Internal control monitoring criteria results for 2025/26 (Released Q4 2026)

Methodology:

These indicators shall assist the EUAA Management in measuring the effective implementation of internal control principles within the Agency's Internal Control System. Management agreed that, for all performance monitoring criteria targets, the measured value should be:

- **Achieved** – the difference between the target and the actual results is not more than 2 percentage points.
- **Partially achieved** - the target value was not achieved, but either the difference between the target and the actual results is not more than 20 percentage points or in case of a specific control measure most steps have been accomplished and it is planned to be implemented within 6 months from the assessment.
- **Not achieved** – the difference between the target and the actual results is more than 20 percentage points.
- **In progress** – the indicator is not yet measured during the period of assessment, either because the EUAA Staff Engagement Survey will be performed later during the year, or the business owner will make the calculation at a later stage during the year.
- **Not applicable** – the indicator is not measured during the period of assessment, either because the assessment is performed every 2 years (for example the EUAA Staff Engagement Survey whereby to Commission services analogy is implemented every 2 years), or the data collected to measure the indicator is not representative.

LEGEND
Target indicator achieved (Y)
Target indicator partially achieved (PA)
Target indicator not achieved (N)
Target indicator not applicable (N/A)
Target indicator in progress

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Context:

Certain Internal Control Monitoring Criteria (ICMC) use staff perceptions collected through the Staff Engagement Survey (SES) or the Pulse Survey. These surveys and the ICMC have distinct purposes:

- **The Staff Engagement Survey (SES)** is a broad HR and staff-engagement exercise that gathers colleagues' perceptions across a wide range of topics to inform management's understanding of staff experience.
- **The Pulse Survey** is a shorter, focused survey covering the same 19 questions used to calculate the SES-based ICMC. It is conducted in years when the full SES is not run, allowing these indicators to be updated annually. Both surveys form part of the HR and staff-engagement process.
- **The Internal Control Monitoring Criteria (ICMC)** are indicators within the Agency's Internal Control Framework, coordinated by ICCU and used in the annual Internal Control Self-Assessment (ICSA). They include staff-perception, governance and performance indicators designed to meet the RACER criteria. The 19 survey-based ICMC use selected survey responses for a specific internal-control monitoring purpose; they do not constitute a separate staff-engagement survey.

Survey responses tell us how staff perceive their working environment; they do not, by themselves, demonstrate whether a control works effectively. Positive feedback does not prove that a control is effective, and negative feedback does not prove that it is ineffective. Staff perceptions provide valuable diagnostic information, but are not, on their own, primary evidence of control design, implementation or operating effectiveness.

ICCU, as the second line of defence, and IAS, as the independent third line, use this feedback to guide further examination within their respective roles and scopes. For example, if staff report that responsibilities are unclear, the assessment would examine whether responsibilities are documented, communicated and understood in practice

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Principle 1: The Agency demonstrates a commitment to integrity and ethical values.
Characteristics:
1.1. Tone at the top. The Management Board, the Executive Director and all management levels respect integrity and ethical values in their instructions, actions, and behaviour.
1.2. Standards of conduct. The Agency's expectations on integrity and ethical values are based on the standards of conduct of the Commission and are understood at all levels of the Agency, as well as by entrusted bodies, outsourced service providers and beneficiaries.
1.3. Alignment with standards. Processes are in place to assess whether individuals and entities are aligned with the Commission's expected standards of conduct and to address deviations in a timely manner.

#	Indicators	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
1.1	Ratio of positive to negative opinions of staff perceiving that at the EUAA ethical behaviour is promoted.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement:** Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	66%[1]	≥ 60%	66%[2]	Once per year	HRU	Target of the indicator achieved.

[1] SES 2025, Question 59, results released Q1 2026: Fully agree 10%; Agree 38%; Neither agree nor disagree 26%; Disagree 16%; Strongly disagree 9%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 1%.
[2] IC Pulse survey, Question 12, results released Q3 2026: Fully agree 13%; Agree 35%; Neither agree nor disagree 26%; Disagree 14%; Strongly disagree 11%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 1%.

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#	Indicators	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
1.2	Percentage of extended management having followed training on internal control and fraud prevention, ethics and integrity and respect and dignity.	**Scope:** This indicator measures performance attendance of managers who were required and completed training on internal control and fraud prevention, ethics and integrity and respect and dignity. This training programme is required for new members within 12 months of their recruitment. **Method of measurement:** The result, expressed as a percentage, is calculated by dividing the total number of members of the extended management (i.e. heads of centre, unit or sector) that have followed the relevant training by the total number of members of the extended management.	MBD on KPIs for the ED: Indicator No 7	N/A	Annual Target: ≥ 80%[3]	Q2 2026 Results: 77%[4]	Quarterly	ICCU with support HRU	Partially achieved for Q2 2026.

[3] Q2 2026 Target: ≥ 80 %.
[4] Data from reporting on Management Board Decision 194/2026.

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#	Indicators	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
1.3	Percentage of declarations of conflict of interests for MB members published in the Agency's website.	**Scope**: The intention of this KPI is to measure the ratio of published declarations of conflict of interests for MB members against those not published. **Method of measurement:** (Number of published declarations/total number of the members of the MB) X 100.	Self-assessment & Ex post controls	N/A	100%	100%[5]	At least once per year	MB Secretariat	Target of the indicator achieved.
1.4	Ratio of positive to negative opinions of staff agreeing that the working environment at EUAA is respectful.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement:** Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	84%[6]	≥70%	82%[7]	Once per year	ICCU (HRU)	Target of the indicator achieved.

[5] Latest results re-assed in Q3 2026.
[6] SES 2025, Q50, results released Q1 2026: Fully Agree 19%, Agree 49%, Neither agree nor disagree 18%, Disagree 8%, Strongly disagree 5%, Impossible to answer/Not applicable in my work 0%, I prefer not to answer 1%.
[7] IC Pulse survey, Question 8, results released Q3 2026: Fully agree 25%; Agree 42%; Neither agree nor disagree 17%; Disagree 9%; Strongly disagree 6%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 2%.

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#	Indicators	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
1.5	Average recruitment time from the date of publication of the vacancy notice to the date of signature of the final Selection Committee report.	**Scope**: To assess timely implementation of recruitment processes. **Method of measurement:** The result is calculated as the average number of calendar days between the date of publication of each vacancy notice and the date of signature of the corresponding Selection Committee's final report, for all statutory staff recruitment procedures* completed during the reporting year. * Including procedures initiated in the previous year.	MBD on KPIs for the ED: Indicator No4	N/A	Annual target: ≤ 180 calendar days[8]	Q2 2026 Results: 214[9]	Quarterly	HRU	Partially achieved for Q2 2026.

