421.48	25,017.63	9,596.15	38.36 %	0.00
Total	**420,232.92**	**323,224.21**	**76.92%**	**97,008.71**	**420,232.92**	**323,224.21**	**76.92%**	**0.00**
Total T2	**5,539,760.08**	**4,930,291.34**	**89.00%**	**609,468.74**	**5,539,760.08**	**4,930,291.34**	**89.00%**	**0.00**

Title 3

Budget line	Commit. Approp. budgeted (1)	Executed Commitment Appropr. (2)	% Committed (3=2/1)	Credit Not Used (4=1-2)	Payment Approp. budgeted (5)	Executed Payments (6)	% Paid (7=6/5)	R A L (8=2-6)
B3-101	1,746.00	0.00	0.00 %	1,746.00	0.00			0.00
B3-102	314,894.69	9,687.15	3.08 %	305,207.54	0.00			0.00
B3-103	373,899.03	338,680.25	90.58 %	35,218.78	0.00			15,692.00
Total	**690,539.72**	**348,367.40**	**50.45%**	**342,172.32**	**0.00**			**15,692.00**
B3-201	1,046,800.31	917,812.40	87.68 %	128,987.91	0.00			60,660.00
B3-202	954,543.60	840,445.03	88.05 %	114,098.57	0.00			141,969.01
B3-203	404,529.90	315,442.83	77.98 %	89,087.07	0.00			49,237.20
Total	**2,405,873.81**	**2,073,700.26**	**86.19%**	**332,173.55**	**0.00**			**251,866.21**
B3-301	22,369,930.53	21,010,231.41	93.92 %	1,359,699.12	0.00			259,280.57
Total	**22,369,930.53**	**21,010,231.41**	**93.92%**	**1,359,699.12**	**0.00**			**259,280.57**
B3-402	140,461.19	88,028.47	62.67 %	52,432.72	0.00			0.00
Total	**140,461.19**	**88,028.47**	**62.67%**	**52,432.72**	**0.00**			**0.00**
Total T3	**25,606,805.25**	**23,520,327.54**	**91.85%**	**2,086,477.71**	**0.00**			**526,838.78**

5. Associate countries contributions, Member States voluntary contributions and grants (R0)

Budget line	Commit. Approp. budgeted (1)	Executed Commitment Appropr. (2)	% Committed (3=2/1)	Credit Not Used (4=1-2)	Payment Approp. budgeted (5)	Executed Payments (6)	% Paid (7=6/5)	R A L (8=2-6)
A-2203	4,100.00	0.00	0.00 %	4,100.00	4,100.00	0.00	0.00 %	0.00
A-2204	6,039.08	6,039.08	100.00 %	0.00	6,039.08	0.00	0.00 %	6,039.08
Total	**10,139.08**	**6,039.08**	**59.56%**	**4,100.00**	**10,139.08**	**0.00**	**0.00%**	**6,039.08**
A-2311	74.32	0.00	0.00 %	74.32	74.32	0.00	0.00 %	0.00
Total	**74.32**	**0.00**	**0.00%**	**74.32**	**74.32**	**0.00**	**0.00%**	**0.00**
B3-201	34,000.00	0.00	0.00 %	34,000.00	34,000.00	0.00	0.00 %	0.00
B3-202	0.00	0.00	0.00 %	0.00	0.00	0.00	0.00 %	0.00
B3-203	0.00	0.00	0.00 %	0.00	0.00	0.00	0.00 %	0.00
Total	**34,000.00**	**0.00**	**0.00%**	**34,000.00**	**34,000.00**	**0.00**	**0.00%**	**0.00**
B3-301	1,144,630.00	640,575.38	55.96 %	504,054.62	1,144,630.00	306,645.38	26.79 %	333,930.00
Total	**1,144,630.00**	**640,575.38**	**55.96%**	**504,054.62**	**1,144,630.00**	**306,645.38**	**26.79%**	**333,930.00**
B3-601	24,643,569.30	0.00	0.00 %	24,643,569.30	24,643,569.30	0.00	0.00 %	0.00
Total	**24,643,569.30**	**0.00**	**0.00%**	**24,643,569.30**	**24,643,569.30**	**0.00**	**0.00%**	**0.00**
B4-101	1,289,469.62	1,008,715.02	78.23 %	280,754.60	1,289,469.62	425,513.78	33.00 %	583,201.24
B4-102	823,562.90	764,618.79	92.84 %	58,944.11	823,562.90	573,837.81	69.68 %	190,780.98
Total	**2,113,032.52**	**1,773,333.81**	**83.92%**	**339,698.71**	**2,113,032.52**	**999,351.59**	**47.29%**	**773,982.22**
	27,945,445.22	**2,419,948.27**	**8.66 %**	**25525496.95**	**27,945,445.22**	**1,305,996.97**	**4.67 %**	**1,113,951.30**

