

RESEARCH ARTICLE:

Responsibility for implementing the technical dimension of good administration requirements

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ABSTRACT

The primary purpose of public institutions is to meet the social function¹ they were created for, namely to fulfil the mission established by law in their jurisdiction.

To be able to comply with this mission it is necessary for an institution to abide by its tasks related with its duties in complying with the legal norms, the internal rules and policies, and not least complying with the standards generally accepted by the society and observing the common values of its members².

In this context, complying with the requirements of the good administration standard is prefigured as a necessary condition to meet the social function of the public institution.

The concept of good administration may have, both in the literature and in practice, different meanings. Thus, good governance is represented on one hand as a

horizontal principle of administrative law. On the other hand, it is seen as a third generation right, according to the European Union law - an aggregate right incorporating in its content a series of other rights, but which is not accepted as a subjective right susceptible to protection through direct action in court. Last but not the least, it is considered a standard - a set of values that the society recognizes and demands public institutions to observe it³.

In this context, the main goal of the current paper is to study the implementation of the good administration requirements from the perspective of the persons called by law or by the internal acts of a public institution to perform a related duty, in other words the ones who are bound by a positive obligation of to do.

KEYWORDS: *good administration, organizational culture, standards, top management responsibility, assigned staff responsibility*

¹Klotz-Santha. 2013. p. 16 în Pallai, K. June 2015, *Integrity and integrity management, created within the framework of priority project No. SROP -1.1.21-2012-2012-0001: Prevention of corruption and the revision of public administration development*, in Gurzawska, A. *Principles and Approaches in Ethics Assessment*, - *Institutional Integrity*, University of Twente, p.3.

²See the definition of conformity according to the ISO standards, mainly ISO 19600, and that specified into the OSGG no. 400/2015.

³See detailed content of the Research Report no. 1 - EU-wide benchmarks on the compliance framework for public institutions.

1. Introduction

1.1. Organizational culture role for carrying into effect good administration standards

The strategies employed for ensuring the compliance with the requirements of good governance belong to a broad spectrum, from those focusing on compliance with the regulatory framework to the approaches centred on the adherence to ethical principles⁴. How each institution implements these requirements is specific to the context in which it operates. The analysis of the specialized literature⁵ and practices used show that in fact each institution employs solutions that combine elements of normative compliance with those related to the adhesion to values and principles.

This distinctive solution, specific to each institution, defines its organizational culture. Pettigrew A, according to whom the organizational culture is a system of public and collective meanings shared by a certain group at a time, has first used the concept of organizational culture in 1979⁶.

Since until now the perspectives were extremely varied when this issue has been addressed, there is currently no universally accepted definition of what organizational

culture means. In this respect it can be identified in the literature over 160 different definitions⁷, of which we mention below the most relevant to this approach.

Thus “organizational culture is the personality of an organization”⁸. “Organizational culture is a unitary system of thinking of members of a group that differentiates them from other groups”⁹. “Organizational culture is a model of common assumptions that the group has learned when solving problems, that have proven to be functional and have been considered valid enough to be passed on to new members as the right way to perceive and tackle similar issues later on”¹⁰.

In a review conducted by Eugen Avram, on common elements considered by theoreticians, the organizational culture is “holistic - with reference to an entire that is more than the sum of its parts; historically determined - reflecting somehow the time evolution of the organization; linked to the rituals, symbols, myths (collective unconsciousness); grounded socially, created and maintained by a group of people who together form an

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⁴The Conference Board of Canada, *How to Ensure Ethics and Integrity throughout an Organization*, April 2008, p. 7, in Gurzawska, A. June 2015. *Principles and Approaches in Ethics Assessment - Institutional Integrity*, University of Twente, p. 3. <http://satoriproject.eu/media/1.e-Institutional-Integrity.pdf>.

⁵Chayes, A., Chayes, A.H., 1995. *The new sovereignty. Compliance with International Regulatory Agreements*, Cambridge MA, in Neyer, J., Zurn, M: *Compliance in comparative perspective, The EU and other Institutions*, In IIS-Arbeitspapier nr. 23/01, Bremen, Germany: Institut für Interkulturelle und Internationale Studien, p.16.

⁶Pettigrew, A. 1979. *On studying organizational culture*, *Administrative Science Quarterly*, 24, pp. 570-581 in Stănimir, E.F. 2014. *Management of organizational culture in Romanian police - PhD Thesis - Summary*, Bucharest, Romania: Romanian Police Academy « Alexandru Ioan Cuza », p. 9.

⁷Schein E.H. 1985. *Organizational Culture and leadership*, San Francisco, CA, USA: Jossey Bass; Martin J. 2002. *Organizational Culture: Mapping the terrain*, 2002, Thousand Oaks, CA, USA: Sage, in Stănimir, E.F. 2014. *Management of organizational culture in Romanian police - PhD thesis - summary*, “Alexandru Ioan Cuza” Police Academy, Bucharest, 2014, https://www.juridice.ro/wp-content/uploads/2014/07/rezumate_teza_stanimir_emil.pdf, p 5.

⁸McNamara, C. Jul-Sep 1997. *Organizational Excellence, Business & Economic Review*, in Stănimir, E.F, *Management of organizational culture in Romanian police - PhD thesis - summary*, “Alexandru Ioan Cuza” Police Academy, Bucharest, 2014, https://www.juridice.ro/wp-content/uploads/2014/07/rezumate_teza_stanimir_emil.pdf, p. 5

⁹Hofstede, G. 1991. *Culture's consequences: International differences in work - related values*, Beverly-Hills, CA, USA: Sage, in Stănimir, E.F, p. 11.

¹⁰Schein E.H., *Culture: The Missing Concept in Organization Studies*” in *Administrative Sciences Quarterly*, no. 41, 1996 in Stănimir, E.F, p. 11.

organization; hard to change - because it refers to the intimate personality of the individuals who compose the organization”¹¹.

Organizational culture is a dynamic phenomenon, which begins with the values and rules imposed by leaders to a determined group. If this group is successful, then the set of accepted values defines the culture of the group and the kind of acknowledged leadership¹². As the group evolves and becomes able to solve different new problems, it is needed that the organizational culture also evolves such that to incorporate the learned lessons and to adapt to the surrounding changes. It is the leadership responsibility to generate the organizational culture changes, and thus evolution, when such situation changes occur.

Organizational culture is looming in this context as a proximate kind of the compliance culture. A definition of this is found in ISO Standard 19600: 2014 on Compliance Management Systems. According to it, the culture of compliance represents the existing values, ethics and beliefs or traditions in the organization, which interact with its structures and control systems to produce the necessary rules of conduct required for achieving the results of conformity¹³.