[8] Q2 2026 Target: ≤ 180 calendar days
[9] Data from reporting on Management Board Decision 194/2026.

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Principle 2: MB demonstrates independence from management and exercises oversight of the development and performance of internal control.

Characteristics:

2.1. The MB oversees the Agency's governance, risk management and internal control practices. This happens through the use of appropriate working arrangements and communication channels.

2.2. The Executive Director oversees the internal control systems and oversees the development and performance of internal control. The Executive Director is supported in this task by the manager in charge of risk management and internal control.

2.3. In their capacity as authorising officer, the Executive Director provides a Declaration of Assurance on the appropriate allocation of resources and their use for their intended purpose and in accordance with the principles of sound financial management, as well as on the adequacy of the control procedures in place.

2.4 The manager in charge of risk management and internal control, with the support of the Internal Control and Compliance Unit, plays a key role by preparing parts II, III and IV as well as relevant annexes related to internal control of the Executive Director's CAAR.

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
2.1	Annual reporting to the MB on general internal control and governance internal control monitoring criteria (ICMC) for monitoring of the management carried out by the ED.	**Scope**: Reinforce the MB's accountability role by permitting it to regularly oversee ED development and performance of Agency's governance and internal control. **Method of measurement**: Annual reporting to MB.	Self-assessment & Ex post controls	Y	Y	Y[10]	At least once per year	ICCU	Target of the indicator achieved.

[10] Latest available results released Q1 2026 as part of ICSA.

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Principle 3: Management establishes, with oversight, structures, reporting lines, and appropriate authorities and responsibilities in the pursuit of objectives.

Characteristics:

3.1. Management structures are comprehensive. The design and implementation of management and supervision structures cover all policies, programmes, and activities. In particular, for spending programmes, they cover all management modes, expenditure types, delivery mechanisms and entities in charge of budget implementation to support the achievement of policy, operational and control objectives.

3.2. Authorities and responsibilities. The Executive Director, as appropriate, delegates authority and uses appropriate processes and technology to assign responsibility and segregate duties as necessary at the various levels of the Agency.

3.3. Reporting lines. The Executive Director designs and evaluates reporting lines within the Agency to enable the execution of authority, fulfilment of responsibilities, and flow of information.

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
3.1.	Ratio of positive to negative opinions of staff stating they can participate in the decisions that affect their work at the EUAA.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	48%[11]	≥ 55%	53%[12]	Once per year	ICCU (HRU)	Target of the indicator achieved.

[11] SES 2025, Question 8, results released Q1 2026: Fully Agree 9%, Agree 28%, Neither agree nor disagree 23%, Disagree 24%, Strongly disagree 16%, Impossible to Answer-Not Applicable in my work 0%, I prefer not to answer 0%.

[12] IC Pulse survey, Question 3, results released Q3 2026: Fully agree 8%; Agree 30%; Neither agree nor disagree 27%; Disagree 17%; Strongly disagree 17%; Impossible to answer/Not applicable in my work 1%; Prefer not to answer 1%.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
3.2.	Ratio of positive to negative opinions of staff believing that reporting lines are well documented and explained.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	67%[13]	≥60%	71%[14]	Once per year	ICCU (HRU)	Target of the indicator achieved.

[13] SES 2025, Question 60, results released Q1 2026: Fully Agree 11%, Agree 38%, Neither agree nor disagree 26%, Disagree 16%, Strongly disagree 8%, Impossible to Answer-Not Applicable in my work 0%, I prefer not to answer 1%.
[14] IC Pulse survey, Question 13, results released Q3 2026: Fully agree 14%; Agree 41%; Neither agree nor disagree 22%; Disagree 14%; Strongly disagree 9%; Impossible to answer/Not applicable in my work 1%; Prefer not to answer 0%.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
3.3	Ratio of positive to negative opinions of staff believing that they are given sufficient information by their line manager that allows them to understand what they are expected to do and why.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	74%[15]	≥60%	78%[16]	Once per year	ICCU (HRU)	Target of the indicator achieved.

[15] SES 2025, Question 26, results released Q1 2026: Fully Agree 24%, Agree 38%, Neither agree nor disagree 15%, Disagree 12%, Strongly disagree 9%, Impossible to Answer-Not Applicable in my work 0%, I prefer not to answer 1%.
[16] IC Pulse survey, Question 5, results released Q3 2026: Fully agree 24%; Agree 41%; Neither agree nor disagree 16%; Disagree 10%; Strongly disagree 8%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 1%.

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Principle 4: The Agency demonstrates a commitment to attract, develop, and retain competent individuals in alignment with objectives.
Characteristics:
4.1. Competence framework. The Agency defines the competences necessary to support the achievement of objectives and regularly evaluates them across the Agency, taking action to address shortcomings where necessary
4.2. Professional development. The Agency provides the training and coaching needed to attract, develop, and retain a sufficient number of competent staff.
4.3. Mobility. The Agency, as far as possible, promotes staff mobility so as to strike the right balance between continuity and renewal.
4.4. Succession planning and deputising arrangements for operational activities and financial transactions are in place to ensure continuity of operations.

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
4.1.	Ratio of positive to negative opinions of staff satisfied with the learning opportunities they get working for the Agency.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey- Pulse Survey	82%[17]	≥70%	85%[18]	Once per year	ICCU (HRU)	Target of the indicator achieved.

[17] SES 2025, Question 7, results released Q1 2026: Fully Agree 24%, Agree 46%, Neither agree nor disagree 15%, Disagree 10%, Strongly disagree 5%, Impossible to Answer-Not Applicable in my work 0%, I prefer not to answer 0%.
[18] IC Pulse survey, Question 2, results released Q3 2026: Fully agree 24%; Agree 52%; Neither agree nor disagree 11%; Disagree 9%; Strongly disagree 4%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 0%.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
4.2.	Percentage of statutory staff members voluntarily leaving the Agency during the reporting year.	**Scope:** This indicator measures early voluntary staff turnover as a proxy for staff retention. **Method of measurement:** The result, expressed as a percentage, is determined by dividing the total number of statutory staff members (excluding short-term and project-based contract agents) leaving the Agency voluntarily (except staff retiring from service) by the average total number of staff in the reporting year (i.e. the average of the total number of staff on 1 January and the total on 31 December of the reporting year).	MBD on KPIs for the ED: Indicator No 3	N/A[19]	Annual target: ≤ 10%[20].	Q2 2026 Result: 2%[21]	Quarterly	HRU	Target of the indicator achieved

[19] Based on IAS recommendation, the methodology for calculation has changed, thus baseline value is not available.
[20] Q2 2026 Target:≤ 10%.
[21] Data from reporting on Management Board Decision 194/2026.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
4.3.	Ratio of positive to negative opinions of staff agreeing that the Agency provides them with adequate opportunities to develop their potential.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100	Staff Engagement Survey- Pulse Survey	70%[22]	≥70%	69%[23]	Once per year	ICCU (HRU)	Target of the indicator achieved.

