



4.9.2 Management's Responsibilities

Chapter 4 - General Personnel	Original Effective Date: November 2000
Section: 4.9 Performance Administration	Date Last Reviewed: November 2023
Responsible Entity: Vice President and Chief Financial Officer	Date Last Revised: August 2025

I. Purpose

This policy sets expectations for compliance with institutional policies and laws necessary to conduct business on behalf of the institution.

II. Scope

This policy applies to all individuals employed by UT Health San Antonio who conduct business or make financial decisions on behalf of the institution.

III. Policy

UT Health San Antonio (UTHSA) administrators and managers must have financial/administrative responsibilities and compliance responsibilities along with accountability. Financial and administrative responsibilities relate to the management of the UTHSA resources, such as human, financial, space, buildings and equipment. Compliance responsibilities relate to the adherence to laws, regulations, and policy and procedures, such as state law, gift and grant terms, health regulations, software licensing terms, environmental regulations, and State Comptroller regulations.

A. General Policy

For the purposes of this policy, the head of each UTHSA department, division, center, and Executive Committee office is designated as the Chief Departmental Officer (CDO). This designation includes the President, Vice Presidents, Deans, Directors, Chairs, and Division Chiefs.

With regard to their financial/administrative and compliance responsibilities, Chief Departmental Officers are charged with implementing established policies and procedures so that UTHSA is well managed, is in compliance with applicable laws and regulations, is in sound financial condition, and is fair, rational, and consistent in its administration of policies.

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CDOs may assign certain duties to the Administrator (or the organizational equivalent) to assist them in carrying out their administrative/financial and compliance responsibilities. For the purposes of this policy, these individuals are referred to as Departmental Administrative Officers (DAO). A DAO may serve as the chief business and financial officer for his or her department and be expected to provide business/financial and other advice and assistance to the CDO in fulfilling their management responsibilities.

CDOs are responsible for conducting their departmental business in accordance with the institution's Handbook of Operating Procedures. Departments such as the Office of Faculty and Academic Equal Opportunity/Affirmative Action, Accounting, Purchasing, Internal Audit & Consulting Services, Institutional Compliance & Privacy, Human Resources, Budget and Payroll Services, and Office of Sponsored Programs provide a variety of services to assist all departments. These services include expertise and assistance in interpreting policy and legal requirements, formal and informal training, and compliance monitoring.

B. Responsibilities

Responsibilities consist of activities, goals, functions, and actions for which an individual has to account or to be answerable. A prime area of responsibility for CDOs is to provide reasonable assurance that UTHSA's mission of teaching, research, patient care, and service is fulfilled. By definition, if an individual is responsible for an action, then they are therefore also accountable for that action. Responsibility and accountability are linked. In terms of delegation, management can delegate some of the duties which support their responsibilities but cannot delegate responsibility or accountability.

The President has delegated, through members of the Executive Committee, to Chief Departmental Officers the administrative/financial and compliance responsibilities for operation of their departments. Chief Departmental Officers are responsible and accountable for the following departmental activities:

1. Complying with all applicable laws and regulations, UTHSA policies and procedures, and with the terms and conditions of gifts, endowments, contracts, and grants.
2. Maintaining the sound financial condition of the department.
3. Establishing and maintaining good business practices.
4. Establishing and maintaining an effective system of internal controls including information resources security.
5. Establishing and maintaining an effective system of information management, including records management and the use of technology where appropriate.
6. Establishing appropriate safeguards to protect all of the resources along with the other capital assets of the department (i.e., equipment).

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7. Administering the department consistent with establishing practices and with the principles of fairness, rationality, and due process.

Chief Departmental Officers may assign duties to Departmental Administrative Officers to assist in carrying out administrative and financial responsibilities, compliance responsibilities, as well as mission-related responsibilities.

Neither CDOs or DAOs are expected or required to have in-depth knowledge of the myriad laws, codes, and policies affecting an academic health science center. Administrative and service departments and areas are responsible for providing expertise and guidance in establishing systems and procedures to carry out the above responsibilities and assisting in problem resolution. CDOs are responsible for conducting their departmental business in accordance with the Handbook of Operating Policies.

Written goals and objectives which define accountability, responsibility, and delegated duties should be established by CDOs for their departments or areas so that there are clear expectations and standards against which performance can be evaluated, and employees can receive timely and honest feedback on their performance. Each CDO should develop a departmental operation manual for their department.

IV. Definitions

There are no defined terms used in this Policy.

V. Related References

There are no related documents associated with this Policy.

VI. Review and Approval History

- A. The approving authority of this policy is the University Executive Committee.
- B. The review frequency cycle is set for three years following the last review date, a time period that is not mandated by regulatory, accreditation, or other authority.

Effective Date	Action Taken	Approved By	Date Approved
11/2000	Policy Origination		
10/2010	Policy Revision		
11/2023	Policy Revision / Discretionary Edit		
08/2025	Policy Revision/Discretionary Edit		