Returning to the central idea of this article, we will now refer to good administration as if it were a standard that needs to be internalized and assumed by the organizational culture of a public institution. As shown in previous works, the reference framework for determining good administration requirements has a quite large number of sources, with different legal force, which can be

structured according to the following three perspectives: the political dimension, the legal dimension and the technical dimension of the good requirements administration. Next we analyze the most important sources of the technical dimension to determine to whom belongs the responsibility for implementing the requirements of good governance.

1.2. Leadership, accountability and responsibility for carrying into effect the good administration standard

As stated before, a key role in the organizational culture is played by the institution leadership, closely followed by its members influencing culture, and culture “leaves its mark mainly on the members’ behavior and attitudes”¹⁴.

From this perspective, next current paper will focus mainly on the idea of responsibility and of responsible persons for carrying into effect the requirements, and less on the liability, but without completely ruling out the latter.

Although in everyday terms accountability and responsibility are defined by each other, it is worth noting their different meanings. Moreover, in the literature, it is widely accepted that the two notions are not identical. They are “two distinct categories, with common features, interacting and determining each other, because it can exist responsibility only between two persons who are responsible and free to choose a certain behavior conforming or non-compliant with the law”¹⁵.

Theorists of Romanian law¹⁶ show that

¹⁴in Stănimir, E.F, *Management of organizational culture in Romanian police - PhD thesis - summary*, “Alexandru Ioan Cuza” Police Academy, Bucharest, 2014, https://www.juridice.ro/wp-content/uploads/2014/07/rezumat_teza_stanimir_emil.pdf, p. 7.

¹⁵Stefan, E.E. 2012. *Legal Liability. Special Consideration of Liability in Administrative Law - PhD Thesis - Summary*, Bucharest, Romania: Nicolae Titulescu University, p.10.

¹⁶Florea, M., 1970. *Responsibility of Social Action*, Bucharest, Romania: Didactic and Pedagogical

each society is governed by a system of values recognized by its members who assume and appropriates it, by internalizing it and living according to its requirements, which makes them to be accepted by society and to live in harmony with it. This assumption of the system of values and of the behavior consistent with it implies the individual responsibility. When the individual departs from this system of values by adopting a non-compliant conduct, the society reacts asking him responding for the non-respect of the value system. This action, therefore, occurs when the individual ceases to be responsible and he becomes liable¹⁷.

In another vision, the responsibility involves two main conditions: the person knows what he is doing and he wants or intends to play a role in the act, while legal liability can be drawn also for unintentional acts (negligence) or for the unintended consequences of his actions¹⁸.

Last but not least, administrative accountability is explained starting from the idea of constraining¹⁹, where it represents the set of measures to prevent antisocial deeds, defend citizens' rights and sanction the violation of norms. However, in the given context, we consider that the idea of constraining has no place than as a last resort, and what should prevail is precisely the idea of responsibility.

In support of the idea that for carrying into effect of the good administration standard requirements it is primarily

necessary fostering responsibility and to stimulate the accounting of those involved, the present approach will comparatively analyze the competences and attributions in the matter belonging on the one hand to the management level within a public institution and on the other hand to the designated persons and to the other staff.

1.3. Responsibility for implementing technical dimension of good administration requirements

As shown in the paper titled *Good Administration Standard – the horizontal dimension of the administrative encoding process*²⁰, the good administration standard also includes a technical dimension, most often expressed as soft-law documents - codes of good practice, recommendations, guidance notes or even standards. The latter is used for the implementation of the first two dimensions since it capitalizes not only the aspirational aspects but also the practical experience and expertise of some renowned specialists.

Thus, a number of good administration requirements are embedded into the international standards formulated at the level of the International Standardization Organization. When carefully heeding how those are designed and formulated, we find that the technical committees reunite experts and practitioners from different countries which seek to identify and establish common requirements for certain areas, requirements that transcend national context in which they arise and can be globally applied. Thus, the standardization process itself requires the establishment of a common reference for entities or organizations with different nationalities, and therefore with different legal regimes, as well as different areas of activity.

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Publishing House, in Vedinaş, V. 2002. *Administrative Law and Political-Administrative Institutions – Practice Manual*, Bucharest, Romania: Lumina Lex Publishing House, p. 581.

¹⁷Vedinaş, V. 2002. *Administrative Law and Political-Administrative Institutions – Practice Manual*, Bucharest, Romania: Lumina Lex Publishing House, p. 581

¹⁸Iorgovan, A., 1996. *Administrative Law Treaty*, Bucharest, Romania: Nemira Publishing House, p. 86
in Balan, E. 2008. *Administrative Institutions*, CH Beck Publishing House, p. 193.

¹⁹Bălan, E., *Administrative Institutions*, Bucharest, Romania: CH Beck Publishing House, p. 193.

²⁰Proceedings of the 10th Annual Conference of the Academic Society of Administrative Sciences: Administrative Encoding - Doctrinal Approaches and Practical Requirements, Oct. 20, 2017, in press.

The main added-value of these standards is that “they present an international consensus on the requirements in a given field and the topics the organization should address; provides guidelines for transforming principles into effective actions; contains the best established practices and disseminates them worldwide for the benefit of the international community”²¹; is a response to a market demand, which is also the source of pressure for their implementation. Applying these standards, including in Romania, is voluntary²². However, their application may become mandatory through the legislation when considerations on the public order, on the life protection, on health and safety of persons, on the environment protection and on the consumer interests would require such a measure. References to the legislation standards should explicitly stipulate that their application is the recommended manner, but is not the only way to demonstrate compliance with the requirements of the respective regulatory acts.

An example of this is the Regulation (EU) 2016/679²³, which in its Art. 43 explicitly recognize the requirements of an ISO standard as legally binding: „the national accreditation body designated under Regulation (EC) No. 765/2008 of the European Parliament and of the Council (1) in accordance with EN-ISO/IEC 17065/2012 standard”.

In this section, we will analyze the requirements of the main standards relevant to public institutions and businesses in

terms of good governance, on the level of responsibility, accountability and leadership within the organizational framework.

2. Top management responsibility

2.1. ISO 9001 on quality management systems

Thereby, the Quality Management Standard ISO 9001 – which represents the framework standard for most management systems - sets out among the key requirements that top-level management has to “demonstrate the leadership and its commitment to the quality management system”²⁴. This requirement must be understood in the light of the general principles for quality management according to the ISO 9000 standard²⁵. According to it, the leadership assumes that leaders at all levels establish the unity between the purpose and the orientation and determine the conditions in which the staff is involved in achieving the organization's objectives on quality.