[22] SES 2025, Question 41, results released Q1 2026: Fully Agree 13%, Agree 38%, Neither agree nor disagree 25%, Disagree 13%, Strongly disagree 9%, Impossible to Answer-Not Applicable in my work 0%, I prefer not to answer 2%.
[23] IC Pulse survey, Question 6, results released Q3 2026: Fully agree 10%; Agree 42%; Neither agree nor disagree 24%; Disagree 14%; Strongly disagree 10%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 1%.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
4.4.	Percentage of temporary agent posts in the annual establishment plan which are vacant at the end of the year.	**Scope:** To monitor the authorised post filled (temporary agents, contract agents and seconded national experts). These figures are calculated without taking into consideration project-funded and short-term operational contract agent posts**.** **Method of measurement:** This indicator measures the vacancy rate of authorised temporary agent posts at the end of the year (accounting for job offers made before 31 December in the count of occupied posts). The result, expressed as a percentage, is calculated by dividing the total number of vacant posts (excluding posts for which a job offer has been made by 31 December) by the total number of temporary agent posts in the authorised establishment plan in that year.	MBD on KPIs for the ED: Indicator No 2	N/A	Annual target: ≤ 10%[24]	Q2 2026 Result: 7%[25]	Quarterly	HRU	Target of the indicator achieved for Q2 2026

[24] Q2 Target: ≤ 15%.
[25] Data from reporting on Management Board Decision 194/2026.

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Principle 5: The Agency holds individuals accountable for their internal control responsibilities in the pursuit of objectives.

Characteristics:

5.1. Enforcing accountability. The Agency defines clear roles and responsibilities and holds individuals and entrusted entities accountable for the performance of internal control responsibilities across the organization and for the implementation of corrective action as necessary.

5.2 Staff appraisal. Staff efficiency, abilities and conduct in the service are assessed annually against expected standards of conduct and set objectives. Cases of underperformance are appropriately addressed.

5.3. Staff promotion. Promotion is decided after consideration of the comparative merits of eligible staff taking into account, in particular, their appraisal reports

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
5.1	Ratio of positive to negative opinions of staff stating that they are accountable for their work.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	97%[26]	≥80%	93%[27]	Once per year	ICCU (HRU)	Target of the indicator achieved.

[26] SES 2025, Question 18, results released Q1 2026: Fully Agree 22%, Agree 64%, Neither agree nor disagree 11%, Disagree 2%, Strongly disagree 1%, Impossible to Answer-Not Applicable in my work 0%, I prefer not to answer 1%.

[27] IC Pulse survey, Question 4, results released Q3 2026: Fully agree 26%; Agree 57%; Neither agree nor disagree 11%; Disagree 4%; Strongly disagree 2%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 0%.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
5.2	Ratio of positive to negative opinions of staff stating that they are proud to work for the EUAA.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	91%[28]	≥80%	92%[29]	Once per year	ICCU (HRU)	Target of the indicator achieved.
5.3.	Ratio of positive to negative opinions of staff perceiving their work as interesting and motivating.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	88%[30]	≥80%	89%[31]	Once per year	ICCU (HRU)	Target of the indicator achieved.

[28] SES 2025, Question 49, results released Q1 2026: Fully Agree 23%, Agree 43%, Neither agree nor disagree 24%, Disagree 6%, Strongly disagree 1%, Impossible to Answer-Not Applicable in my work 0%, I prefer not to answer 2%.
[29] IC Pulse survey, Question 7, results released Q3 2026: Fully agree 28%; Agree 43%; Neither agree nor disagree 20%; Disagree 4%; Strongly disagree 3%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 2%.
[30] SES 2025, Question 1, results released Q1 2026: Fully Agree 28%, Agree 47%, Neither agree nor disagree 14%, Disagree 6%, Strongly disagree 4%, Impossible to Answer-Not Applicable in my work 0%, I prefer not to answer 1%.
[31] IC Pulse survey, Question 1, results released Q3 2026: Fully agree 26%; Agree 51%; Neither agree nor disagree 13%; Disagree 6%; Strongly disagree 4%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 0%.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
5.4	Percentage of staff members expressing positive engagement as determined from the biennial staff engagement survey.	**Scope:** The indicator assesses staff engagement. **Method of measurement:** The result is determined based on the average of positive answers (fully agree' or 'agree') to the biennial staff engagement survey standard questions, in line with the methodology applied by the external contractor.	MBD on KPIs for the ED: Indicator No 6	N/A	Biennial target 2025-2027: ≥ 70 %	N/A[32]	Every two years	HRU	N/A

[32] The next all staff engagement survey is due in 2027.

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Principle 6: The Agency specifies objectives with sufficient clarity to enable the identification and assessment of risks relating to objectives.
Characteristics:
6.1. Mission. The Agency, its centres and units/sectors have up-to-date mission statements that are aligned across all hierarchical levels, down to the tasks and objectives assigned to individual staff members. Mission statements are aligned with the Agency's responsibilities under the Treaties and the policy objectives set in the legal base.
6.2. Objectives are set at every level. The Agency's objectives are clearly set and updated when necessary (e.g., significant changes in priorities, activities and/or the organigram). They are consistently filtered down from the top to the various levels of the organisation and are communicated and understood by management and staff.
6.3. Objectives are set for the most significant activities. Objectives and indicators cover the Agency's most significant activities contributing to the delivery of the Agency's priorities relating to the core business, as well as operational management.
6.4. Objectives form the basis for committing resources. Management uses the objectives set as a basis for allocating available resources as needed to achieve policy, operational and financial performance goals.
6.5. Financial reporting objectives. Financial reporting objectives are consistent with the accounting principles applicable to the Agency.
6.6. Non-financial reporting objectives. Non-financial reporting provides management with accurate and complete information needed to manage the organisation at Agency, centre and unit level.
6.7. Risk tolerance and materiality. When setting objectives, management defines the acceptable levels of variation relative to their achievement (tolerance for risk) as well as the appropriate level of materiality for reporting purposes, taking into account cost effectiveness.
6.8. Monitoring. Setting objectives and performance indicators make it possible to monitor progress towards their achievement.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
6.1	Ratio of positive to negative opinions of staff agreeing that that the Management Team gives staff a clear picture of the mission of the Agency.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Tot number of positive replies (agree + fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	77%[33]	≥70%	69%[34]	Once per year	ICCU (HRU)	Target of the indicator achieved.
6.2	(Y/N) Each Unit/Sector has established and documented its mission, main objectives and key performance indicators.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Self-assessment & Ex post controls	Y	Y	Y[35]	At least once per year	ICCU	Target of the indicator achieved.