Budget transfers list per quarter

Quarter 1

Date	Budget item description	Budget item	Commitment appropriation	Payment appropriation
18/02/2021 **R0**	Information and Documentation System and Annual Report	B03101	-46,509.00	-46,509.00
	Data Analysis and Research	B03102	-104,063.00	-104,063.00
	Country of Origin Information	B03103	-211,615.00	-211,615.00
	EASO training	B03201	-332,095.00	-332,095.00
	Asylum Processes	B03202	-575,483.00	-525,483.00
	External Dimension and Resettlement	B03203	-389,511.00	-439,511.00
	Operational support	B03301	-7,036,545.71	-7,036,545.71
	Cooperation with Civil Society	B03401	-18,604.00	-18,604.00
	Cooperation with stakeholders	B03402	-59,996.00	-59,996.00
	Other Operational Expenditure	B03601	8,774,421.71	8,774,421.71
19/02/2021 **C1**	Temporary Agents' basic salaries & allowances	A01101	-580,263.00	-580,263.00
	Contract Agents	A01102	-110,485.00	-110,485.00
	Seconded National Experts	A01103	-181,600.00	-181,600.00
	Trainees	A01104	-21,200.00	-21,200.00
	Recruitment	A01201	-381,590.00	-381,590.00
	Administrative Mission expenses	A01301	-499,500.00	-499,500.00
	Restaurants and canteens	A01401	-70,000.00	-70,000.00
	Medical service	A01402	-244,000.00	-244,000.00
	Other social allowances	A01403	37,803.00	37,803.00
	Interim services	A01601	1,240,000.00	1,240,000.00
	Other external services	A01602	-119,150.00	-119,150.00
	Legal services related to HR	A01603	-302,000.00	-302,000.00
	Representation expenses	A01701	-800.00	-800.00

Building rental utilities cleaning maintenance and insurances	A02101	57,300.00	57,300.00
Security and surveillance of the building	A02102	450,000.00	450,000.00
Fitting out of premises	A02103	450,000.00	450,000.00
Office equipment & furniture	A02104	35,000.00	35,000.00
ICT Maintenance	A02202	-246,971.00	-246,971.00
ICT Support services	A02203	427,015.00	427,015.00
Telecommunication charges	A02204	129,856.00	129,856.00
Record management expenditure	A02205	36,025.00	36,025.00
Stationery and office supplies (incl. consumable)	A02301	-10,000.00	-10,000.00
Bank and other financial charges	A02302	-5,300.00	-5,300.00
Legal expenses	A02303	48,500.00	48,500.00
Administrative Internal and External meetings expenses	A02304	-245,050.00	-245,050.00
Business Consultancy	A02306	86,960.00	86,960.00
Administrative translations and interpretation costs	A02307	-150,500.00	-150,500.00
Publication	A02308	-152,750.00	-152,750.00
Communication	A02309	-122,300.00	-122,300.00
Postage on correspondence and delivery charges	A02311	-55,000.00	-55,000.00
EASO training	B03201	-500,000.00	-500,000.00
External Dimension and Resettlement	B03203	-514,700.00	-514,700.00
Operational support	B03301	1,514,700.00	1,514,700.00
Contract Agents	A01102	-110,000.00	-110,000.00
Interim services	A01601	110,000.00	110,000.00

