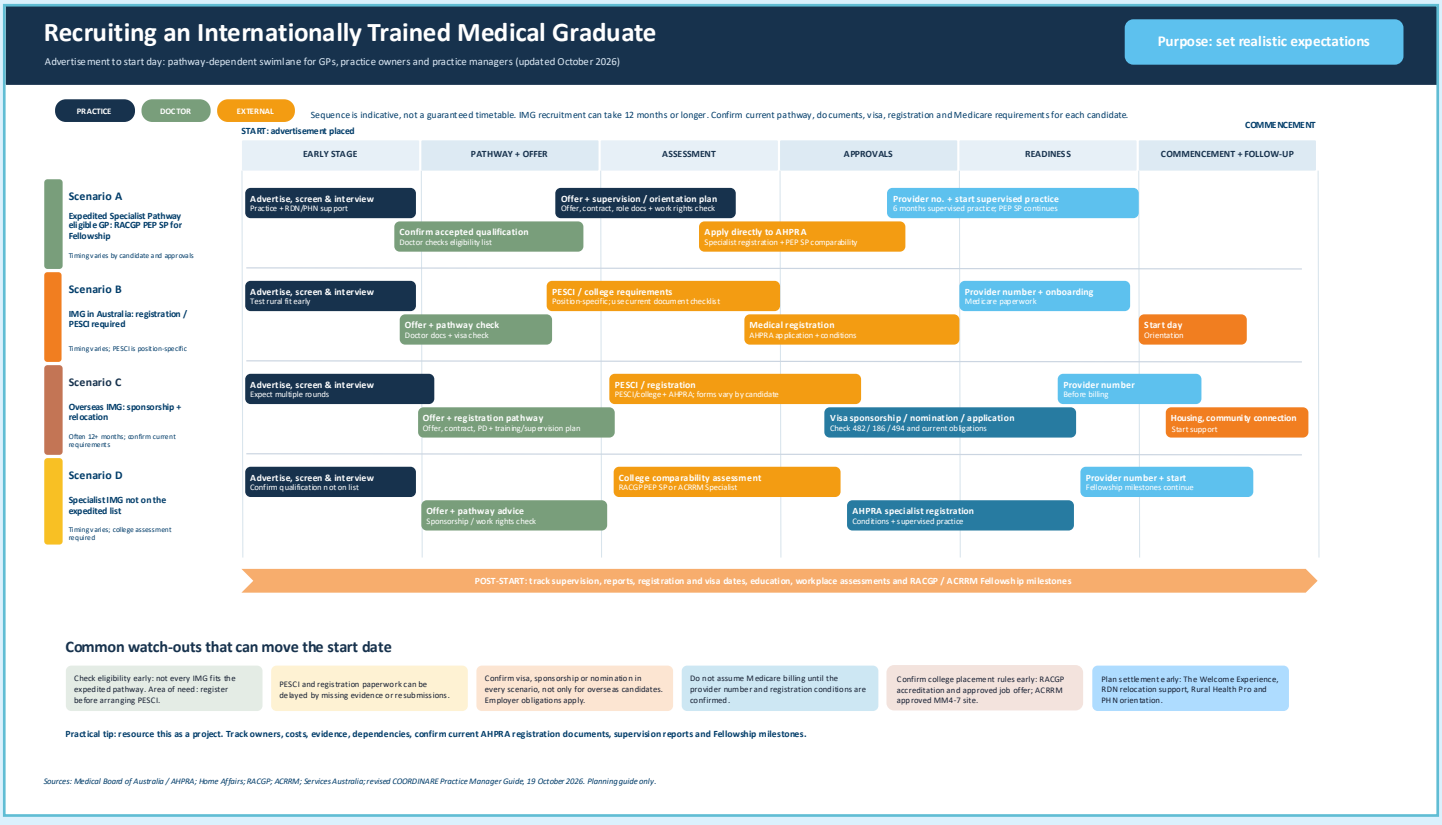


Recruiting an Internationally Trained Medical Graduate

Practice manager guide: advertisement to start day

Purpose

This guide is designed to help GPs, practice owners and practice managers understand the key steps, dependencies, resources and likely pressure points when recruiting an internationally trained medical graduate. It is a planning support document, not legal, migration, registration or Medicare advice.