[33] SES 2025, Question 62, results released Q1 2026: Fully Agree 10%, Agree 46%, Neither agree nor disagree 26%, Disagree 11%, Strongly disagree 6%, Impossible to Answer-Not Applicable in my work 0%, I prefer not to answer 2%.
[34] IC Pulse survey, Question 14, results released Q3 2026: Fully agree 13%; Agree 39%; Neither agree nor disagree 24%; Disagree 16%; Strongly disagree 8%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 1%.
[35] Latest assessment implemented in Q3 2026.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
6.3	Ratio of positive to negative opinions of staff agreeing that their line manager helps them to understand EUAA's strategy and objectives and how their job contributes to these.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	72%[36]	≥70%	74%[37]	Once per year	ICCU (HRU)	Target of the indicator achieved.
6.4.	Ratio of positive to negative opinions of managers (extended management) agreeing that the SPD reflects the Agency´s priorities.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies of managers (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	87%[38]	≥60%	88%[39]	Once per year	BSSU	Target of the indicator achieved.

[36] SES 2025, Question 54, results released Q1 2026: Fully Agree 18%, Agree 34%, Neither agree nor disagree 26%, Disagree 11%, Strongly disagree 8%, Impossible to Answer/Not Applicable in my work 1%, I prefer not to answer 2%.
[37] IC Pulse survey, Question 10, results released Q3 2026: Fully agree 20%; Agree 41%; Neither agree nor disagree 17%; Disagree 14%; Strongly disagree 8%; Impossible to answer/Not applicable in my work 1%; Prefer not to answer 1%.
[38] SES 2025, Question 68, results released Q1 2026: Fully Agree 15%, Agree 42%, Neither agree nor disagree 26%, Disagree 6%, Strongly disagree 3%, Impossible to Answer/Not Applicable in my work: N/A, I prefer not to answer 9%.
[39] IC Pulse survey, Question 18, results released Q3 2026: Fully agree 7%; Agree 11%; Neither agree nor disagree 6%; Disagree 2%; Strongly disagree 1%; Impossible to answer/Not applicable in my work 71%; Prefer not to answer 2%.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
6.5	Ratio of positive to negative opinions of managers (extended management) that are of the opinion that internal financial reporting supports their financial management objectives.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies of managers (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	91%[40]	≥55%	87%[41]	Once per year	ICCU (HRU)	Target of the indicator achieved.

[40] SES 2025, Question 69, results released Q1 2026: Fully Agree 13%, Agree 40%, Neither agree nor disagree 31%, Disagree 3%, Strongly disagree 2%, Impossible to Answer-Not Applicable in my work: N/A, I prefer not to answer 10%.
[41] IC Pulse survey, Question 19, results released Q3 2026: Fully agree 5%; Agree 10%; Neither agree nor disagree 7%; Disagree 2%; Strongly disagree 1%; Impossible to answer/Not applicable in my work 72%; Prefer not to answer 2%.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
6.6	Percentage of the annual work programme objectives achieved in the reporting year.	**Scope:** To assess if objectives of the work programme have been achieved. **Method of measurement**: The result, expressed as a percentage, is determined by dividing the total number of achieved or nearly achieved objectives by the overall total number of objectives in the annual work programme. At the end of the year, each annual objective is classified as follows: • Achieved = all performance indicator targets are exceeded or met. • Nearly achieved = no more than half the performance indicator targets are unmet; the others are nearly met*, exceeded and/or met. • Not achieved = more than half the performance indicator targets are unmet. • Not measurable (N/A) = more than half the performance indicators are not measurable or not applicable. * Target that is nearly met = result between 80 % and 99 % of the annual target.	MBD on KPIs for the ED: Indicator No 1	84%	Annual Target: ≥ 85%	90%[42]	Once per year	BSSU	Target of the indicator achieved.

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Principle 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.

Characteristics:

7.1. Risk identification. The Executive Director identifies and assesses risks at the various organisational levels (centres, units, sectors) and those related to entrusted entities, analysing internal and external factors. Management and staff are involved in the process at the appropriate level.

7.2. Risk assessment. The Executive Director estimates the significance of the risks identified and determines how to respond to significant risks considering how each one should be managed and whether to accept, avoid, reduce or share the risk. The intensity of mitigating controls is proportional to the significance of the risk.

7.3. Risk identification and risk assessment are integrated into the annual activity planning and are regularly monitored

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
7.1	Percentage of Units involved in the annual risk management exercise.	**Scope:** To measure to which extend the risks management exercise is embedded in all the units. **Method of measurement:** Number of units participated in the risks management exercise/ total number of units as per Agency's organogram.	Self-assessment & Ex post controls	N/A	100%	100%[43]	At least once per year	ICCU	Target of the indicator achieved.

[42] Latest available results released Q1 2026 as part of ICSA.

[43] Latest available results in Q3 2026.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
7.2	Percentage of risk responses implemented by, or ahead of, the deadlines set in the EUAA central risk register.	**Scope:** To measure timely implementation of the risk responses. **Method of measurement:** The percentage of responses to risks that are fully implemented by and ahead of the deadlines set in the central risk register.	Self-assessment & Ex post controls	90%	≥80%	100%[44]	At least once per year	ICCU	Target of the indicator achieved.

[44] Latest available results released Q1 2026 as part of ICSA.

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Principle 8: The Agency considers the potential for fraud in assessing risks to the achievement of objectives.
Characteristics:
8.1. Risk of fraud. The risk identification and assessment procedures consider 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.
8.2. Anti-fraud strategy. The Agency as a whole and each centre/unit/sector set up and implement measures to counter fraud and any illegal activities affecting the financial interests of the European Union. They do this by putting in place a sound anti-fraud strategy to improve the prevention, detection and conditions for investigating fraud, and to set out reparation and deterrence measures, with proportionate and dissuasive sanctions.

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last Measured value	Frequency of measuring	Owner	Assessment / Conclusion
8.1	Percentage of staff that participated in internal control and risk management (ICRM) training (including fraud prevention).[45]	**Scope:** To measure attendance of staff to internal control and risk management (ICRM) training. **Method of measurement:** ((Total staff - staff not attended training) / total staff) x 100[46].	Self-assessment & Ex post controls	78%	≥50%	73%[47]	At least once per year	HRU	Target of the indicator achieved.

