Ethics & Morality · GS - IV

Sneha is a Senior Manager working for a big (reputed) hospital chain in a mid-sized city. She has been made in-charge of the new super speciality center that the hospitalis building with state-of-the art equipment and world class medical facilities. The building has been reconstructed and she is starting the process of procurement for various equipment and machines. As the head of the committee responsible for procurement, she has invited bids from all the interested reputed vendors dealing in medical equipment. She notices that her brother, who is a well-known supplier in this domain, has also sent his expression of interest. Since the hospital is privately owned, it is not mandatory for her to select only the lower bidder. Also, she is aware that her brother's company has been facing some financial difficulties and a big supply order will help him recover. At the same time, allocating the contract to her brother might bring charges of favouritism against her and tarnish her image The hospital management trusts her fully and would support any decision of hers.

(a) What should be Sneha's course of action?

(b) How would she justify what she chooses to do?

(c) In this case, how is medical ethics compromised with vested personal interest?

EXAM YEAR	PAPER	SUBJECT
2024	GS - IV	Ethics & Morality

MARKS	WORD LIMIT
20	~250 words

Answer Hint

Conflict of interest, integrity, impartiality, transparency, fairness, procurement ethics, patient welfare, professional accountability, public trust

Model Answer

Introduction

The case presents a clear **conflict of interest** between Sneha's professional responsibility and her personal relationship with her brother. Although the hospital is privately owned, ethical procurement requires objectivity, transparency and primacy of patient welfare over personal considerations.

Body

(a) Course of Action

Sneha should immediately **disclose her relationship with the vendor to the hospital management and procurement committee**. She should recuse herself from evaluating, shortlisting or approving her brother's bid and request an independent committee to assess all bids on predetermined criteria such as quality, safety, technical specifications, after-sales service and cost-effectiveness.

Her brother's company should not be automatically excluded if it is otherwise eligible and competitive. However, Sneha must have no role in deciding its selection.

(b) Justification

This course protects **integrity, impartiality and institutional credibility**. Her brother's financial difficulties cannot ethically justify preferential treatment. Since medical equipment directly affects patient safety and quality of treatment, procurement must be based on objective merit rather than personal relationships.

Recusal also protects Sneha from both actual and perceived favouritism and demonstrates that institutional trust requires accountability rather than unrestricted discretion.

(c) Compromise of Medical Ethics

Vested personal interest can compromise medical ethics by shifting the procurement decision from **patient welfare to private benefit**. If inferior or unsuitable equipment is selected, patients may face risks and the hospital's professional standards may suffer.

It can also undermine **non-maleficence, beneficence, justice and professional integrity**. Preferential procurement may increase costs, reduce competition and erode confidence among employees, patients and other

vendors. Even where the brother's equipment is genuinely superior, failure to disclose the relationship creates a serious ethical concern because impartiality and transparency are compromised.

Conclusion

Sneha should separate **personal relationships from professional responsibilities**. Disclosure, recusal and transparent, merit-based procurement would safeguard patient interests, institutional reputation and her own ethical credibility.

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