Quarter 2

Date	Budget item description	Budget item	Commitment appropriation	Payment appropriation
20/05/2021 **C1**	Fitting out of premises	A02103	-40,000.00	-40,000.00
	Transportation and removal services	A02305	40,000.00	40,000.00
28/06/2021 **C1**	Temporary Agents' basic salaries & allowances	A01101	-2,714,915.00	-2,714,915.00
	Seconded National Experts	A01103	-82,410.00	-82,410.00
	Recruitment	A01201	44,170.00	44,170.00
	Administrative Mission expenses	A01301	-37,500.00	-37,500.00
	Restaurants and canteens	A01401	26,200.00	26,200.00
	Other social allowances	A01403	-37,803.00	-37,803.00
	Training and language courses for staff	A01501	-55,400.00	-55,400.00
	Interim services	A01601	-142,500.00	-142,500.00
	Building rental utilities cleaning maintenance and insurances	A02101	-93,050.00	-93,050.00
	Security and surveillance of the building	A02102	-3,200.00	-3,200.00
	Fitting out of premises	A02103	-134,400.00	-134,400.00
	Office equipment & furniture	A02104	152,695.00	152,695.00
	ICT Equipment	A02201	28,529.00	28,529.00

Budget item description	Budget item	Commitment appropriation	Payment appropriation
ICT Maintenance	A02202	-12,390.00	-12,390.00
ICT Support services	A02203	780,000.00	780,000.00
Telecommunication charges	A02204	-85,890.00	-85,890.00
Record management expenditure	A02205	21,600.00	21,600.00
Stationery and office supplies (incl. consumable)	A02301	-8,670.00	-8,670.00
Bank and other financial charges	A02302	-2,500.00	-2,500.00
Administrative Internal and External meetings expenses	A02304	89,000.00	89,000.00
Transportation and removal services	A02305	10,970.00	10,970.00
Business Consultancy	A02306	164,500.00	164,500.00
Administrative translations and interpretation costs	A02307	-302,220.00	-302,220.00
Information and Analysis	B03101	0.00	-61,000.00
Data Analysis and Research	B03102	-400,320.00	-489,000.00
Third Country Research	B03103	-713,370.00	-655,000.00
EASO training	B03201	0.00	-20,000.00
Asylum Cooperation and Guidance	B03202	-424,636.00	-1,742,536.00
External Dimension and Resettlement	B03203	0.00	-226,000.00
Operational support	B03301	4,084,689.00	5,641,599.00
Cooperation with Civil Society	B03401	-50,000.00	-50,000.00
Cooperation with stakeholders	B03402	-101,179.00	-2,879.00

Quarter 3

Date	Budget item description	Budget item	Commitment appropriation	Payment appropriation
16/08/2021 **C1**	Temporary Agents' basic salaries & allowances	A01101	-164,000.00	-164,000.00
	Recruitment	A01201	-73,500.00	-73,500.00
	Restaurants and canteens	A01401	-1,500.00	-1,500.00
	Other social allowances	A01403	75,000.00	75,000.00
	Other external services	A01602	164,000.00	164,000.00
	Administrative translations and interpretation costs	A02307	-50,000.00	-50,000.00
	Communication	A02309	50,000.00	50,000.00

Quarter 4

Date	Budget item description	Budget item	Commitment appropriation	Payment appropriation
27/10/2021 **C1**	Temporary Agents' basic salaries & allowances	A01101	-403,000.00	-403,000.00
	Seconded National Experts	A01103	-100,000.00	-100,000.00
	Trainees	A01104	-4,000.00	-4,000.00
	Recruitment	A01201	-28,000.00	-28,000.00
	Administrative Mission expenses	A01301	18,000.00	18,000.00
	Restaurants and canteens	A01401	-23,000.00	-23,000.00