[45] Mandatory training for all EUAA staff; refresher course required for anyone who has not attended such training in the last five years.
[46] Calculation was based on statutory staff and excludes staff still under probation.
[47] Latest available results released Q1 2026 as part of ICSA.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last Measured value	Frequency of measuring	Owner	Assessment / Conclusion
8.2	Percentage of timely implementation of agreed mitigating actions in the Agency's Fraud Risk Register.	**Scope:** To measure timely implementation of the mitigating actions in the Agency's Fraud Risk Register. **Method of measurement:** ((Total no. of mitigating measures of a year by a given quarter [Q1/Q2/Q3/Q4]- implemented actions planned or in progress by a given quarter [Q1/Q2/Q3/Q4]) + (implemented measures ahead of target date)) / ((Total. Mitigating measures of a year) + (implemented measures ahead of target date)) x 100.	Self-assessment & Ex post controls	94%	≥85%	88%[48]	At least once per year	ICCU	Target of the indicator achieved.

[48] Latest available results released Q1 2026 as part of ICSA.

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Principle 9: The Agency identifies and assesses changes that could significantly impact the internal control system.
Characteristics:
9.1 Assess changes. The risk identification process considers changes in the internal and external environment, in policies and operational priorities, as well as in management's attitude towards the internal control system.

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
9.1	Ratio of positive to negative opinions of staff considering that at EUAA changes (organisational, regulatory) are managed effectively.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	46%[49]	≥50%	42%[50]	Once per year	ICCU (HRU)	Partially achieved.

[49] SES 2025, Question 53, results released Q1 2026: Fully Agree 6%, Agree 24%, Neither agree nor disagree 35%, Disagree 21%, Strongly disagree 13%, Impossible to Answer/Not Applicable to my work 1%, I prefer not to answer 1%.
[50] IC Pulse survey, Question 9, results released Q3 2026: Fully agree 5%; Agree 22%; Neither agree nor disagree 35%; Disagree 22%; Strongly disagree 15%; Impossible to answer/Not applicable in my work 1%; Prefer not to answer 0%.

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Principle 10: The Agency selects and develops control activities that contribute to the mitigation of risks to the achievement of objectives to acceptable levels.

Characteristics:

10.1. Control activities are performed to mitigate the identified risks and are cost-effective. They are tailored to the specific activities and risks of each of the Agency's centres/units/sectors and their intensity is proportional to the underlying risks.

10.2. Control activities are integrated in a control strategy. The control strategy includes a variety of checks, including supervision arrangements, and where appropriate, should include a balance of approaches to mitigate risks, considering manual and automated controls, and preventive and detective controls.

10.3. Segregation of duties. When putting in place control measures, management considers whether duties are correctly divided between staff members to reduce risks of error and inappropriate or fraudulent actions.

10.4. Business continuity plans based on a business impact analysis following corporate guidance are in place, up-to-date and used by trained staff to ensure that the Agency is able to continue working to the extent possible in case of a major disruption. Where necessary, business continuity plans must include coordinated and agreed disaster recovery plans for time-sensitive supporting infrastructure (e.g., IT systems).

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last Baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
10.1	Percentage of FIAs &FVAs having followed the minimum compulsory competence framework (ABAC, ELC, Internal Control and Fraud Prevention).	**Scope:** To measure if FIAs and FVAs have attended the mandatory training. **Method of measurement:** (Total of FIAs and FVAs – FIAs and FVAs not attended training)/ (total FIAs and FVAs) x 100.	Self-assessment & Ex post controls.	FIA – 90% av. in 3 training sessions FVA – 96% av. in 3 training sessions	85%	FVA - 96% av. in 3 training. FIA – 85 % av. in 3 training[51]	At least once per year	ICCU (HRU)	Target of the indicator achieved.

[51] Latest available results released Q1 2026 as part of ICSA.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last Baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
10.2	The Agency's Management performs reviews of the business continuity management system on a periodic basis (at least once per year) based on reporting by the Business Continuity Coordinator.	**Scope:** To assess if the Agency's Management performs reviews of the business continuity management system on a periodic basis. **Method of measurement:** Self-Assessment through ex-post controls.	Self-assessment & Ex post controls.	Y	Y	Y[52]	At least once per year	BSSU	Target of the indicator achieved.

[52] Latest available results released Q1 2026 as part of ICSA.

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Principle 11: The Agency selects and develops general control activities over technology to support the achievement of objectives.
Characteristics:
11.1. Control over technology. In order to ensure that technology used in business processes, including automated controls, is reliable, and taking into account the overall corporate processes, the Agency selects and develops control activities over the acquisition, development and maintenance of technology and related infrastructure.
11.2. Security of IT systems. The Agency applies appropriate controls to ensure the security of the IT systems of which they are the system owners. This is done in accordance with the IT security governance principles, in particular as regards data protection, professional secrecy, availability, confidentiality and integrity.

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last Measured value	Frequency of measuring	Owner	Assessment / Conclusion
11.1	ICT and Cyber Security board is meeting regularly	**Scope:** To assess if ICT and Cyber Security board is meeting regularly. **Method of measurement:** Self-Assessment through ex-post controls.	Self-assessment & Ex post controls	4	4	4[53]	At least once per year	ICTU	Target of the indicator achieved.

[53] Latest available results released Q1 2026 as part of ICSA.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last Measured value	Frequency of measuring	Owner	Assessment / Conclusion
11.2	Ratio of positive to negative opinions of staff stating that they feel confident in using digital tools and technologies to deliver the expected results.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	94%[54]	≥80%	93%[55]	Once per year	ICTU	Target of the indicator achieved.
11.3	Percentage of applicable central financial system ABAC security controls access rights that EUAA is in full compliance with the requirements[56].	**Scope**: To prevent unauthorised access to the central financial system. **Method of measurement**: ((Total ABAC security controls access rights - ABAC security controls not in compliance with) /Total ABAC security controls access rights) x 100.	Self-assessment & Ex post controls.	84%[57]	100 %	84%[58]	At least once per year	ICCU with support of LAM& FINU responsible teams	Partially achieved.

[54] SES 2025, Question 55 results released Q1 2026: Fully Agree 27%, Agree 54%, Neither agree nor disagree 12%, Disagree 4%, Strongly disagree 1%, Impossible to Answer/Not Applicable to my work 1%, I prefer not to answer 0%.
[55] IC Pulse survey, Question 11, results released Q3 2026: Fully agree 23%; Agree 55%; Neither agree nor disagree 15%; Disagree 5%; Strongly disagree 2%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 0%.
[56] For the ICSA 2024, number of controls have increased from 11 to 19 as per Neutral verification report. For the next reporting period, reference to ABAC will be eliminated.
[57] 3 out of 19 controls are not compliant.
[58] 3 out of 19 controls are not compliant (check was implemented in September 2025).

