

# [Glaxo smithkline consumer healthcare](https://assignbuster.com/glaxo-smithkline-consumer-healthcare/)

Glaxo Smithkline Consumer Healthcare Ltd.(GSKCH) is an Indian associate of GlaxoSmithkline plc, U. K. GSKCH is one of the largest players in the Health Food Drinks Industry in India. The Company, with its manufacturing plants located in Nabha, Rajahmundry and Sonepat. Has a total workforce of over 2700 people, each driven by a spirit of enterprise. Its flagship product, Horlicks, is a highly respected brand which is over 100 years old in India. The Company also manufactures and markets Boost, Viva, Maltova, Biscuits and in addition promotes and distributes number of products in diverse categories, including prominent brands such as Eno, Crocin, Iodex. GSKCH has a strong marketing and distribution network in India comprising over 1800 wholesalers and direct coverage of over 4, 00, 000 retail outlets. . The company has dedicated consumer healthcare R&D center takes research as seriously as marketing excellence, offering cutting-edge capability in both.

## MISSION STATEMENT

## “ Our Global Quest is to improve the quality of human life by enabling people to do more, feel better and live longer.”

## As a Global Organization, we are united in our approach to how we conduct ourselves. For us to take pride in our contribution and make a difference, we all must be in touch with the elements that make us successful.

## OUR SPIRIT

“ We undertake our quest with the enthusiasm of entrepreneurs, excited by the constant search for innovation. We value performance achieved with integrity. We will attain success as a world class leader with each member of our team contributing with passion and an

unmatched sense of urgency”

Our spirit gives us the qualities as individuals and as an organization that will enable us to turn our opportunities into achievements. Our spirit will guide us, keep us focused, and differentiate us from the competition.

## OVERVIEW of company

The first plant was set up at Nabha by M/S Horlicks was being imported and marketed India after being packed in the bottles. The reason why the plant to produce Horlicks was set up in Punjab(Nabha) was because the import of Horlicks was stopped by the government of India, following which the company decided to set up a plant in India itself and the raSw material i. e. milk was available in Punjab. The Maharaja of Nabha laid this foundation stone of the factory. Maharaja Pratap Singh In Nabha on 31st May 1959. The Factory went in for production in March 1960. Barley Malt and Wheat Flour were easily available but the procurement of milk was creating a problem. So to solve it, many milk centres were opened in village around Nabha. Field Officers were appointed to go to the villages for guiding and encouraging farmer to sell milk and tame more milk giving animals for the better income. In the very first year the factory earned profits and about 37% bonus was distributed amongst the employees. Within five years the factories production capacity doubled as the demand for the Horlicks increased and in period of nine years there was four-fold increase in the production of Horlicks. As the demand went on increasing, the production of Horlicks also increased in the Nabha unit. However there was still a gap between the demand and supply therefore, 50% workmen were made permanent and the casuals were enrolled as per the requirement. As the main market for sale was in the south and west of India, the need was felt for establishing small packaging stations of Horlicks is dispatched from Nabha in bulk quantity to Different packaging stations namely Calcutta, Madras, Hyderabad, and Ballabgarh. Only the Calcutta packaging stations, is owned by the company the other packaging stations are on contract.

## COMPANY PROFILE

Company Glaxo Smithkline Consumer Healthcare Ltd.

Head Office Gurgaon, Haryana

Registered Office Nabha(Punjab)

Status Multinational Co.

Sales Turnover (2006) Rs. 12, 143 (millions), 11. 5% increase as .

compared last year

Profit Before Tax (2006) Rs. 1, 905. 6 (millions)

Export Operations to places Bangladesh, Myanmar, Sri Lanka, Middle East, Nepal, Hong Kong, Malaysia and Fiji

## SECOND LARGEST COMPANY

GlaxoSmithkline Consumer Healthcare(GSKCH)is the world’s second largest over-the-counterhealthcare products company and is also ranked second globally in sales of oral-care products. GSK is one of the world’s leading research-based pharmaceutical and healthcare companies, with annual sales of nearly $3billion in 2001 an estimated seven percent of the worlds pharmaceutical market. GSK has over 100, 00 employees worldwide.

