

**Requirements for Proof of English Language Proficiency
Max Rady College of Medicine
Postgraduate Medical Education**

Preamble:

Registrants practicing medicine in Manitoba need to be able to communicate clearly with their patients and document their involvement in care in English. Consequently, non-exemptible requirements for registration with CPSM for all practicing classes include that the applicant must establish that they meet English language fluency criteria approved by Council.^{1, 2} This Policy establishes those criteria. For academic and educational registration categories, the CPSM policy defers the decision to the Associate (or Assistant) Dean PGME. This policy provides the basis upon which English Language Proficiency will be assessed for applicants to PGME programs.

1. English language proficiency testing:

1.1. Unless exempt under paragraph 2 of this Policy, applicants for registration are required to complete one of the following English Language Proficiency tests³:

- 1.1.1. International English Language Testing System (IELTS), academic version, within the last twenty (24) months at the time of application and achieved a minimum score of 7.0 in each of the four components in the same sitting.
- 1.1.2. Occupational English Test - Medicine (OET-Medicine) within the last 24 months at the time of application, with a minimum grade of B in each of the four subsets in the same sitting.
- 1.1.3. Canadian English Language Proficiency Index Program-General (CELP-IP-General) test within the last 24 months at the time of application, with a minimum score of 9 in each of the four skills in the same sitting.

1.2. Direct verification of test results may be waived for applicants who are currently in independent practice in a country where English is the first and/or native language,⁴ and who were required to achieve English language proficiency prior to registration with the applicable regulatory body. Waiver under this paragraph requires the following information directly from the regulatory body:

- 1.2.1. confirmation English language proficiency must be demonstrated to enter training or practice in the jurisdiction,
- 1.2.2. a description of the English language proficiency requirement (including the necessary scores on any required English language tests), and

¹ See sections 3.7 and 3.37, as well as 3.10, 3.12, 3.14, 3.57, and 3.64 of the *CPSM General Regulation*.

² Issues such as language proficiency testing are permissive under the Canadian Free Trade Agreement (CFTA). English language proficiency testing is beneficial and preferable.

³ This list aligns with the FMRAC Model Standards for Medical Registration in Canada.

⁴ See list at paragraph 3.

- 1.2.3. a copy of the applicant's test results that were accepted when they entered training or practice in that jurisdiction.
2. English languages proficiency testing exemptions:
 - 2.1. Labour Mobility Applicants
 - 2.1.1. The requirement to demonstrate proficiency in English is fulfilled if the applicant provides proof that they currently hold an equivalent medical license in any province or territory in Canada and demonstrates they practice primarily in English.
 - 2.2. Visiting elective trainees and applicants in a residency or fellowship program at the Manitoba Faculty are exempt from English language testing requirement if the elective is less than 90 days.
 - 2.3. All other applicants⁵ may be exempted from English language proficiency testing if one of the following circumstances apply:
 - 2.3.1. Their undergraduate or postgraduate medical education,⁶ was taken in English in one of the countries that have English as a first and/or native language.⁷
 - 2.3.2. They can provide evidence of appropriate exposure to English language in training and/or practice. Appropriate exposure is defined as the following:
 1. That they have taken the majority (>50%) of their undergraduate or postgraduate medical education in English, AND
 2. The majority (>50%) of patient care provided by the applicant has been in English,
 - OR
 3. Other substantially equivalent evidence of English proficiency in training and practice (e.g., significant clinical teaching, research, and/or academic experience).
3. For the purposes of this Policy, the list of countries where English is a first and/or native language includes, but is not limited to: Australia, Bahamas, Bermuda, British Virgin Islands, Canada, Ireland, New Zealand, Singapore, South Africa, United Kingdom, United States of America, US Virgin Islands, and the Caribbean Islands of Anguilla, Antigua and Barbuda, Barbados, Dominica, Grenada, Grenadines, Jamaica, St. Kitts and Nevis, St. Lucia, St. Vincent, Trinidad and Tobago.

Commentary:

When assessing English language proficiency under paragraph 2.2.2, sections 1 and 2, the following will be considered sufficient:

- Inclusion of their UGME or PGME training program in the list of English programs in FAIMER's World Directory of Medical Schools (<https://www.wdoms.org/>).

⁵ See sections 3.52 and 3.14 of the *CPSM General Regulation*.

⁶ This includes residency and medical fellowship training.

⁷ See the list in paragraph 3.

- Completion of a fellowship of at least two years within a country where English is the first or native language, as defined in section 3.
- Medical graduates who have successfully completed an English language proficiency exam beyond the expiry period, but who have been working in an English-speaking environment, as defined in section 3.

When assessing other equivalent evidence of English proficiency under 2.2.2 section 3, the following will be considered sufficient:

- 2y of successful full-time study in a Canadian English University
- 2y of clinical practice in a University Program within a country where English is the first or native language, as defined in section 3.