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last Measured value	Frequency of measuring	Owner	Assessment / Conclusion
11.4	Y/N Cybersecurity risk management and control framework is discussed and assessed during the annual risk management exercise at adequate management level.	**Scope:** To assess if cybersecurity risk management and control framework is integrated in the annual risk management exercise. **Method of measurement:** Self-Assessment through ex-post controls.	Self-assessment & Ex post controls.	Y	Y	Y[59]	At least once a year	CSU	Target of the indicator achieved.
11.5	Ratio of positive to negative opinions of staff considering that they are aware about basis cyber security rules and how to address such security breaches.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	93%[60]	≥70%	91%[61]	Once per year	CSU	Target of the indicator achieved.

[59] Latest available results released in Q3 2026.
[60] SES 2025, Question 65, results released Q1 2026: Fully Agree 19%, Agree 64%, Neither agree nor disagree 10%, Disagree 6%, Strongly disagree 0%, Impossible to Answer/Not Applicable to my work 0%, I prefer not to answer 0%.
[61] IC Pulse survey, Question 16, results released Q3 2026: Fully agree 21%; Agree 60%; Neither agree nor disagree 11%; Disagree 7%; Strongly disagree 1%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 0%.

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Principle 12: The Agency deploys control activities through corporate policies that establish what is expected, and in procedures that put policies into action.

Characteristics:

12.1. Appropriate control procedures ensure that objectives are achieved. The control procedures assign responsibility for control activities to the entity or individual responsible for the risk in question. The staff member(s) put in charge perform the control activities in a timely manner and with due diligence, taking corrective action where needed. Management periodically reassesses the control procedures to ensure that they remain relevant.

12.2. Exception reporting is one of the management tools used to draw conclusions about the effectiveness of internal control and/or the changes needed in the internal control system. A system is in place to ensure that all instances of overriding controls or deviations from established processes and procedures are documented in exception reports (ex-ante) or noncompliance reports (ex post). All instances of ex ante overriding controls or deviations must be justified and approved before action is taken and logged centrally.

12.3. The impact assessment and evaluation of expenditure programmes and activities and other non-spending activities are performed by analogy in accordance with the guiding principles of the Commission's better regulation guidelines, to assess the performance of the Agency's interventions and analyses options and related impacts on new initiatives.

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
12.1.	Percentage of implemented controls associated with risks for the sensitive functions.	**Scope:** To assess to which extend controls are implemented to reduce to minimum the risks of staff deliberately use their decision-making power or influence to gain some personal advantage. **Method of measurement:** ((Total mitigating controls - mitigating controls not implemented) / Total mitigating controls) x 100.	Self-assessment & Ex post controls	90%	90%	100%[62]	At least once a year	ICCU	Target of the indicator achieved.

[62] Latest available results released Q1 2026 as part of ICSA.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
12.2.	Percentage of the annual financial impact of exception and non-compliances over the total number of payment appropriations executed.	**Scope:** To assess the financial impact of the exception and non-compliances over the total number of payment appropriations executed. **Method of measurement:** ((Total number of payment appropriations executed - annual financial impact) / Total number of payment appropriations executed) x 100.	Self-assessment & Ex post controls	0.38%	<2%	0.37%[63]	Monthly and annually	ICCU	Target of the indicator achieved.
12.3.	(Y/N) Where relevant, evaluations are implemented, and results followed up and reported in the CAAR.	**Scope:** To assess if evaluations are regularly implemented and reported to the MB. **Method of measurement:** Self-Assessment through ex-post controls.	Self-assessment & Ex post controls	Y	Y	Y[64]	Once per year	BSSU	Target of the indicator achieved.

[63] Latest available results released Q1 2026 as part of ICSA.
[64] Latest available results released Q1 2026 as part of ICSA.

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Principle 13: The Agency obtains or generates and uses relevant quality information to support the functioning of internal control.
Characteristics:
13.1. Information and document management. The Agency identifies the information required to support the functioning of the internal control system and the achievement of Agency´s objectives. Information systems process relevant data, captured from both internal and external sources, to obtain the required and expected quality information, in compliance with applicable security, document management and data protection rules. This information is produced in a timely manner, and is reliable, current, accurate, complete, accessible, protected, verifiable, filed and preserved. It is shared within the organisation in line with prevailing guidelines

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
13.1	Ratio of positive to negative opinions of staff considering that they are aware about basis data protection rules and where to address data breaches.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey} X 100.	Staff Engagement Survey-Pulse Survey	93%[65]	≥70%	91%[66]	Once per year	DPO	Target of the indicator achieved.

[65] SES 2025, Question 66, results released Q1 2026: Fully Agree 20%, Agree 60%, Neither agree nor disagree 13%, Disagree 5%, Strongly disagree 2%, Impossible to Answer/Not Applicable to my work 0%, I prefer not to answer 0%.
[66] IC Pulse survey, Question 17, results released Q3 2026: Fully agree 22%; Agree 59%; Neither agree nor disagree 11%; Disagree 8%; Strongly disagree 1%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 0%.

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Principle 14: The Agency internally communicates information, including objectives and responsibilities for internal control, necessary to support the functioning of internal control.

Characteristics:
14.1. Internal communication. The Agency communicates internally about its objectives, challenges, actions taken and results achieved, including but not limited to the objectives and responsibilities of internal control.
14.2. Separate communication lines, such as whistleblowing hotlines, are in place at Agency level and in line with Commission guidance (and Commission communications), to ensure information flow when normal channels are ineffective.

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
14.1	Level of global satisfaction of staff with Internal Control and Risk Management training.	**Scope:** To assess staff satisfaction with Internal Control training. **Method of measurement:** Total mean value of 3 Internal Control and Risk Management training modules from staff survey questionnaires rating the sessions from 1-10 (1 being the lowest, 10 being highest). Calculated by adding the score of all survey results cumulatively across the years, then dividing the total by the no. of survey questionnaires filled in. Total no. added satisfaction results / Total no. of questionnaires submitted = Mean value.	Self-assessment & Ex post controls	8.53	≥ 7	8.57[67]	Quarterly	ICCU	Target of the indicator achieved.

[67] Latest available results released Q1 2026 as part of ICSA.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
14.2	Percentage of positive opinions of staff considering that internal communication initiatives help them understand the work of the Agency.	**Scope:** The intention of this KPI is to measure the positive opinions in relation to overall opinions. **Method of measurement**: (Total number of positive replies (scale 4 "I agree" and scale 5 "I strongly agree") / total number of replies to the survey) X 100.	Internal communication survey	N/A	≥ 70%	85.06%[68]	Once per year	CPRU	Target of the indicator achieved.
14.3	Ratio of positive to negative opinions of staff that are aware about the whistle blowing regulatory communication channels to be used in the case of the red flag of fraud.	**Scope:** The intention of this KPI is to measure the ratio of positive to negative opinions, therefore, neutral responses are excluded. **Method of measurement**: Total number of positive replies (agree and fully agree) / {(total number of positive replies (agree and fully agree) and negative (disagree and strongly disagree) replies to the survey X 100.	Staff Engagement Survey-Pulse Survey	84%[69]	≥ 80%	85%[70]	Once per year	ICCU (HRU)	Target of the indicator achieved.