Every second, more than 3 doses of vaccines are distributed by GSK.

Every minute, more than 110 prescriptions are written for GSK products.

Every hour, GSK spends more than $45000to find new medicines

## HISTORICAL BACKGROUND

GlaxoSmithKline is a pharmaceutical and healthcare company born out of the merger of two leading international organizations. Smithkline Beecham and Glaxo Welcome. Its global mission is “ To Improve the quality of human life by enabling people to do more, feel better and live longer.”

## THE YEAR 1955

Horlicks a milk product manufactured by Horlicks Ltd. Slough, England was being imported, bottled and sold in India. Due to changes in import policy import stopped.

## THE YEAR 1956-57

A team from the organization visited to explore the possibilities of setting up a plant with the support of Maharaja of Nabha, His highness PRATAP SINGH, and a plant was set up at Nabha.

## THE YEAR 1958

On May 31st 1958, Mr. Pratap Singh laid the foundation stone of the Company at Nabha.

## THE YEAR 1960

On 24th March 1960, the factory went into Production.

## THE YEAR 1969

Horlicks Group disposed off their holding in India and U. K.

To “ BEECHAM GROUP OF INDUSTRIES” which is multinational and owns more than 200 countries engaged in manufacturing of Brylcream , Haircream, Eno fruit salt, Toothpaste , Pure Silvikrin etc.

Immediately after taking the management, Beecham Group shifted its head office from Nabha to Delhi.

## THE YEAR 1979

Beecham India (Pvt.) Ltd. Mumbai merged with Hindustan Milkfood Manufacturers Ltd. and the name was changed to H. M. M. Ltd. Beecham Group Plc.

## THE YEAR 1991

Smithkline U. S. A. merged on September 16, 1991 to form Smithkline Beecham consumer Brands, Plc. with its registered office in the U. K.

H. M. M. became a part of smithkline Beecham Consumer Brands, one of the three sector of Smithkline Consumer Brands Ltd.

## THE YEAR 1994

The name was changed to Smithkline Consumer Healthcare Ltd. to reasset the company’s promise of providing Healthcare to consumers.

The company decided to do away with its toiletry products and sold its brands like Brylcream and Silvikrin to Sara Lee.

## THE YEAR 2000

The Company acquired MALTOVA and VIVA brands of nutritional from Jagjit Industries Ltd. A merger took place between Smithkline Beecham and Glaxo Wellcome and the new company Glaxo Smithkline (GSK) was formed on 27-12-2000

## THE YEAR 2002 :

Change of name took place effective April 23rd, 2002.

## THE YEAR 2004 :

The Bank of Punjab has tied up with the company for facilitating finance on attractive terms to its milk suppliers. The company started packing Horlicks in ½ kg and 1 kg pouches. Packing machines was imported and installed. As the main market for sale of Horlicks was in the South and East India, need was felt for the sale of Horlicks in small units of the country. Therefore packing station was opened at different places. At present Horlicks is dispatched from Nabha in bulk quantity to the following packing stations:

The Company has established a new plant in Sonepat with a capital layout of Rs. 246. 69 crores. This plant is fully automatic using Spray Dry Technology. This plant has the State of Art Plant and machinery, and is biggest Spray Drying Plant in Asia with European GMP and safety standardsThe Company’s manufacturing facilities at Nabha, Sonepat and Rajamundry have received prestigious ISO 14001, ISO 901 certification and its packing facility at Hyderabad and Ballabhgarh continue to maintain the prestigious ISO 9001 certification by SGC, a leading International Certification Company.

Company has also started B2B operations with its leading vendor for the purchase of raw material and service under the area information technology. The company has implemented two ERP packages namely JD Edwards and AS400 and connecting up all its business locations all over the country via satellite link.

## DEPARTMENTAL OVERVIEW

## The various departments in GSKCH LTD. Located at Nabha are:

Human Resource and Administration Department.

Manufacturing Department.