In this context, the top-level management needs to demonstrate both, the leadership and its commitment for implementing quality management requirements incorporating:

- a) Taking responsibility for the effectiveness of the quality management system;
- b) Ensuring that quality policy and objectives are set for the quality management system and are consistent with the organization's strategic context and direction;
- c) Ensuring that the requirements of the quality management system are integrated into the organization's business processes;
- d) Promoting the process-based approach and the risk-based thinking;

²¹Butnaru, V., *ISO 26000 social responsibility in public institutions - transition from good intentions to good actions*, Public Administration, no. 1, 2013, p. 63.

²²Art. 6 (1) of Law no. 163/2015 on national standardization.

²³Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of individuals with regard to the personal data processing and on the free movement of such data and revoking the Directive 95/46 / EC (General Regulation on data protection).

²⁴Requirement 5 Leadership; 5.1. Leadership and commitment; 5.1.1 General aspects.

²⁵SR ISO 9000: 2015 Quality Management Systems - Fundamental and Vocabulary Principles.

- e) Ensuring that the necessary resources for the quality management system are available;
- f) Communicating the importance of effective quality management and compliance with the requirements of the quality management system;
- g) Ensuring that the quality management system achieves the intended results;
- h) Engaging, directing and supporting individuals to contribute to the effectiveness of the quality management system;
- i) Encourage improvements;
- j) Assisting the other relevant management levels to demonstrate their leadership, as applied according to their areas of responsibility.

It is important to specify that in the standard's understanding, understanding that we will also find in other management system standards which components subscribe to the good administration requirement, the top management²⁶ is the person or group of persons who lead and control at the highest level *an institution*, respectively has the power to delegate authority and provide resources within the organization. We therefore see that management at the highest level in the sense of the standard coincides with the idea of the head of the institution, and even the authorizing officer, as they were defined in the previous sections.

This responsibility materializes in activities through which the institutional objectives are identified and the processes and resources necessary to obtain the desired results are determined. The ensemble of such actions per se represents the quality management system. As we observe, this technical dimension overlaps the legal elements related to the very existence of institutional capacity: the existence of a legitimate purpose, of a social function for the public institutions,

²⁶Requirement 3.1.1 of the ISO 9000: 2015 SR Standard.

which they are called upon to fulfill through the obtained results, when using the existing resources and the powers established by the founding document. These are themselves converging with the quality management system's principle of customer orientation, which in the case of public institutions is represented by the citizens themselves or by the serviced community.

From the perspective of the quality management system, the 5.1 requirement's title itself incorporates two elements - that of establishing the vision and the objectives (leadership), as well as the engagement²⁷ - assuming *the involvement* (participation in an activity, in an event or a situation²⁸), and contribution to activities to meet the common *objectives* set. So the role of the top-level management does not remain a purely formal one, but involves co-participation with all the staff.

In fact, the whole vision of the quality management systems, and beyond, involves engaging, involving, mobilizing and empowering all the personnel for the system to be effective.

The same standard determines the top-level management's responsibility to maintain customer orientation and toward increasing the customer satisfaction. As already shown before in the public institutions case, the customers are citizens themselves and increasing their satisfaction represents precisely the observance of the good administration standard.

Last but not least, it is the responsibility of the top-level management to establish, implement and maintain a quality policy²⁹, to ensure that the responsibilities and authorities for relevant roles are assigned, communicated and

²⁷Requirement 3.1.4 of the SR ISO 9000: 2015 Standard.

²⁸Requirement 3.1.3 of the SR ISO 9000:2015 Standard.

²⁹Requirement 5.2 of the SR ISO 9001:2015 Standard.

understood within the organization³⁰, to determine and make available the necessary resources to establish, implement, maintain and continuously improve the quality management system³¹, to ensure information and training of subordinate staff on quality management and to ensure external communication, at planned intervals to analyze quality management system in the organization to ensure that it remains appropriate, adequate, effective and aligned with the strategic direction of the organization³², to determine and select opportunities for improvement and implement any actions necessary to meet customer requirements and to increase customer satisfaction and make decisions on the management of non-conformities³³.

We emphasize that all these responsibilities in charge of top-level management are at the decision-making level, the highest level of management having between its prerogatives those of establishing and delegating responsibilities respectively. Thus, it is not entirely the top-level management's task of implementing quality policy, but rather that of organizing the framework and monitoring its compliance. This conclusion is supported by the fact that the previous edition of the standard, namely ISO 9001: 2008, provides at the requirement 5.5.2 – it is the top management's obligation to “appoint a management member who, in addition to other responsibilities, has the responsibility and authority to ensure that the processes required for the quality management system are established, implemented and maintained, and which report to it”.

It is worth noting that this type of obligation is consistent with the legal requirements according to which the heads of the institutions appoint those who are

responsible for implementing the various legal requirements.

Regarding the liability that can be incurred at the top-level management, it remains questionable. International standards use the notion of “accountability” or “responsibility” as terminology, which does not receive the exact definition in either standard. In Romanian both terms are translated by responsibility - that rather moral dimension, and not by liability.

However, given that international standards establish good practice models, it is possible to discuss forms of engagement of management accountability for lack of diligence, or failure to take the necessary measures to fulfill the institutional purpose once it has been drawn.

These forms of responsibility depend on the nature of the function held by the top-level management and cover the forms of liability explicitly stated in the section devoted to the responsibility for the implementation of the legal dimension of the requirements of good administration.

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2.2.ISO 31000 on risk management

One of the innovations brought by the 2015 edition of ISO 9001 is related to the risk-based thinking. Since the standard does not elaborate on these issues in detail, nor does it set out explicit responsibilities for the top-level management, we will then refer to the dedicated standard, respectively to the ISO 31000 on risk management respectively. Unlike ISO 9001 which is a certifiable standard since it contains requirements that can be verified and certified, the ISO 31000 is not a certifiable standard as its own title indicates - principles and guidelines. This is a guidance standard.

According to it, risk is the effect of uncertainty on the achievement of objectives, where the effect is a positive and / or negative deviation from expectation, and risk management is the coordinated activities to direct and control

³⁰Requirement 5.3 of the SR ISO 9001:2015 Standard.

³¹Requirement 5.3 in the SR ISO 9001:2015 Standard.

³²Requirement 9.3 in the SR ISO 9001:2015 Standard.