	Other social allowances	A01403	500,000.00	500,000.00
	Legal services related to HR	A01603	40,000.00	40,000.00
	Fitting out of premises	A01602	-650,000.00	-650,000.00
	ICT Equipment	A02201	59,000.00	59,000.00
	ICT Maintenance	A02202	-45,000.00	-45,000.00
	ICT Support services	A02203	500,000.00	500,000.00
	Telecommunication charges	A02204	15,000.00	15,000.00
	Record management expenditure	A02205	6,000.00	6,000.00
	Transportation and removal services	A02305	30,000.00	30,000.00
	Communication	A02309	85,000.00	85,000.00
	Information and Analysis	B03101	167,000.00	167,000.00
	Operational support	B03301	-167,000.00	-167,000.00
	Cooperation with Civil Society	B03401	20,000.00	20,000.00
	Cooperation with stakeholders	B03402	-20,000.00	-20,000.00
02/12/2021 **C1**	Temporary Agents' basic salaries & allowances	A01101	28,200.00	28,200.00
	Contract Agents	A01102	61,800.00	61,800.00
	Seconded National Experts	A01103	-14,900.00	-14,900.00
	Trainees	A01104	-16,000.00	-16,000.00
	Interim services	A01601	-73,100.00	-73,100.00
	Legal services related to HR	A01603	14,000.00	14,000.00
	ICT Equipment	A02201	125,000.00	125,000.00
	ICT Maintenance	A02202	-30,000.00	-30,000.00
	ICT Support services	A02203	-95,000.00	-95,000.00
	Third Country Research	B03103	0.00	-461,000.00
	Asylum Cooperation and Guidance	B03202	0.00	461,000.00

Interest paid by EASO for late payments to Suppliers in 2021

	Number of payments	Interest for late payments (EUR)
EASO	8	3,002.57
Total	**8**	**3,002.57**

Annex III: Organisational chart
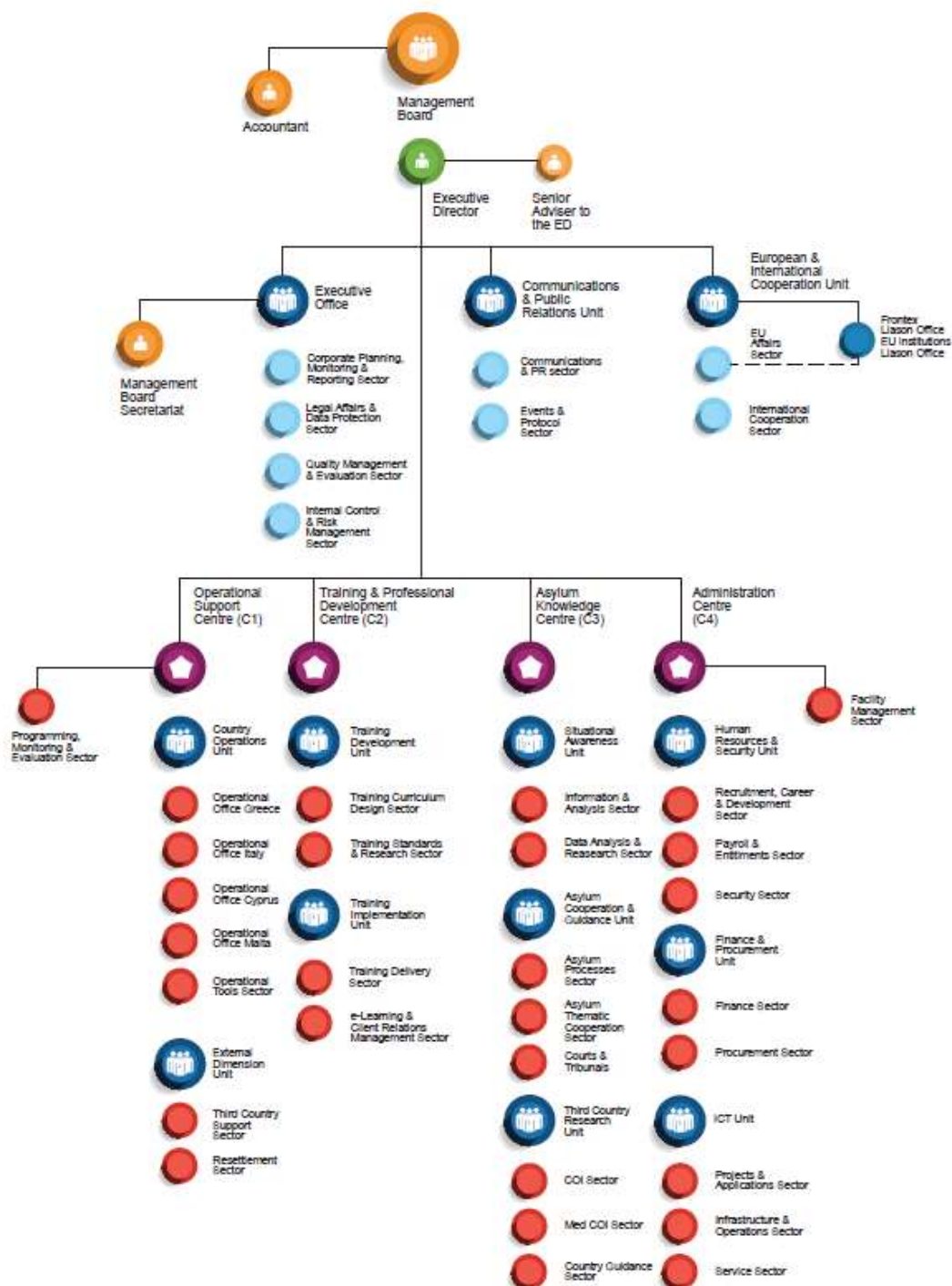
Annex IV: Establishment plan and additional information on human resources management