Procurement Department(Milk Sourcing Procurement and Purchase Department)

Quality Assurance Department.

Total Quality Management Department.

Information Resources(IR)

Finance Department

Warehouse Supply Chain Management

Engineering Department.

Environment, Health and Safety Department(EHS).

## INTRODUCTION TO TOPIC

The term labor welfare refers to the facilities provided to workers in and outside the factory premises such as canteen, rest room, recreational facility, housing and all other services that contribute to the wellbeing of workers

In the early stages of industrialization. Welfare activities for factory workers did not receive adequate attention. Employers were not inclined to accept the financial burden of welfare programs. Whenever employers provide for such amenities, it was more with a Paternalistic approach to labor rather than a recogonisation of a worker needs.

Hence state has to intervene and compulsory provisions are thus incorporated in factories, other establishments where manufacturing is carried out.

Welfare is anything that is done for the comfort o and improvement of employees and is provided over and above the wages. Welfare helps in keeping the morale and motivation high so as to retain the employees for longer duration.

Welfare measures need not in monetary terms only but it can be any kind or form. Labor welfare entails all those activities which are directed towards providing the employees with certain facilities and services in addition to wages and salaries.

## OBJECTIVES-

TO PROVIDE BETTER LIFE AND HEALTH TO WORKERS

TO MAKE THE WORKERS HAPPY AND SATISFIED.

TO RELIEVE WORKERS FROM INDUSTRIAL FATIGUE AND TO IMPROVE INTELLECTUAL, CULTURAL AND MATERIAL CONDITIONS OF LIVING OF WORKERS.

The govt. of India has enacted various labor laws, social security and welfare schemes to adequately protect the interest of working class. In case of welfare provisions we have a distribution of statutory and non- statutory measures or voluntary measures-

## STATUTORY MEASURES

WASHING FACILITY

STORING AND DRYING CLOTHES FACILITY

FACILITY FOR SITTING

CANTEENS

SHELTERS, REST ROOMS AND LUNCH ROOMS

CRECHES

WELFARE OFFICERS

## NON- STATUTORY MEASURES

MEDICAL BENEFITS

EDUCATIONAL BENEFITS

HOUSING FACILITY

RECREATIONAL FACILITY

CONSUMER COPERATIVE SHOPS

TRANSPORTATION FACILITY

VOCATIONAL TRAINING

HOLIDAY HOME ANDLEAVE TRAVEL FACILITY NAD MANY MORE.

## Statutory measures in GSK nabha

## Facilities for sitting sec 44

For workers who are to work in a standing position, suitable arrangement for sitting shall be provided in the factories. This enables workers to take advantage of any opportunities for rest which may occur in the course of their work.

In GSK with the workshops there are sitting facilities available like desk and benches at the corner of walls and are there in order to enable worker to take rest because of any opportunity which may occur in course of their work.

## First Aid Appliances:

Sec 45 of factories act states that if a factory possesses 150 workers then there should be a first aid box and cupboards equipped with the required contents in every factory. This should be readily accessible to them during all working hours. The number of such first aid boxes shall not be less than one 150 workers in the factory.

Now in case of GSK there are two ambulances which are available for 24: 7 within the factory premises. There is small dispensary which has trained doctors, two nurses and a compounder during the factory hours. These doctors and medical staff and other medical staff is available during the night hours.

Even there are 10-15 first Aid boxes available in respective departments of HEEP and CFFP i. e. in material department, production department, Administrative buildings, workshops, even in canteen.

## Canteens :

we have in total of 3 canteens in GSK , Hardwar unit. 2 canteens are in HEEP unit and 1 canteen in CFFP unit.

In HEEP we have one staff canteen where executives can have lunch and other two canteens were from shop level to supervisor have lunch. GSK offers subsidized canteen facility to its employees.

One plate of food cost 50 paisa and one tea two snacks costs 25 paisa. Also there is a officer appointed to check on food quality the canteen is run by organization itself.

## 4)Shelters rest room and lunch rooms:

As per section47 of factories act 1948, GSK have rest rooms, small lunch rooms, gardens where employees/workers can rest during lunch hour or free time.

