

Lewis: Regina hospital physician culture is both tragedy and farce

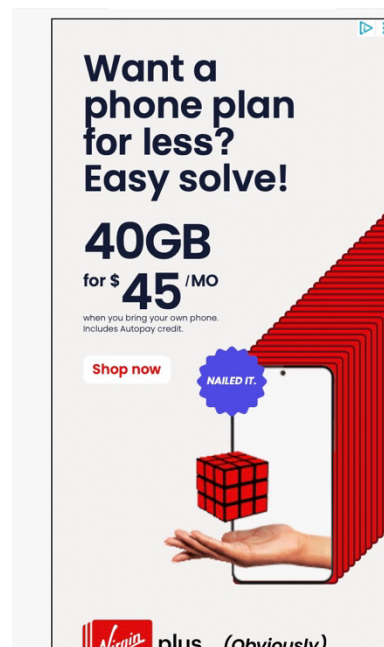
It is embarrassing to have to commission a review to make blindingly obvious recommendations.

By **Steven Lewis**

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A new report describes a litany of dysfunctions among physicians working at Regina General Hospital. Getty Images



Life is short, and based on a lifetime of experience with the genre, I cannot recommend you spend much of it reading reports on health care. But should you find yourself awaiting a root canal, a phone scroll through the 2024-25 External Review of Regina Hospital Physician Culture might make you feel a bit better about your impending chair time.

In a bracing 30 pages, including appendices, the report describes a litany of dysfunctions among physicians working in what is supposed to be the most professionally managed precinct of health care. It's not all bleak. There are no allegations of American-style billing for non-existent surgeries or fistfights in the doctors' lounge.

But it is plenty bad enough. The highlights:

- Physicians in Regina have largely held themselves apart from the mission, vision and values adopted by the SHA (Saskatchewan Health Authority) since its formation in 2017.

- We heard examples of divisions and departments where it appears pursuit of financial compensation has overtaken the priority for high quality accessible care for patients.
- There is no functioning electronic health record, and no database that allows either effective wait list management or workforce planning.
- The Ministry of Health allows interests to plead their cases directly, undermining the SHA mandated to run the system.
- Whether rooted in illness, aging or personality factors, disruptive patterns of behaviour have often been in place for many years and not addressed in a decisive fashion.
- Very few physicians were able to describe how they monitor and improve quality in their services.
- Leaders who have identified problematic behaviours and acted appropriately to protect patients and teams should not be vilified or suffer retribution.
- In some cases, efforts to recruit have been thwarted by physicians to preserve their service volumes despite wait times.
- There are legacy contracts, deals and arrangements that create inequity and inconsistency in negotiating with physicians and groups.

It is embarrassing to have to commission a review to make blindingly obvious recommendations. A report on a school system in similar disarray would recommend having principals who are actually in charge. The schools should teach the students to read and write. They should know what students' needs are and organize to meet them. There should be no side deals and special privileges for a few teachers.

Records should be computerized and generate data to plan and assess performance. Evaluate your staff. Discipline teachers who throw tantrums and abuse their colleagues. Is it any wonder why people misbehave when bad behaviour is not only tolerated, but rewarded?

The Regina physicians have told the SHA to park its mission, vision and values where the sun don't shine for eight years, with zero consequence. So much for a unified provincial system. Medical groups have frozen out new recruits to protect their incomes while wait lists ballooned. Physician leaders who tried to impose some order and civility were abused and left hung out to dry.

Don't for a moment think these problems are unique to Regina. Do a quick search of conflict of interest in Alberta, or pediatric chaos in Kelowna. The only

difference between Regina and dozens of other communities is that Regina's pathologies are now out in the open.

Like all reports written by physicians about physicians, professional self-governance is assumed to be entirely in the public interest, fully compatible with fulfilling public and professional obligations found routinely unfulfilled, and despite acknowledgement that "some physicians have lost the plot of why we are here."

And therein lies the problem. The report says as much: "Physician autonomy is clashing with the broader social contract to ensure quality and safety."

Workers at Starbucks or Toyota can tell you how their work is organized and monitored to produce quality. Most physicians in Regina are tongue-tied. This is what you get when a profession is accountable to itself, and self-evaluation in a data-free environment is standard operating procedure.

A cultural problem? Sounds so much more anthropological than negligence, cowardice, greed, and abdication of responsibility. As a wise physician friend told me years ago, what you permit, you promote. The rot has been called out. What next?

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