[68] Latest available results released Q1 2026 as part of ICSA.
[69] SES 2025, Question 64, results released Q1 2026: Fully Agree 16%, Agree 53%, Neither agree nor disagree 17%, Disagree 9%, Strongly disagree 4%, Impossible to Answer/Not Applicable to my work 0%, I prefer not to answer 1%.
[70] IC Pulse survey, Question 15, results released Q3 2026: Fully agree 22%; Agree 53%; Neither agree nor disagree 13%; Disagree 10%; Strongly disagree 3%; Impossible to answer/Not applicable in my work 0%; Prefer not to answer 0%.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
14.4	Agency regularly communicates to staff internal control related results and achievements (IAS, ECA, ex-post controls, anti-fraud strategy, risk management, etc.).	**Scope:** To assess if Agency regularly communicates to staff on internal control matters. **Method of measurement**: Self-Assessment through ex-post controls.	Self-assessment & Ex post controls	N/A	4 posts per year reaching at least 200 colleagues per post	4 posts reaching at least 200 colleagues per post[71]	At least once per year	ICCU	Target of the indicator achieved.

[71] Latest available results released Q1 2026 as part of ICSA.

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Principle 15: The Agency communicates with external parties about matters affecting the functioning of internal control.
Characteristics:
15.1. External communication: The Agency ensures that external communication is consistent, relevant to the audience being targeted, and cost-effective. The Agency establishes clear responsibilities to align its communication activities with the political priorities and narrative of the Agency.
15.2. Communication on internal control. The Agency communicates with external parties on the functioning of the components of internal control. Relevant and timely information is communicated externally, taking into account the timing, audience, and nature of the communication, as well as legal, regulatory, and fiduciary requirements.

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
15.1	(Y/N) The agency monitors and evaluates its communication activities based on pre-defined SMART objectives and KPIs.	**Scope:** To assess performance of communication activities. **Method of measurement:** Self-Assessment through ex-post controls.	Self-assessment & Ex post controls	Y	Y	Y[72]	At least once per year	CPRU	Target of the indicator achieved.

[72] The assessment is made based on the objectives, activities, targets and KPIs defined in the EUAA Compendium that is updated at least annually as part of the risks management process. Latest available results released Q1 2026 as part of ICSA.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
15.2	The EUAA ED timely communicates with external stakeholders the internal control deficiencies action plan by up-loading this information in the internal control webpage on the EUAA website[73] regularly (at least once per year) and linking it accordingly in the CAAR.	**Scope:** To assess if there is a timely communication with external stakeholders on the internal control. **Method of measurement:** Self-Assessment through ex-post controls.	Self-assessment & Ex post controls	N/A	1	2[74]	At least once per year	ICCU	Target of the indicator achieved.

[73] https://euaa.europa.eu/about-us/governance-and-internal-control
[74] Latest available results released Q1 2026 as part of ICSA.

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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.

Characteristics:

16.1. Continuous and specific assessments. The Agency continuously monitors the performance of the internal control system with tools that make it possible to identify internal control deficiencies, register and assess the results of controls, and control deviations and exceptions. In addition, when necessary, the Executive Director carries out specific assessments, taking into account changes in the control environment. Ongoing assessments are built into business processes and adjusted to changing conditions. Both kinds of assessment must be based on the general principles set out in Annex 2 to this Decision.

16.2. Sufficient knowledge and information. Staff performing ongoing or separate assessments has sufficient knowledge and information to do this, specifically on the scope and completeness of the results of controls, control deviations and exceptions.

16.3. Risk-based and periodical assessments. The Agency varies the scope and frequency of specific assessments depending on the identified risks. Specific assessments are performed periodically to provide objective feedback.

#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
16.1	% Ex-post controls book value coverage for a financial year.	**Scope**: To assess if Ex-post controls book value coverage for a financial year. **Method of measurement**: The sample is calculated following the ex-post controls methodology, as defined in Decision of the Executive Director No 10 of 7 May 2021 on the establishment of a risk-based strategy for financial ex post controls.	Ex post controls.	10%	10 %	10%[75]	At least once per year	ICCU	Target of the indicator achieved.

[75] Latest available results released Q1 2026 as part of ICSA.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
16.2	Percentage of eligible staff members responding to the biennial staff engagement survey.	**Scope**: Monitor staff participation and ensure that survey results are sufficiently representative to support organisational improvement and decision-making. **Method of measurement**: The result, expressed as a percentage, is calculated by dividing the total number of staff members responding to the staff engagement survey by the total number of staff eligible to complete the survey. The survey is organised every two years by an external contractor. Staff members joining the Agency less than three months before the launch of the survey are not eligible to participate.	MBD on KPIs for the ED: Indicator No 5	N/A	Biennial target: ≥ 70 %	N/A[76]	Every two years	HRU	N/A

[76] The next biennial staff engagement survey is due in 2027.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
16.3	Percentage implementation of commitment appropriations in the EUAA's adopted budget in the financial year.	**Scope**: Commitment appropriations implementation performance. **Method of measurement**: The result, expressed as a percentage, is calculated by dividing the total amount of commitment appropriations (C1 funds) legally committed by the EUAA during the reporting year, by the total amount of commitment appropriations (C1 funds) authorised in the EUAA's adopted budget for that financial year, including any amending budgets.	MBD on KPIs for the ED Indicator No. 8	N/A	Annual target: ≥ 95%[77]	Q2 2026 Result: 77%[78]	Quarterly	FINU	Target indicator achieved for Q2 2026.
16.4	Percentage execution of payment appropriations in the EUAA's adopted budget in the financial year.	**Scope**: Payment appropriations implementation performance. **Method of measurement**: The result, expressed as a percentage, is calculated by dividing the total amount of the EUAA's payment appropriations (C1 funds) actually paid by the EUAA during the reporting year, by the total amount of payment appropriations (C1 funds) authorised in the Agency's adopted budget for the financial year, including any amending budgets.	MBD on KPIs for the ED Indicator No 9	N/A	Annual target: ≥ 90 %[79]	Q2 2026 Result: 38%[80]	Quarterly	FINU	Target indicator achieved for Q2 2026

[77] Q2 2026 Target: ≥ 65%.
[78] Data from reporting on Management Board Decision 194/2026.
[79] Q2 2026 Target: ≥25%.
[80] Data from reporting on Management Board Decision 194/2026