³³Requirement 10 in the SR ISO 9001:2015 Standard.

an organization in terms of risk³⁴.

Under this standard, for the introduction of risk management and to ensure its continued effectiveness, the management of the institution should assume a strong and sustained commitment as well as a strategic and rigorous planning *to meet the commitment at all levels*. “In this sense, leadership should³⁵:

- Define and approve policy on risk management,
- Ensure that the risk management policy and organization culture are harmonized,
- Determine the risk management performance indicators that are aligned with the organization's performance indicators,
- Align the risk management objectives with the organization's objectives and strategies,
- Ensure compliance with legal and regulatory requirements,
- Assign responsibilities and responsibilities at the appropriate levels of the organization,
- Ensure that the necessary resources for risk management are allocated,
- Communicate the benefits of risk management to all stakeholders, and
- Ensure that the organizational framework continues to be appropriate for risk management”.

Requirement 4.3.2 of the Romanian version of the Standard talks about the institution's obligation to ensure that “there are accountability, authority and appropriate competence for risk management, including the implementation and maintenance of the risk management process and the ensuring of the adequacy, effectiveness and of the efficiency of any control means”. We appreciate that this translation is not faithful to the original meaning of the text, since the English

version employs the terminology of “accountability” which, as we have already shown also with respect to the requirements of the ISO 9001 Standard, signifies responsibility. Translating it to accountability is an internal act of each institution that gives legal force to good practice instruments by assimilating them as internal obligations.

Moreover, the terminology used is inconsistent throughout this requirement that it may be satisfied by:

- Identifying risk owners who have *the responsibility* and authority to manage the risks;
- Identifying those *responsible* for developing, implementing and maintaining the organizational framework for risk management;
- Identifying other *responsibilities of individuals at all levels within the organization* for the risk management process.

We note in this context that there is no talk anymore on top-level management, but on the institution's management. However, this terminological inconsistency is not likely to affect the relevance of the text for this analysis.

It is noteworthy, however, that unlike the previous standard, ISO 31000 discusses at the principles level on the integration of risk management in all organizational processes, on the liability or total responsibility for risks³⁶, and also on its full integration into the organization's management structure³⁷. Thus, with the exception of requirement 4.2, the standard text does not only refer to the responsibility for the management and institution management, but to the accountability and responsibility of all staff, applicable to every decision-making process at any level.

³⁴Requirements 2.1 and 2.2 in the SR ISO 31000:2010 Standard.

³⁵Requirement 4.2 in the SR ISO 31000:2010 Standard.

³⁶A3.2 Characteristics of Improved Risk Management - Appendix A of the SR ISO 31000:2010 Standard.

³⁷A3.5 Characteristics of Improved Risk Management - Appendix A of the SR ISO 31000:2010 Standard.

2.3. ISO 37001 on anti-bribery management systems

This is a brand new standard adopted internationally at the end of 2016 and implemented nationwide in April 2017. ISO 37001 itself is a certifiable standard with clear and detailed requirements for implementation.

At the terminological level, ISO 37001 largely retains the concepts already discussed in the analysis of the two standards already presented, but also introduces a new concept - that of a governing body. According to requirement 3.7, this is “a group or body that has ultimate responsibility and authority for the activities, leadership and policies of an *institution*, to which the *top-level management* reports, and through which top management is held accountable.” The standard itself states in the two subsequent notes that not all organizations have a management body separate from top-level management and, where they exist, the governing body may include the board of directors, the committees of the board, the board of supervisors, administrators or supervisors. The standard itself states in the two subsequent notes that not all organizations have a management body separate from top-level management and, where they exist, the governing body may include the board of directors, the committees of the board, the board of supervisors, administrators or supervisors. In the practice of public institutions in Romania, in most cases there is no distinction between the two structures. However, we may indirectly speak of the existence of hierarchical subordination between the institutions and therefore between their governing bodies. There are also examples, such as the National Integrity Agency, where there is a clear demarcation between the two levels - the highest level of management being provided by the agency's president, and the

governing body being represented by the National Integrity Council.

It is noted that in this context appears the clear distinction between responsibility and accountability when the standard addresses how top-level management may be held responsible.

The distinction between the two management structures is important from the perspective of the responsibilities set for each.

Thus, under Requirement 5 - Leadership, under poin 5.1 leadership and commitment, the standard establishes that the governing body must³⁸:

- a) Approve the organization's anti-bribery policy;
- b) Ensure that the organization's strategy and anti-bribery policy are harmonized;
- c) Receive and analyze information on the content and functioning of the anti-bribery management system at planned intervals;
- d) Require that the adequate and appropriate resources necessary for the effective operation of the anti-bribery management system be allocated and designated;
- e) Exercise reasonable supervision over the implementation of the anti-bribery management system of the organization and on its effectiveness, by management at the highest level.

On the other hand, “the top-level management needs to demonstrate leadership and commitment to the anti-bribery management system by³⁹:

- a) Ensuring that the anti-bribery management system, including policy and objectives, is established, implemented, maintained and analyzed to adequately address the organization's bribery risks;
- b) Ensuring that the requirements of the anti-bribery management system are integrated into the organization's processes;
- c) Deploying the adequate and appropriate resources for the effective operation of the

³⁸Requirement 5.1.1. in the SR ISO 37001:2017 Standard.

³⁹Requirement 5.1.2. in the SR ISO 37001:2017 Standard.

anti-bribery management system;

d) Internal and external communication on anti-bribery policy;

e) Internal communication on the importance of effective anti-bribery management and compliance with anti-bribery management system requirements;

f) Ensuring that the anti-bribery management system is adequately designed to achieve its objectives;

g) *Guiding and supporting staff to contribute to the effectiveness of the anti-bribery management system;*

h) Promoting an appropriate anti-bribery culture within the organization;

i) Promoting continuous improvement;

j) *Supporting other relevant management roles to demonstrate their leadership in preventing and detecting bribery, as they apply to their areas of responsibility;*

k) Encouraging the use of reporting procedures for the suspected and real bribery cases;

l) Ensuring that no member of staff is subject to retaliation, discrimination or disciplinary action for reporting in good faith or on reasonable grounds to believe so, actual or suspected breach of the anti-bribery organization's policy or for the refusal to take part in a bribery act, even if that refusal could lead to a loss in business organization (unless the person has participated in the infringement policy);

m) Reporting to the management body (if any), at planned intervals, regarding the content and functioning of the anti-bribery management system and about serious or systematic bribery allegations”.

We note that there are remarkable differences between the responsibilities of the two structures, once the top-level management being called not only to provide a vision of the anti-bribery management system but to actually ensure its implementation.