Information on recruitment grade/function group for each type of post

Key functions (examples – terminology should be adjusted to each Agency's job titles)	Type of contract (official, TA or CA)	Function group, grade of recruitment*	Indication whether the function is dedicated to administrative support or operations (subject to definitions used in screening methodology)
Head of Centre, etc. (please identify which level in the structure it corresponds to taking the Director as level 1)	TA	Executive Director (AD 14) Head of Centre (AD 12)	Both operations and administrative support, depending on the content area.
Head of unit	TA	Head of Unit (AD 10)	Id.
Head of sector (please identify which level in the structure it corresponds to taking the Director as level 1)	TA	AD 8	Id.
Senior Officer, Senior Specialist etc.	TA	AD 7	Id.
Officer	TA	AD 5 -6 / FG IV	Id.
Senior assistant	TA	AST 5 - 12	Id.
Assistant	TA/CA	AST 1 – 4; FG II and FG III	Id.
Head of administration	TA	AD 12	Administrative support
Head of human resources unit	TA	AD 10	Administrative support
Head of finance unit	TA	AD 10	Administrative support
Head of ICT Unit	TA	AD 10	Administrative support
Webmaster - editor	CA	FG IV (Editor) FG III (Webmaster)	Operations
Data protection officer	TA	AD 5	Administrative support
Accounting officer	TA	AD 7	Neutral

Job screening/benchmarking against previous year results[66]

Job type (sub) category	2020[67] (%)	2021[68] (%)
Administrative support and coordination	**15.92**	**14.97**
Administrative support	12.89	12.79
Coordination	3.03	2.18
Operational	**68.68**	**72.14**
Top level operational coordination	51.58	7.80
Programme management and implementation	8.82	11.43
Evaluation and impact assessment	6.05	4.05
General operational	2.24	48.86
Neutral	**15.39**	**12.89**
Finance/control	15.39	12.89
Linguistics	0.00	0.00

Implementing rules

Implementing Rules adopted in 2021
Model Decisions: 1. Middle management C(2018) 2524 2. Adviser function C(2018) 2209 3. Types of posts and posts titles C(2018) 8800 4. Temporary occupation management post C(2017) 7332 5. Establishment of the staff committee C(2016) 3323 6. Learning and development C(2017) 6772 7. CCP - unpaid leave C(2015) 5320 8. Seven years rule C(2016) 2421
Adoption by analogy: • Outside activities C(2018) 4048 • Part-time Art 55a C(2015) 9720 • Amending decision on leave C(2020) 1559 • Transfer of pension rights C(2020) 4818 • Professional incompetence C(2019) 6855

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[66] Table as per methodology for Agencies' job screening (2014).

[67] Corrigendum to figures reported in CAAR 2020, due to clerical data entry error.

[68] The figures reflect all categories of staff in active service on 31 December 2021, including SNEs and short-term operational contract agents but excluding IPA/NA contract agents.

