“We cannot solve problems with the same level of thinking we used when we created them.” Albert Einstein.

What does it take to lift any institution to the next level? This is the question that keeps on being asked in different ways, for generations. Its answers keep on evolving with time and people. The healthcare system of South Africa also ought to go through a transformation, one that will be built on the next level thinking. Every industry experiences an upward or downward disruption every once in a while, and pharmacy is no exception. Every disruption is first perceived, conceived, incubated and then birthed within a particular generation who takes it upon themselves to not leave systems the way they found them.

In 1913, Henry Ford and his team introduced an innovative value add method to the automobile manufacturing industry. He offered a new large scale vehicle manufacturing method using a moving assembly line which allowed work to be taken to workers as opposed to the workers moving around the vehicle to install parts, thus building vehicles faster without assembly technicians moving. The assembly line is used in many industries as a way to make work easy and fast. The realisation of this is a product of leadership that continues to seek solutions not only for the immediate environment, but for the broader community in which they serve.

Pharmacists in hospitals continue to use the same methods that have been in existence for many years to serve the patients. The public health problems keep on increasing, sister industries have been adding on new, faster, safe and efficient ways to serve the patients, including using artificial intelligence to manage and monitor patients. However, there is some degree of drag when it comes to transforming hospital pharmacy practice. Primary Healthcare Clinics (PHC) remain with plans written in beautifully worded and printed documents, but implementation of such things as reengineering of PHC remains but a dream to a certain extent. Systems of pharmacy practice exist with extreme differences between one area to another, largely due to disparities in human resources, geographical complexities and other technical and system challenges. The big question is how do we transform this industry to still deliver pharmaceutical care, but better, faster and safer? And how do we make it satisfying to the one delivering the service?

The essence of this writing is not to offer a one size fits all answer, but a call to action for all pharmacists to think hub, first in your isolated pharmacies, then as collective. Let me offer my first value proposition ideation challenge to you. Do not underestimate the question and therefore miss an opportunity for a new value add. Furthermore, do not underestimate yourself as a leader. Change does not happen by remissness; it happens by taking positive action away from what is preventing it. Failure to participate in the design gallery of your industry is acceptance that you will abide by and in whatever is handed to you. Instead of watching, seek solutions and answers to: what is the value of your practice where you are, collectively as distinct sectors and as a profession and how is it maximised? While engaging on this question, I also invite you to think about the answer in a broad way using the following thinking process for redefining value:

- Maintenance thinking: What have you been doing best that you need to keep doing?
- Elimination thinking: What do you need to stop doing that is no longer serving us or our clients?
- Up scaling: What actions, systems, processes need to be improved or scaled up?
- Introductions: What industry best practices have we observed that we can introduce within our sector?

South Africa still has a two-tiered health care system, with extreme healthcare service inequalities. Solutions to improve the quality of healthcare are fast becoming an emergency. There is a need for pharmacists to champion the way forward and serve the society. Instead of taking the cinematic view of what is unfolding, take up the director role and lead the change towards what is ideal. The challenges that exist requires a new approach, the above model is a fraction of our perceived intervention which could be even better with wider collaborative contribution with tested solutions.