Similarly there are the provisions of requirement 5.3.1 of the standard according

to which “the top-level management must assume overall responsibility for the implementation and compliance of the anti-bribery management system. It has to ensure that responsibilities and authorities for relevant roles are assigned and communicated within the organization and at all levels”. “Managers at all levels must be responsible for imposing and applying the anti-bribery management system requirements within their department or function. The management body, the top-level management, and all other staff must be responsible for understanding and complying with the requirements of the anti-bribery management system and for their application, depending on their role within the organization”.

It follows that similarly to the other standards considered, even if there are clear responsibilities for the management structures, staffing at all levels is required to effectively implement the anti-bribery management system.

Again, we can talk about disciplinary liability that can be traced in case of non-observance of established responsibilities. Concrete form to incur liability depends on the status of those people carrying out the functions of governing body and top-level management.

In this respect, it should be pointed out that in particular in the case of this standard, non-compliance with established responsibilities - or due diligence obligations - can lead to criminal liability. This is particularly the case for public enterprises, and less for public institutions.

In this respect, provisions of Art. 18⁵ of the Law no. 78/2000⁴⁰ state that the “*culpable breach of a service duty, by failure to do so or its improper performance*, by the director, manager or person in charge of decision or control within an economic operator, if the act has resulted in the commission by a person

⁴⁰Law no. 78/2000 on the prevention, detection and sanctioning of corruption acts.

under his control and acting on behalf of that economic operator of one of the offenses referred to within the Art. 18¹ - 18³, or has resulted in committing a corruption or money laundering offence in connection with European Union funds, shall be punished by imprisonment from 6 months to 3 years or by fine.

We appreciate that the latter sanction measure is disproportionate in relation to the persons - the leaders of the public entities to which it can be applied - in this case it is exclusively about the heads of the economic operators and not the heads of public institutions and authorities, although, theoretically, an act committed by them should present a greater social danger than in the case of economic operators.

We believe, however, that it could be held the criminal liability of the governing bodies in public institutions for the act of negligence in the service⁴¹. Nevertheless, in the light of the Constitutional Court's Decision⁴² which states that the provisions of Art. 298 of the Criminal Code are constitutional to the extent that the phrase "its faulty fulfillment" is understood in their content as "meeting in violation of the law", this solution is questionable.

The fundamental purpose of the requirements of international standards is not, however, to set new ways or liability engagement forms, but on the contrary, to formulate solutions for voluntary compliance by "promoting an appropriate anti-bribery culture within the organization".

2.4.ISO 26000 on social responsibility

According to requirement 2.18 of the standard, social responsibility is the responsibility of an organization for the

⁴¹Article 298 of the New Criminal Code: Infringement by a civil servant of a service duty by its failure or by its improper fulfillment shall be punished by imprisonment from 3 months to 3 years or by fine, if it causes damage or injury to the legitimate rights or interests of a natural or legal person.

⁴²Decision no. 518 of July 6, 2017.

impact of its decisions and activities on society and the environment, through transparent and ethical behaviour that contribute to:

- a) Sustainable development, including health and welfare of the society;
- b) Accounting for the stakeholders' expectations;
- c) Compliance with applicable law and international standards of conduct;
- d) And it is integrated throughout the organization and implemented in its relations.

The standard is one of the few that defines accountability as "the possibility of liability for their own decisions and activities before the governing bodies of the organization, legal authorities and, broadly, before the stakeholders"⁴³.

At the same time, responsibility involves "the obligation of management to respond to the organization's control interests, as well as the organization's obligation to respond to authorities with regard to compliance with laws and regulations"⁴⁴.

Beyond these issues, the standard, which is a guiding, non-certifiable, talks about the need to incorporate social responsibility as an integral part of the institutional strategy, with roles and responsibilities established at all levels. This must be reflected both in all decision-making processes and when implementing its current activities⁴⁵. The standard emphasizes several times that this effort requires both understanding and commitment at all levels of the organization⁴⁶.

It follows from the analysis of this standard that the primary role of the management or leadership of an institution is related to the inclusion of social responsibility as a horizontal dimension in

⁴³Requirement 2.1 in the ISO 26000:2010 Standard.

⁴⁴Requirement 4.2 in the ISO 26000:2010 Standard.

⁴⁵Requirement 3.3.4 in the ISO 26000:2010 Standard.

⁴⁶Requirement 7.4.1 in the ISO 26000:2010 Standard.

all the institution's aspiration documents and in all its processes, as well as the communication thereof both internally and externally.

2.5.ISO 27001 on Information Security Management Systems

According to requirement 5.1 of this standard⁴⁷, management must provide proof of its involvement in the establishment, implementation, operation, monitoring, analysis, maintenance and improvement of the Information Security Management Systems (ISMSs) by:

- a)Establishing an ISMS policy,
- b)Ensuring that information security plans and objectives are set,
- c)Establishing roles and responsibilities for information security,
- d)Communicating within the organization of the importance of meeting the objectives of information security, compliance with information security policy, responsibilities derived from applicable laws and the need for continuous improvement,
- e)Providing sufficient resources to establish, implement, operate, monitor, analyze, maintain and improve ISMS,
- f)Settling criteria for risk acceptance and risk levels acceptable,
- g)Guaranteeing that the internal audits on the ISMS are carried out, and
- h)By leading the analysis of ISMS management.

At the same time, “the top-level management should analyze the organization's ISMS at planned intervals (at least annually) to ensure that it is still appropriate, adequate and effective. This analysis should include the improvement opportunities assessing and the need ISMS changes, including the security policy and objectives of the information security”⁴⁸.

However, in order to be able to fully understand how the responsibilities of the

management and those of the designated staff are structured, it is necessary to correlate the already mentioned clauses with those of ISO 17799 Standard - Code of Practice for Information Security Management.

According to the latter standard, the top-level management must approve, publish and communicate to all employees and important external partners a document on the information security policy. This must be communicated to users throughout the organization in a relevant, accessible and intelligible form for those addressed⁴⁹.

At the same time, “top management must:

- a)Ensure that the objectives of information security are identified, that they meet the organizational requirements and are integrated into the important processes;
- b)Formulate, review and approve the security policy;
- c)Examine the effectiveness of information security policy implementation;
- d)Provide clear guidelines and conspicuous management support for security initiatives;
- e)Provide the necessary resources for information security;
- f)Approve assignment within the organization of roles and responsibilities specific to information security;
- g)Initiate plans and programs to maintain awareness of information security;
- h)Ensure that the implementation of information security measures is coordinated within the organization”⁵⁰.