Annex V: Human and financial resources by activity

Activity (Title 3)	Human resources 2021					Financial resources (C1)
	AD	AST	CA[69]	SNE	Total	
2.1 Operational support	**33**	**21**	**71**	**1**	**126**	**€74,263,621.67**
2.1.1 Italy	5	3	34	0	**42**	€9,762,305.69
2.1.2 Greece	7	7	5	0	**19**	€46,386,253.66
2.1.3 Cyprus	4	2	26	0	**32**	€5,354,630.65
2.1.4 Malta	2	1	0	1	**4**	€4,929,642.48
2.1.5 Spain	4	0	1	0	**5**	€715,528.75
2.1.6 Other operational activities	3	4	3	0	**10**	€4,954,147.18
2.1.7 External dimension	8	4	2	0	**14**	*€2,161,113.26*
2.1.7.1 Networks and external relations	*1*	*3*	*0*	*0*	*4*	*€27,800.00*
2.1.7.2 Resettlement and humanitarian admission	*4*	*0*	*0*	*0*	*4*	*€1,536,115.32*
2.1.7.3 Third country support	*3*	*1*	*2*	*0*	*6*	*€597,197.94**
2.2 Operational support and tools, programming, monitoring and evaluation of operations	**4**	**1**	**5**	**1**	**11**	**€455,473.60**
2.2.1 Operational support and operational tools	1	1	3	0	**5**	€441,773.60
2.2.2 Programming, monitoring and evaluation of operations	3	0	2	1	**6**	€13,700.00
2.3 Asylum knowledge	**65**	**29**	**20**	**3**	**117**	**€5,050,675.59**
2.3.1 Country of origin information	12	3	4	0	**19**	€365,054.47
2.3.2 MedCOI	4	6	1	1	**12**	€550,175.00
2.3.3 Country guidance	4	1	1	0	**6**	€435,500.00
2.3.4 Data analysis and research	10	7	2	1	**20**	€296,867.41
2.3.5 Information and analysis	6	6	3	0	**15**	€322,465.63
2.3.6 Asylum processes and quality support to operations	12	4	3	1	**20**	€992,743.35

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[69] Includes 58 short-term operational Contract Agent posts; excludes posts allocated to the IPA project (Title 4) and for the EASO Regional Pilot Project in support of North Africa/RDPP NA.

Activity (Title 3)	Human resources 2021					Financial resources (C1)
	AD	AST	CA[69]	SNE	Total	
2.3.7 Asylum thematic cooperation	13	1	3	0	**17**	€1,238,629.73
2.3.8 Cooperation with members of courts and tribunals	4	1	3	0	**8**	€849,240.00
2.4 Training and professional development	**30**	**10**	**7**	**0**	**47**	**€2,329,009.89**
2.4.1 Development and consolidation of the EASO training curriculum	12	4	2	0	**18**	€926,070.49
2.4.2 Implementation of EASO training curriculum	11	5	0	0	**16**	€275,495.85
2.4.3 Management of EASO's training governance system	7	1	5	0	**13**	€1,127,443.55
2.5 Horizontal activities	**1**	**1**	**0**	**0**	**2**	**€268,724.33**
2.5.1 Consultative Forum and civil society	1	1	0	0	**2**	€268,724.33
2.5.2 Governance activities	N/A[70]					
Contingency funds (associate countries' contribution) – R0 funds	N/A					€0[71]
TOTAL Operational (Title 3)	**133**	**62**	**103**	**5**	**303**	**€82,367,505.08**
Resources allocated to cross-horizontal expenditure, governance, administrative and other activities (Title 1, Title 2)	69	53	55	1	**178**	€55,016,356.19
Ad hoc grants (Title 4) – R0 funds	N/A					€1,773,333.81
TOTAL (incl. grants – R0 funds)	**202**	**115**	**158**	**6**	**481**	**€139,157,195.08**

* Excludes €867,311.53 under BL4101 related to the Regional Pilot Project for North Africa; €141,403.49 under BL4101 related to the EASO Cooperation Roadmap with Egypt; and €764,618.79 commitment consumption under BL4102 related to the IPA II project Phase II.

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[70] Staff allocation is part of 'Resources allocated to cross-horizontal expenditure, governance, administrative and other activities'.

[71] There was no need to activate the contingency funds in 2021, the execution was therefore €0.