Version date: 19 October 2026

Suggested review cycle: check links, forms, fees, visa settings and pathway requirements before each use, as policy and eligibility settings can change.

Quick use guide

Use this document alongside the one-page infographic. The infographic gives practices the “at a glance” view. This guide gives the detail behind each stage and points practices to current resources, tools and agencies.

- Use Section 1 to identify the most likely registration pathway before discussing a start date.
- Use Section 2 to project-manage the steps from advertisement to commencement.
- Use Section 3 to understand scenario-specific differences.
- Use Section 4 to access links, tools and resources.
- Use Section 5 as a practical checklist and tracker template.
- Use Section 6 to identify common risks early and apply practical mitigation actions before delays affect the candidate’s start date or longer-term retention.

Key planning message

The preferred candidate stage is not the end of recruitment. For an IMG, it is often the start of the registration, visa, provider number and relocation project. Practice managers should recognise that IMG recruitment commonly involves three separate but related approval processes:

- Medical registration - Managed through the Medical Board of Australia and AHPRA.
- **Work rights and immigration** - Managed through the Department of Home Affairs and may involve existing work rights, permanent residency, citizenship or an employer-sponsored visa pathway.
- **Medicare eligibility** - Managed through Services Australia and includes Medicare provider number and prescriber number requirements.

Approval in one stream does not automatically mean approval in another. Registration, work rights and Medicare eligibility should each be confirmed before commencement.

1. Identify the likely pathway early

The Medical Board of Australia explains that different pathways apply to internationally qualified medical practitioners depending on their qualifications, registration type and whether they intend to work in Australia temporarily or long term. Each pathway involves assessment and has different eligibility requirements. The Medical Board recommends using its self-assessment tool, then gathering pathway-specific documents and applying through the AHPRA practitioner portal.

Likely scenario	Who it may apply to	What it means	Practice planning implication
Expedited Specialist Pathway eligible GP	Specialist IMG with a qualification on the Medical Board accepted qualifications list. For general practice, the accepted list includes Ireland, New Zealand and United Kingdom qualification categories as at 1 July 2026.	Apply directly to AHPRA for specialist registration. Six months of supervised practice, cultural safety education, orientation and workplace-based assessments are required while registered on this pathway.	Check accepted qualification list before advertising or shortlisting. Confirm whether the candidate is genuinely eligible before planning a short start date.
Specialist pathway, not expedited	Specialist IMG with an international specialist medical qualification that is not on the expedited accepted list.	Relevant specialist college comparability assessment may be required. For general practice, this may involve RACGP or ACRRM pathway advice.	Allow more time. Do not assume the expedited pathway applies because the candidate is already a specialist overseas.
Competent Authority or Standard pathway	IMG seeking provisional or limited registration rather than specialist registration, including some candidates already in Australia.	May require PESCI for general practice. The Board states IMGs on the Competent Authority or Standard pathway applying for provisional or limited registration to work in general practice are required to have a PESCI.	PESCI is position-specific. Start date depends on documentation, interview availability, outcome and AHPRA registration.
Area of need or other position-specific pathway	Candidate pathway depends on role, location, experience, registration type and workforce need.	AHPRA advises area of need applicants for general practice to apply for registration before arranging PESCI so their general practice or primary care experience can be assessed.	Seek pathway advice early. The exact order of steps can differ by registration type.

Useful starting points: Medical Board IMG pathways | AHPRA employer and recruiter IMG resources | Expedited Specialist Pathway accepted qualification list

2. End-to-end recruitment stages

The stages below are deliberately practical. They are written for practices managing the process, not only for the doctor. Any timing shown is for planning only, not a service standard or guarantee. Current regulator, college, visa and provider-number timeframes should be checked for each candidate.