It follows that similarly to other standards, it is the responsibility of management to formulate information security policy and assign responsibilities, with the implementation being assigned to designated persons and which report directly to the top-level management. Also, as in the other cases, it requires the involvement and the accountability of all

⁴⁷ISO 27001:2005 Standard.

⁴⁸Requirement 7.1 in the ISO 27001:2005 Standard.

⁴⁹Requirement 5.1.5 in the ISO 17799:2005 Standard.

⁵⁰Requirement 6.1.1 in the ISO 17799:2005 Standard.

staff for implementing this system of management.

2.6.ISO 19600 on conformity management systems

In relation to the terminology with which it operates, the ISO 19600 standard represents a combined approach of the concepts from the ISO 9000 series of standards and those of the ISO 37001 Standard, to which it adds his own terminology.

Thus, the conformity within the meaning of this standard is not only the fulfilment of one requirement⁵¹, but the fulfilment of all compliance obligations, where the totality of the obligations consists of compliance requirements that the institution must meet and compliance commitments the institution undertakes to fulfil.

At the same time, the culture of compliance implies incorporating the values, ethics and beliefs that exist throughout the organization and interacting with organization structures and control systems to produce behavioural norms leading to results of conformity.

The standard operates similarly to ISO 37001 by employing the notions of governing body and top-level management, to whom do not draws distinct responsibilities, but on the contrary, requires them collaboration and consultation with employees to develop compliance policy.

Thus, the governing body and the top-level management must demonstrate leadership and commitment to:

- a) Establish and promote the fundamental values of the organization,
- b) Ensure that compliance policies and compliance objectives are set and consistent with the values, objectives and strategy of the organization,
- c) Assure the development and implementation of policies, procedures and

processes for achieving compliance objectives,

d) Provide the availability of the necessary resources for the compliance management system, allocated and assigned,

e) Make certain the integration of the compliance management system requirements in the organization's current processes,

f) Communicate the importance of an effective compliance management system and the importance of complying with the requirements of the compliance management system,

g) Guide and support the individuals to contribute to the effectiveness of the compliance management system,

h) Support other relevant management roles to demonstrate their leadership position, depending on the area of responsibility for compliance applicable to them,

i) Insure the alignment between operational objectives and compliance obligations,

j) Establish and maintain accountability mechanisms, including timely reporting of compliance or non-compliance,

k) Ensure that the compliance management system achieves the desired result (results), and

l) Promote continuous improvement⁵².

The active involvement and supervision by the governing body and the top-level management are an integral part of an effective compliance management system. In many institutions there is a designated compliance officer or a compliance committee that ensures current compliance management. To this end, the top-level management must ensure that responsibilities and authorities for relevant roles are assigned and communicated within the organization. However, this does not remove the management's responsibility at all levels to ensure compliance, with all managers having a role to play in terms of management system

⁵¹Requirement 3.6.11 in the ISO 9000:2015 Standard.

⁵²Requirement 5.1 in the ISO 19600:2014 Standard.

compliance⁵³.

The standard establishes otherwise the management's responsibilities as being different from those of the compliance function, as well as those of the staff. Thus, the fundamental role of management structures is to develop a culture of compliance, which requires an active, visible, consistent and sustained commitment of the governing body and the top-level management to a common standard of behaviour, which is made public and applied in all the activities of the institution.

It is therefore undoubtedly that the leading role of management structures is to express and assume the commitment, namely the political will to implement the requirements of ISO standards, the allocation of resources and the delegation of implementation responsibilities to the staff it coordinates, without exempting them from the responsibility involved in their application.

3. Assigned staff responsibility

3.1. ISO 9001 on quality management systems

According to the same ISO 9001 Standards, in conjunction with the 9000 Standard, management's responsibility to develop quality policies and objectives complements by its efforts to empower designated personnel to implement quality assurance requirements, as well as with the staff commitment. The latter implies⁵⁴ "respect and involvement of all staff at all levels. Recognition, staff empowerment and increasing staff skills facilitate commitment in achieving the organization's quality objectives."

As shown above, in the 2008 edition of ISO 9001, the top-level management must appoint a management member with

responsibility and authority for⁵⁵:

- a) Making sure that the processes required for the quality management system are established, implemented and maintained,
- b) Reporting to the top-level management on the functioning of quality management system and any need for improvement, and
- c) Ensuring that the organization's awareness of customer requirements is promoted.

Although this requirement is not explicitly mentioned in the current version of the standard, the top-level management's obligation to establish roles and responsibilities, as well as that of involving all staff in the quality management system, makes the idea of the existence of a responsible or representative for quality management to continue applicable.

This requirement on the allocation of roles and responsibilities is done in practice, in the absence of explicit requirements in this respect in the standard, in order to allow for the practical adaptation to the specificity of each institution, by including these responsibilities in the internal organizational regulations, as well as in the job descriptions which are annexes to the employment contracts or appointment decisions.

Thus, the non-fulfilment of the quality management responsibilities materializes in the legal framework in the failure to fulfil the responsibilities of the job descriptions, which may entail the disciplinary and civil liability of the responsible person. This form of liability for non-compliance with international standards exceeds the framework they regulate, but it is a way of internalizing and establishing their binding force for staff, once they have been implemented.

3.2. ISO 31000 on risk management

⁵³Requirement 5.3 in the ISO 19600:2014 Standard.

⁵⁴Requirement 2.3.3 in the SR ISO 9000:2015 Standard.

⁵⁵Requirement 5.5.2 in the SR ISO 9001:2008 Standard.

As shown above, with regard to risk management, responsibility for this belongs to all staff for each decision-making process.

In this context, the standard talks about assigning responsibilities and responsibilities to the appropriate levels of the organization⁵⁶. At the same time, it states that “the designated persons fully accept responsibility, have the appropriate skills and have the appropriate resources” to manage the risks. “This can be marked by the fact that all members of an organization are fully aware of the risks, the means of control and the tasks they are responsible for. Typically, this responsibility is specified in data / job description, databases and information systems”⁵⁷.

Last but not least, “organizational decision-making, regardless of the level of importance and significance, involves explicit risk assessment and risk management applied to the most appropriate extent”⁵⁸.

In view of the above, we reiterate the issues already hold in connection with regard to the modalities in which the designated persons could be held liable for non-fulfilment of the risk management obligations.