The rooms are cleaned everyday having separate area for drinking water. There is separate water room for water cooler, comfortable table and chairs for rest purpose.

## 5) Crèches facilities:

Under section 48in GSK NABHA, we have the facility of crèche available for women workers employed in the factory.

The crèches is located within the factory premises near the entrance gate rooms are well adequately lighted ventilated, clean and with a trained woman who looks after the children and infants.

The children are given healthy food with milk thrice in a day in morning during noon and once in evening time

## Welfare officers:

AS per sec. 49 GSK is having a separate department which looks after the facilities (welfare) provided to workers.

They keep check on quality of food in canteen, in crèche, also on condition of rooms.

Mr. C. S. SHARMA is head of welfare department in GSK NABHA..

These above statutory measures are followed at very large level in all GSK units admit has lead to building up of a positive, motivated(1130) which can b retained for a longer period.

## Non statutory/voluntary measures-

## 1. Medical benefit at GSK

Medicare is a federally administered health insurance program for people 65 years of age or older, certain disabled individuals that have been receiving Social Security Disability Insurance for 24 months, and for people with End-Stage Renal Disease (permanent kidney failure treated with dialysis or a transplant). Medicare was created as part of the Social Security Act of 1965, and currently provides benefits to over 40 million people. Effective January 1, 2006, Medicare will begin providing outpatient prescription drug benefits to beneficiaries for the first time in the history of the program. Drug coverage and benefit design varies according to the Part D plan selected. Each year, Medicare beneficiaries may elect to sign up for a Medicare plan that includes Part D coverage. During this inaugural year, the open enrollment period runs through May 15, 2006. Additional information is available at www. medicare. gov and through Centers for Medicare and Medicaid Services.

## Educational facility-

GSKprovides VOCATIONAL TRAINING to different students of different field such as MBA-HR and FINANCE, b-tech all.

## Housing facility-

GSK provides housing facility to its employees and has its own township which is called “ BIR NIWAS” in nabha.

Each apartment has set of rooms from 2-5 and employees are charged very minimal amount as rent of house.

With the housing, GSK also provide free electricity (certain units), free water facility and free housing maintence etc.

Also for the retired employed, GSK also provide them free housing facility for first 2 months of retirement, but other are charged Rs. 4000/month as per separate accommodation.

## Recreational facilities-

Not only focusing on productivity, GSK keep their employees engaged in various sports and cultural activities.

We have “ GSK CLUB “ and STADIUM where different activities like sports and swimming are played.

In CONVENTIONAL HALL for picture and plays, cultural activities are conducted.

On the eve of Independence Day, republic day there are various cultural programs, parade are organized.

Not only these, within factory premises, there are inter- unit competitions are conducted like different sports activities running are conducted on national holidays.

For the welfare of women there is ladies club managed by wives of employees.

They have their own work related by weaving, stiching, photocopy, making masalas etc.

Every year, GSK contributes some part of their earning into WOMEN/LADIES CLUB.

## Other Voluntary measures/ Benefits and pay (TotalReward)

TotalReward is how GSK rewards its employees for their contribution to its success. But it’s more than just a salary – it rewards high performance, invests in development, partners with employees to save for the future, and supports employees’ health and wellbeing:

Pay – salary, bonus/sales incentives and recognition awards

Shares & Savings – share plans, savings plans, pension plan

Health & Life – Healthcare Plan, Health MOT, Holidays, Employee Assistance Programme, Tax-free: Plans, Discounts

Development – Performance and Development Plan

The composition of the pay and benefits package and details of individual

benefits schemes are subject to change at the discretion of GSK.

Offering competitive pay that rewards performance is critical to their long-term success. GSK pay programmes are designed to give the opportunity to earn good rewards for good performance and superior rewards for superior performance.

## Key features:

A competitive base salary

An annual bonus which is the main reward for performance, both Company performance and individual performance

A Recognition Program to recognize and reward special achievements and contributions by employees and teams

The composition of the pay and benefits package and details of individual

benefits schemes are subject to change at the discretion of GSK.