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
16.5	Percentage of payments processed on time during the financial year.	**Scope**: Timely implementation of payments. **Method of measurement**: The result, expressed as a percentage, is calculated by dividing the number of payments subject to late-payment interest that were processed within the payment deadlines laid down in the Agency's Financial Regulation, by the total number of payments subject to late-payment interest processed during the financial year.	MBD on KPIs for the ED: Indicator No 10	N/A	Annual target: ≥ 95 %[81]	Q2 2026 Result: 97%[82]	Quarterly	FINU	Target indicator achieved for Q2 2026
16.6	Percentage of cancelled payment appropriations in the financial year.	**Scope**: Payment appropriations implementation performance. **Method of measurement**: The result, expressed as a percentage, is calculated by dividing the total amount of payment appropriations cancelled during the financial year by the total amount of payment appropriations available for that financial year, including payment appropriations carried over from the previous financial year.	MBD on KPIs for the ED: Indicator No. 11	N/A	Annual target: ≤ 5 %	N/A	At least once per year	FINU	N/A

[81] Q2 2026 Target: ≥ 95 %
[82] Data from reporting on Management Board Decision 194/2026

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
16.7	Number of budget transfers authorised during the financial year.	**Scope**: Budget planning performance **Method of measurement**: The result corresponds to the total number of budget transfers authorised by the Executive Director and/or the Management Board during the financial year.	MBD on KPIs for the ED: Indicator No 12	N/A	Annual target: ≤ 10[83]	Q2 2026 Result: 2[84]	Quarterly	FINU	Target indicator achieved for Q2 2026.
16.8	Percentage of procurement procedures launched within the planned timeframes in the reporting year.	**Scope**: Procurement planning performance **Method of measurement**: The result, expressed as a percentage, is calculated by dividing the number of procurement procedures launched within their planned timeframes by the total number of procedures scheduled in the reporting year (including very low-value procedures).	MBD on KPIs for the ED: Indicator No 13	N/A	Annual target: ≥ 80 %[85]	Q2 2026 Result: 40%[86]	Quarterly	FINU	Target indicator achieved for Q2 2026.

[83] Q2 2026 Target: ≤ 5.
[84] Data from reporting on Management Board Decision 194/2026.
[85] Q2 2026 Target: ≥ 35 %.
[86] Data from reporting on Management Board Decision 194/2026.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
16.9	Percentage of contracts awarded in the reporting year.	**Scope**: Contract management performance **Method of measurement**: The result, expressed as a percentage, is calculated by dividing the number of contracts* awarded during the reporting year by the total number of procurement procedures completed in the same period. * Includes all contract types.	MBD on KPIs for the ED: Indicator No 14	N/A	Annual target: 80 %[87]	Q2 2026 Result: 42%[88]	Quarterly	PFMU	Target of the indicator achieved for Q2 2026.

[87] Q2 2026 Target: ≥ 25 %.
[88] Data from reporting on Management Board Decision 194/2026

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Principle 17: The Agency assesses and communicates internal control deficiencies in a timely manner to those parties responsible for taking corrective action, including the Management Board and senior management, as appropriate.

Characteristics:

17.1 Deficiencies. With the support of the manager responsible for risk management and internal control and the Internal Control and Compliance Unit, the Executive Director considers the results of the assessments of how the internal control system is functioning within the Agency. Deficiencies are communicated to management and to the centres/units/sectors responsible for taking corrective action. They are reported to senior management and the Management Board, including through the CAAR, as appropriate. The term 'internal control deficiency' means a shortcoming in a component or components and relevant principle(s) that reduces the likelihood of the Agency achieving its objectives. There is a major deficiency in the internal control system if senior management determines that a component and one or more relevant principles and its characteristics are not present or functioning or that components are not working together. When a major deficiency exists, the Executive Director cannot conclude that the requirements of an effective system of internal control were met. To classify the severity of internal control deficiencies, senior management must use judgment based on relevant duly documented criteria.

17.2 Remedial action. A corrective action is taken in a timely manner by the staff member(s) in charge of the processes concerned, under the supervision of their management. With the support of the manager in charge of risk management and internal control, the Executive Director monitors and takes responsibility for the timely implementation of corrective action.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
17.1	Percentage of very important and critical recommendations from IAS (outstanding and delayed on its implementation for more than six months).[89]	**Scope:** To assess if there are any significantly delayed very important and critical recommendations from IAS. **Method of measurement:** Ratio of delayed recommendations outstanding for more than six months against the total very important and critical recommendations from IAS.	IAS reports	N/A	0%[90]	0%[91]	At least once per year	ICCU	Target of the indicator achieved.
17.2	Percentage of ECA's quantifiable observations/recommendations that are outstanding and delayed on its implementation for more than one year.	**Scope:** To assess if there are any significantly delayed quantifiable observations/recommendations from ECA. **Method of measurement:** Ratio of quantifiable observations/recommendations that are outstanding and delayed on its implementation for more than one year against the total number of observations/recommendations	ECA reports	N/A	0%[92]	0%[93]	At least once per year	ICCU	Target of the indicator achieved.

[89] When IAS does not identify very important and critical recommendations, they will conclude that internal control systems in place for the audited process are effective. However, details on the progress achieved in the implementation of important recommendations are included in the relevant parts of the CAAR and in particular Annex IX_Register of Deficiencies and Corrective Action plan.
[90] If there are no delayed recommendations outstanding for more than 6 months, the KPI results are presumed to be 0%.
[91] Latest available results assessed in Q3 2026.
[92] If there are no delayed observations/recommendations outstanding for more than one year, the KPI results are presumed to be 0%.
[93] Latest available results released in Q3 2026. At that moment there were no critical or very important ECA open observations.

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#	Indicator	Scope and Calculation method	Source of data to obtain value for indicator	Last baseline value	Target value 2025-2030	Last measured value	Frequency of measuring	Owner	Assessment / Conclusion
17.3	(Y/N) Percentage of corrective actions to address the Agency's internal control major and critical deficiencies (other than ECA and IAS) that are delayed above the agreed deadlines.[94]	**Scope:** To assess if Agency addresses major or critical deficiencies without a delay. **Method of measurement:** Ratio of internal control major and critical deficiencies that are outstanding longer than the agreed deadlines against the total number of corrective actions addressing major and critical deficiencies.	Self-assessment & Ex post controls	N/A	0%[95]	0%[96]	At least once per year	ICCU	Target of the indicator achieved.

[94] When ICCU does not identify major and critical deficiencies, SM will conclude that internal control systems in place are effective. However, details on the progress achieved in the implementation of corrective actions addressing moderate deficiencies are included in the relevant parts of the CAAR and in particular Annex IX Register of Deficiencies and Corrective Action plan.
[95] If there are no delayed corrective actions outstanding for longer than the agreed deadlines, the KPI results are presumed to be 0%.
[96] Latest available results released in Q3 2026. At that moment there were no critical or major internal control deficiencies.

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