3.3.ISO 37001 on anti-bribery management systems

With regard to the designated personnel, the ISO 37001 standard uses inspiration from previous editions of ISO 9001, and sets as obligation for top-level management to assign an anti-bribery compliance function, the responsibility and authority for:

a)“Supervising the conception and the implementation by the organization of the

anti-bribery management system;

b)Providing advice and guidance to staff on anti-bribery management system and issues related bribery;

c)Ensuring that the anti-bribery management system complies with the requirements of the current Standard;

d)Reporting on the performance of the anti-bribery management system to the governing body (if any) and top-level management and other compliance functions, as appropriate”⁵⁹.

It must have allocated adequate resources and be attributed, depending on the size of the entity, to one or more persons with appropriate competence, status, authority and independence. The Standard highlights, both in its requirements and in the Annex containing the Guidelines for its use, the importance of direct and prompt access of the anti-bribery compliance function to the governing body and the top-level management in the event that must be reported any aspect or concern related to a bribery act or related to the anti-bribery management system. This implies that there is no need for another manager within the command chain, but that direct communication must be ensured between the compliance function and the management of the institution.

At the same time, the standard states that “when top management delegates authority to decision-makers in situations where there is a risk of bribery greater than what is considered to be low, the organization must establish and maintain a process of decision-making or a set of controls that require the decision-making process and the level of authority of the decision-maker (s) to be appropriate and free from actual or potential conflicts of interest. The standard explicitly states, however, that delegating decision-making does not absolve the top-level management or the governing body from their tasks and

⁵⁶Requirement 4.2 in the SR ISO 31000:2010 Standard.

⁵⁷A3.2 Characteristics of improved risk management - Annex A of the SR ISO 31000:2010 Standard.

⁵⁸A3.3 Characteristics of improved risk management - Annex A of the SR ISO 31000:2010 Standard.

⁵⁹Requirement 5.3.2 in the SR ISO 37001:2017 Standard.

responsibilities, nor does it necessarily transfer the potential legal responsibilities to the delegate staff.

As shown in the other sections, the establishment of these responsibilities for the implementation of the policies and processes necessary for the application of the anti-bribery management system by the subordinated personnel is done through internal documents of the institution and through the job description, the failure to observe of which may entail disciplinary liability, in accordance with the legal provisions applicable to each category of staff.

3.4. ISO 26000 on social responsibility

As far as social responsibility is concerned, the standard does not require management to designate a responsible person, but instead establishes the obligation to assume it as a horizontal dimension of the work of an institution, relevant at all hierarchical levels.

Thus all staff is responsible for the good diligence in fulfilling various requirements that in fact compose the social responsibility. In fact, the standard itself inventories the multitude of requirements that lie under the concept of social responsibility, most of which are elements of a healthy organizational culture, based on values and developed into a state of law.

Thus, establishing forms of liability for non-compliance with social responsibility responsibilities we believe goes beyond the legal sphere, and falls within the scope of sanctions for non-compliance with social standards. Of course, for those social responsibility requirements for which there are explicit legal requirements, they will be applied with priority, and their non-compliance will attract the established legal sanctions.

The latter assertion is of course also applicable to other standards for which there are express legal requirements. The

legal force and their hierarchy is the subject of a separate analysis chapter.

3.5. ISO 27001 on Information Security Management Systems

If policy adoption is the responsibility of top-level management, information security activities should be coordinated by representatives from different areas of the organization, with relevant roles and functions. When, for various reasons, the organization cannot constitute a coordination group, this responsibility will be held by a single manager - a representative of the information security management.

All information security responsibilities must be clearly stated. Persons with security responsibilities may delegate tasks to other persons, but they remain responsible and must determine whether delegated tasks have been performed correctly. So in many institutions it is appropriate that the responsibility for developing and implementing security and that of assisting to identify security measures to be allocated in full to a security information manager⁶⁰.

At the same time, the organization will also ensure that all relevant staff is aware of the relevance and importance of its information security activities and how it contributes to achieving the ISMS objectives⁶¹.

Thus, the aspects indicated in the application of the other standards regarding the ways of liability for non-fulfilment by the designated persons of the information security management requirements remain applicable also this time.

3.6. ISO 19600 on conformity management systems

As far as the structure responsible for conformity management is concerned, it is

⁶⁰Requirement 6.1.3 in the ISO 17799:2005 Standard.

⁶¹Requirement 5.2.2 in the ISO 27001:2005 Standard.

identified by the standard as the compliance function, which, as we have already shown, can be attributed to a person – compliance officer, or to a Compliance Committee⁶².

The responsibilities of this function or structure include⁶³:

- a) Identifying compliance obligations with the support of relevant resources and transposing them into policies, procedures and processes that can be applied,
- b) Integrating compliance obligations into existing policies, procedures and processes,
- c) Providing support for the in-service training programs organization for employees to ensure that all of them are trained on a regular basis,
- d) Promoting the inclusion of compliance responsibilities in job descriptions and in employee performance management processes,
- e) Establishing a system of reporting and documenting compliance,
- f) Developing and implementing information management processes such as complaints and/or feedback through telephone help lines, a warning system and other mechanisms,
- g) Setting compliance performance indicators and monitoring and measuring performance,
- h) Analyzing the performance for identifying the needs of corrective actions,
- i) Identifying compliance risks and managing those compliance risks with third parties such as suppliers, agents, distributors, consultants and contractors,
- j) Ensuring that the compliance management system is reviewed at planned intervals,
- k) Ensuring access to adequate professional counselling and implementing and maintaining the compliance management system,
- l) Providing employees with access to resources on compliance procedures and references, and

m) Providing objective guidance to the organization on compliance issues.

Last but not least, the standard explicitly sets out, unlike the others, specific responsibilities for all employees, including managers, consisting of⁶⁴:

- a) Respecting the organization's compliance obligations that are relevant to their position and attributions,
- b) Participating in training programs on the compliance management system, Employing the compliance resources available as part of the compliance management system, and
- c) Reporting the concerns on compliance, problems and failures.

A careful analysis of the latter provisions clearly reflects the options for their implementation, namely by including responsibilities for implementing the standards in each employee's job descriptions. This approach allows for a form of disciplinary liability, if these requirements are not met.

However, as I have also pointed out in the section on top management, the purpose of these standards is not to create another leveraging lever but to generate and stimulate voluntary compliance in the light of benefits, notably image, but not only, which it brings. Achieving this goal implies that the management's goals and responsibilities have been achieved - those to incorporate this dimension into organizational culture and current policies and processes, which makes compliance with the requirements implicit and does not require coercive mechanisms.

⁶²Requirement 5.3.2 in the ISO 19600:2014 Standard.