## Shares & Savings

The GSK share plans give employees a stake in GSK’s success and the ability to gain in line with the shareholder value them help create. GSK also helps their employees save for the future by contributing to their pension, and offering a range of tax-efficient savings plans and financial education programmes to help them make the most of their TotalReward.

## Key features:

A money purchase Pension Plan in which GSK contributes a minimum of 5% of your pensionable pay and matches employee contributions up to another 5%

A ShareReward plan in which employee receive a free GSK share for every share they buy

Financial Education Programme, providing employee with a wide range of financial planning options

Long-term incentives, if eligible, to give employee a personal stake in GSK’s future

The composition of the pay and benefits package and details of individual

benefits schemes are subject to change at the discretion of GSK

## Health & Life

GSK’s mission is to help people ‘ do more, feel better and live longer’, and this approach is extended to GSK employees. Health & Life plans are designed to make it easier for you to balance your work and personal life and to care for yourself and your family – whatever your circumstances.

Key features:

Healthcare: designed to give employee and their family access to prompt medical treatment when and where they need it

Employee Assistance Programme: designed to offer a helping hand when it comes to organising and dealing with the pressures of work and family life

Tax-free: bikes, childcare, health assessment and holiday: a range of salary sacrifice plans designed to save money in exchange for benefits

Car Allowance: if eligible, a monthly car allowance which employee can use to purchase a car through the scheme or take as cash – the choice is their.

Discounts: a range of discounted products and services designed to support employee health, wealth and well-being

Holidays: employees are entitled to 26 paid personal holiday days each year (increasing to 27 days after five years service and 28 days after 10 years service) plus eight paid public holidays and the opportunity to sacrifice salary to buy five more additional days. If they join during the year (January to December) their entitlement will be prorated . The composition of the pay and benefits package and details of individual

benefits schemes are subject to change at the discretion of GSK.

## Development

Be the best that you can be. At GSK, your Performance and Development Plan helps you understand what you need to do to contribute to GSK’s success, how you need to perform and how to develop your career at GSK.

PDP: helps you identify what you need to do and the behaviours you need to demonstrate to achieve success as well as the areas you need to develop to attain greater reward

The composition of the pay and benefits package and details of individual

benefits schemes are subject to change at the discretion of GSK.

PROOFS

## GSK REIMBURSEMENT RESOURCE CENTER

The BEXXAR® THERAPEUTIC REGIMEN (Tositumomab and Iodine I Tositumomab)

## PATIENT INFORMATION FORM

## Please fax completed Form to: (866) 216-5292 Phone: (800) 745-2967

## \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Patient’s Last Name First Middle Initial Social Security Number Date of Birth

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Street Address City State ZIP Code Home Telephone

## Primary Insurance Secondary Insurance

Company Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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## Please attach GSK Reimbursement Resource Center – Patient Authorization to Release and Disclose Medical Information Form

(If you do not have the patient authorization form, please call (800) 745-2967 to request it. We will not be able to provide

patient-specific reimbursement services without the signed authorization.)

## Patient Medical Information

## Name of Treatment Site where BEXXAR will be administered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Administering treatment site contact name Contact Telephone #

BEXXAR Therapeutic Regimen will be provided [ ] Outpatient Hospital [ ] Inpatient Hospital [ ] Free Standing Facility

Primary Diagnosis (Please provide actual code or codes): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Previous Treatment(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Justification for BEXXAR Therapeutic Regimen (check all that apply)

[ ] Statement of Medical Necessity attached [ ] Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Authorized Prescribing Physician’s Signature Date

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Authorized Prescribing Physician’s Name (Please print)

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## Issues regarding GLAXO SMITHKLINE

## ARTICLE(issue addressed on child healthcare by gsk)

## The Children’s Health Fund’s Referral Management Initiative

Homeless and disadvantaged children are especially vulnerable to illness. They’re more likely to suffer from acute and chronic illnesses such as asthma. Many do not receive vaccinations.