Annex VI: Contribution, grant and SLAs, financial framework partnership agreements

General information					Financial and HR impacts			
Date of signa-ture	Total amount	Dura-tion	Coun-terpart	Short description	2020 Year N-1 (budgeted /executed)		2021 Year N (budgeted, incl. carry-over, / executed)	
Grant agreements								
IPA II 20.12.2018	€1,475,500	2 years	DG NEAR	Regional Support to protection-sensitive migration management system in the Western Balkans and Turkey – Phase II	CA	PA	CA	PA
				Amount	€570,369	€479,465	€764,619	€573,838
				Number of Contract Agents	5		5[72]	
				Number of Seconded National Experts	-		-	

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[72] The Agency is in the process of finalising a new regional IPA III funded project with an expected addition of 5 CA posts, making 10 Contract Agent posts in total as from 2022.

Annex VII: Environment management

The Agency has in recent years embarked on a number of green initiatives to raise staff awareness and to contribute to more environmentally friendly practices at the workplace.

In 2021, the Agency maintained several precautionary measures established at the outbreak of the COVID-19 pandemic, e.g. cancellation or reduction of non-essential missions, remote recruiting, enhanced videoconferencing for meetings and training. This undoubtedly included a positive impact on the environment and on the reduction of the Agency's carbon dioxide (CO_2) emissions.

Among other practices carried out, the Agency:
- Continued to promote sustainable mobility by operating a shuttle bus service from the Agency's headquarters to the central public bus depot;
- Designated parking spaces for vehicles participating in car-pooling scheme to encourage greener commuting;
- Encouraged the staff to consider other means of transport for their commute to and from work, for example by joining local public schemes for bike-hire, e-scooters, etc., and also facilitated bicycle parking at its headquarters;
- Discontinued the distribution of printed payslips by implementing an automated monthly payslip emailing system, thus reducing paper and envelope consumption;
- Implemented more paperless workflows for circulation and approval of internal documents, thus further reducing the use of physical routing slips;
- Pursued its programme of digitalisation to provide higher capacity for online and electronic working and systems that support remote working;
- Switched to LED light retrofitting to replace the old light bulbs in its headquarters;
- Improved ambient temperature management in its headquarters, setting the temperature within a bandwidth of 20 to 25 degrees to reduce the heating/cooling effects.

Moreover, in striving for continual improvement of its environmental performance, the Agency undertook a series of preparatory activities, including participation in workshops at institutional and Agencies' level, including the EUAN and the JHAAN initiatives, and engaging in dialogue with key internal stakeholders. As a result, an outline for activities was drafted, aimed at identifying several measures that could be viable for a long-lasting and more significant environmental impact in key areas of intervention, focusing on:
- Reducing CO_2 and other greenhouse gas emissions;
- Managing waste;
- Reducing consumption of paper and printing consumables;
- Reducing the energy and water use;
- Moving towards green public procurement;
- Promoting biodiversity;
- Offsetting the carbon footprint.

These measures, the feasibility of which is currently being assessed, could be implemented partly in short-term and otherwise in longer term (i.e., where a higher degree of analysis, preparation, planning and investment decisions are required). In 2021 the Agency also focused on internal capacity and knowledge building, maintaining an open dialogue with its stakeholders, actively participating in thematic meetings, seminars and courses to enhance internal knowledge and strengthen its ability to meet established objectives.

Annex VIII: Annual accounts

The Agency's final annual accounts 2021 are available following the approval by the MB on the Agency's website at Governance and Internal Control | European Union Agency for Asylum (europa.eu).

Annex IX: Internal control self-assessment corrective action plan

The Agency's internal control self-assessment corrective action plan (including the register of deficiencies) is available on the Agency's website at [Governance and Internal Control | European Union Agency for Asylum (europa.eu)](#).

Annex X: Anti-fraud objectives, priority measures and control activities

The Agency's anti-fraud objectives, priority measures and control activities are available on the Agency's website at [Governance and Internal Control | European Union Agency for Asylum (europa.eu)](europa.eu).

Annex XI: Internal control monitoring criteria results for 2021

The Agency's internal control monitoring criteria results for 2021 are available on the Agency's website at [Governance and Internal Control | European Union Agency for Asylum (europa.eu)](#).