⁶³Requirement 5.3.2 in the ISO 19600:2014 Standard.

⁶⁴Requirement 5.3.5 in the ISO 19600:2014 Standard.

4. Conclusions

Recommendations on the configuration of structure responsible for carrying into effect good administration standards

A first discussion on the above analysis is related to the legal force of the documents analyzed. Thus, the legal force embodied in the good governance requirements outlining the content of the technical dimension depends to a large extent on how the implementation of the standards documents is carried out.

Thus, as shown, some ISO standards can become legally binding. When this does not happen, however, it still lays the question of their legal force. The analysis in this paper shows that there are several convergence points where ISO standards in fact reflect the requirements of legal norms. At the same time, a horizontal element of these standards is the analysis of the context and policy formulation in the field. The first requirement is precisely to determine the legal and social framework in which the entity operates, and the second is to formulate the objectives and requirements of the institution in the given context.

Once this policy has been formulated, the standards require the integration of its objectives and requirements into all processes carried out by the entity, in other words, it requires the internalization and internal accountability on the standard's requirements and how they can be implemented in that entity by its specificity. This transposition can only be achieved by integrating the requirements of the standard into the organization and operation rules, the internal regulation, into the code of ethics and professional conduct, and last but not least in the job descriptions of each member of the staff - one of the specific requirements of the standards being precisely the clear communication of objectives and roles to all staff members. Transposition of the requirements of the

standards into the internal documents of each entity comes, on the one hand, to confer to the standards' requirements the legal force of the documents in which they are incorporated, and on the other hand leads to their internalization, which ultimately represents their incorporation into the organizational culture of each public institution.

A legitimate question is related to how the requirements of good administration will be applied, depending on their legal force.

We appreciate that from this point of view, what is required to follow the compliance standard for good administration is a maximum level - that is, it will always be pursued to apply the most detailed requirements and those who establish the highest level of compliance with good administration requirements, irrespective of the legal force of the document in which they are contained. This solution is viable under two essential conditions: the entity has the legal capacity (competence) to implement the maximum standard - in other words, not be forced by law not to adopt or not to implement certain measures, and there should be no contradiction between the legal norm and the requirement established by the standard, in other words, the standard does not deviate from the legal norm in the opposite direction. With these two conditions met, we consider that the application of the maximal standard becomes expression of the principle "who can do more, can also do less".

A. Top management responsibility

Returning to the introductory considerations of this material, regarding the distinction between concepts of accountability and responsibility, we conclude that for the technical dimension the idea of responsibility is more appropriate.

Analyzing the nature of the responsibilities or powers of the management level in public institutions, it is found that they are eminently diligent: at this level, the main obligations established those relate to demonstrating ownership of an expected behavior - assuming good administration as a set of values applicable within the entity that they represent as an expression of the political will assumed, and organizing how this model will be implemented: allocation of resources and establishment of responsible staff or of the designated staff. One last component of the role of the heads of institutions is that of encouraging and determining the staff to adhere to and approach the values system, the direct tool in this sense being the power of their own example - when the institution's manager or leader became its recognized leader. The latter - the leader - is also responsible for the modeling of organizational culture - which is that philosophical code consisting of unwritten values and principles that govern the activity of any entity beyond the regulated requirements, and which comes to provide solutions to ethical dilemmas or to those issues for which the regulated framework has not formulated dedicated solutions.

This role is highlighted including the terminology used in the documents applicable to the third dimension - the technical one. Thus, they unanimously speak of the idea of leadership, where formal functions are only a component, and where the idea of assuming a direction at the highest hierarchical level is actually the essence of the approach. The same documents, although sometimes inaccurately translated, speak exclusively of responsibility. In the specialized language, the English terminology distinguishes between “*responsibility*” - which refers to a responsible person who has a set of obligations (represents the general term); “*accountability*” - which refers to a person who has a set of moral obligations, but who may not be directly

responsible (it is precisely the situation of the leader of an institution which has the moral responsibility on how stemming the activities of their subordinates) and “*liability*” - the legal obligation to make good any damage caused by him or her..

Under these circumstances, it is worth pointing out that the documents devoted to the technical dimension are spoken exclusively by “*responsibility*” and “*accountability*”, and never of “*liability*”. This distinction is explained on the one hand by the semantics of the three words and on the other by the legal force of the documents governing them, and not by the nature of the duties and roles that an entity's leadership has.

We therefore conclude that, for the compliance system for good administration model, the leadership has to assume not only the component of the legal obligation but above all the moral obligation to inspire and determine the coordinated personnel to adhere to and to appropriate this system of values and to implement it, in other words to shape the institution's organizational culture.

B. Staff responsibility

Analysis of previous material reveals that a common feature found in the indicated documents is that one of the leadership's responsibilities is to designate those subordinates assigned for carrying into effect the good administration requirements.

This requirement is justified primarily by the nature of the leadership mandate - most often limited in time, and the powers that it has. Thus, this is in itself a requirement of good administration, which we find in the standards as a requirement for the qualification and training of staff. This requires leadership to ensure that subordinate staff has the necessary knowledge and skills for implementing the requirements of the standard.

At the same time, ISO standards require that those responsible for meeting

the requirements of good administration are duly empowered by leadership to carry out their duties, to report directly to it without other hierarchical intermediaries and to propose remedial measures when required. Last but not least, ISO standards speak of clear communication and assignment of the roles and responsibilities not only to designated persons - a solution that is otherwise not embraced by all standards or which some have given up - but to all staff in an institution.

The latter aspect makes us to return to leadership's role, that of setting up an organizational culture of good administration in which each individual within the entity assumes the value system on a personal level and applies it as part of a whole, within which each one cooperates to achieve the common goals.

Thus, we believe that for a real and efficient implementation of a compliance management system for good administration it is necessary:

(1) For leadership to assume at the level of commitment the objectives and to be the first to contribute to their realization through the personal example, thus configuring the elements of the organizational culture it promotes; organize the subordinate unit and allocate the necessary resources;

(2) To organize specialized structures for compliance management for good administration, in direct subordination of leadership, specifically empowered and recognized at the level of the whole institution, bringing together in a unitary structure the responsible for different requirements so that their carrying into effect to be coherent and concerted, reducing the bureaucratic burden. This structure will have a hierarchical ascendant on all other structures from the point of view of competence, from the perspective of conformity management;

(3) To be clear communication to all staff on the value system that defines the

organizational culture of good administration and an explanation of each person's role in implementing each good administration requirement so that each staff member can consciously assume his role.

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