Yet millions of these children cannot get healthcare because there is no transportation, or because there aren’t enough doctors, in disadvantaged communities. Sometimes there are language barriers. These problems all make it difficult for their families to keep hospital appointments.

The Children’s Health Fund provides a Referral Management Initiative (RMI) to help children get the care they need whenever they are referred to a specialist.

The RMI reminds families about doctor appointments by phone and mail. It also provides door-to-door transport to clinics and can even provide translation services if necessary.

When the program began, one in twenty children who were referred to a specialist actually made it to the appointment; now-through the RMI-three out of four do.

GSK is the sole funder of the RMI and has awarded $8 million to date. The program is expanded from New York to Washington, DC, Dallas, Los Angeles, Philadelphia, and South Florida, india. CHF hopes to introduce similar initiatives nationwide.

Irwin Redlener, President of the Children’s Health Fund, comments “ The Children’s Health Fund partnership with GSK has been responsible for positively transforming the lives of tens of thousands of medically underserved children in need of specialist care.”

## ANALYSIS

THE article discuss about the issue of healthcare in different countries like Washington, DC, Dallas, Los Angeles, Philadelphia, and South Florida, india which has been addressed by gsk at large scale by initiating a system of referral management initiative which aims at providing funds and healthcare facility to children in above mentioned countries and this initiative has been applied to the labour working in the same company through same RMI system though an expeniditure of dollar 8 million till date that means GSK is not only concerned about their employees only but they are concerned about the society from which they are coming and hence creating better human resource.

## CASE STUDY(issue regarding allotment of medical benefit to workers aswell as society)

GLOBAL P U B L I C P O L I C Y I S S U E S GlaxoSmithKline’s Position GSK is a leader in:

- Applying computerised statistical tools to facilitate the evaluation of safety information through, for example, the identification of unexpected adverse events that are being reported on a disproportionate basis (safety signals).

- Evaluating and applying pharmacogenetics2 to enhance the risks and benefits of our medicines for patients. As part of our efforts, we collect blood samples for potential DNA analysis in the majority of our Phase I, II and III drug development trials (with ethics committee review .. GSK is in regular dialogue with Regulators (e. g. US FDA, EMEA and Japan’s Ministry of Health, Labour and Welfare) regarding how PGx data should be interpreted and applied on a case by case basis during the development, licensing and post marketing phase of a medicine.

- Supporting the public disclosure of the results (including safety information) from GSK sponsored clinical trials. In 2004 we launched the GSK Clinical Study Register which provides summary results from all GSK sponsored trials (phase I-IV) of marketed medicines completed since the formation of GSK. These summaries include all the serious adverse events and common adverse events reported in the trials.

## Proposal for Enhancing Pharmacovigilance

Data Collection and Evaluation

The tools and processes used in pharmacovigilance are continually evolving. Effective use of these tools, along with improved reporting and communication tools, helps to ensure that potential and actual side effects can be better identified in investigational and marketed medicines. GSK recommends that initiatives to improve the pharmacovigilance framework should include:

- Improved reporting: Collection of data on rare side effects through company or regulatory agency databases serves as an important starting point for possible further action. However, one of the shortcomings of this system is the variable nature of reporting and the quality of reports received. One of the chief difficulties with side effect reporting is ensuring the quality of the databases, and obtaining any necessary follow-up information. Resources are often expended in contacting health care professionals regarding aspects of a report they have filed. In some instances, the reporter is unable or unwilling to provide sufficient detail to allow for a rigorous evaluation of the reported event. GSK would therefore support initiatives aimed at improving pharmacovigilance through improved education of medical students and physicians regarding the quality of ADR reporting. Training modules could explain the role and responsibilities of healthcare professionals in reporting ADRs; how to identify and evaluate an ADR; and how to prepare and submit reports of high quality

Real-life / real-time databases: Pharmacovigilance could be enhanced by using novel technologies to allow companies and regulators to access anonymised data obtained from the use of medicines in clinical practice. For example, information captured systematically in electronic patient records could help identify a potential association between a side effect and a particular medicine or combination of medicines, by facilitating a comparison of side effects be