#	Stage	Lead	Practice actions	Planning timeframe	Watch-outs
1	Advertise and source candidates	Practice	Advertise through usual channels and contact RDN early for recruitment support where relevant. Consider free rural job listing options, including listing South Eastern NSW vacancies on the SENSW Places page. Make the location, supervision, working arrangements, community support and pathway expectations clear.	Practice-specific; may be prolonged in thin rural labour markets	Do not promise a recruitment timeframe. Record advertising channels, responses and dates so the practice can evidence recruitment activity where required.
2	Screen applications and test rural fit	Practice, recruitment support and candidate	Screen for qualification pathway, current location, work rights, Australian experience, registration status, supervision needs and genuine interest in the town or region.	2 to 6 weeks	Avoid progressing candidates before confirming basic eligibility and location expectations. Time zone, internet and language barriers can affect interviews.
3	Preferred candidate and conditional offer	Practice and candidate	Issue a conditional offer that clearly states commencement depends on registration, visa or work rights, provider number and any other required approvals. Complete due diligence before finalising the offer, including calling referees, checking stated qualifications and confirming who is responsible for each document. If the candidate is already in Australia and relocating from a metro region, consider linking them with RDN to explore whether a site grant or relocation support may be relevant. Agree in writing who will pay application, assessment, migration, relocation and professional costs before applications are lodged.	1 to 2 weeks	A contract alone does not make the doctor start ready. Reference checks, registration eligibility, work rights, provider number requirements and supervision arrangements should be treated as part of the same regulatory project.

#	Stage	Lead	Practice actions	Planning timeframe	Watch-outs
4	Confirm pathway and documentation	Candidate with practice support	Use Medical Board or college resources to confirm pathway. Gather identity, qualifications, primary source verification, CV, supervised practice plan, position description and other evidence as required. Where the applicant is relocating, consider linking them early with the Welcome Experience local connector for your region; this support can help make relocation smoother for the candidate and their family where relevant.	Variable	Incomplete or inconsistent documents are a common source of delay. Keep a version-controlled document checklist.
5	PESCI if required	Candidate, practice, PESCI provider	Confirm the PESCI provider's current application checklist. For RACGP PESCI applications, current requirements include the RACGP CV template, applicant declaration, PESCI position description and the AHPRA SPPA-30 - Supervised practice plan and principal supervisor's agreement for IMGs with limited or provisional registration. This is completed by the IMG and proposed supervisor(s), where required, to document the proposed supervision arrangements. Registration documents are separate: for example, ALPS-30 is the form title historically used for applications for limited registration for postgraduate training or supervised practice. Registration applications are generally completed through the AHPRA practitioner portal. Check the current form, version and pathway requirements before submission. Consider RDN Site and PESCI Observation Grant information where relevant and confirm eligibility before the visit begins.	Provider-dependent; confirm current scheduling after a complete application	PESCI is position-specific. Missing, inconsistent or superseded documents can delay assessment. Do not treat any indicative timeframe as a guarantee.
6	AHPRA registration	Candidate, AHPRA, Medical Board and practice where applicable	Candidate applies through the AHPRA practitioner portal. Employers or representatives may support but must not assume they are authorised representatives unless nominated and linked appropriately. The practice may need to supply position, supervision, employment and workplace documents. Keep signed final versions together and track requests for further information.	Variable	Do not set a firm start date until registration type and any conditions are understood.

#	Stage	Lead	Practice actions	Planning timeframe	Watch-outs
7	Visa or work rights	Practice, candidate and migration adviser if used	Verify existing work rights through VEVO where applicable. If sponsorship is needed, check current Home Affairs options, including the Skills in Demand visa (subclass 482), Employer Nomination Scheme (subclass 186) and Skilled Employer Sponsored Regional visa (subclass 494), subject to occupation, nomination, salary, location and candidate eligibility. Use a registered migration agent or Australian legal practitioner where advice is required.	Variable	Visa eligibility and employer obligations vary. Labour market testing, nomination, salary and sponsorship requirements may apply. Do not copy a previous case without rechecking current rules.
8	Medicare provider and prescriber number	Candidate and practice	Use the Services Australia process to apply for an initial or additional provider number and/or prescriber number. HPOS can be used, with PRODA needed for online access. Support the candidate to become aware of and understand Medicare in Australia by linking them to the Understanding Medicare Provider Handbook.	Submit before proposed location start date	Provider and prescriber numbers are required to claim under MBS and PBS. Do not assume billing can commence without confirmation.
9	Relocation and settlement	Practice, doctor, family and local support services	Plan accommodation, schooling or childcare, partner employment, local orientation, cultural connections and social connections early. For MM2–7 locations, link eligible candidates with the Welcome Experience local connector for relocation and settlement support, including housing, schooling and partner employment where relevant. Also consider directing candidates to RDN relocation grants if applicable. MM1 practices may need to consider how they can assist the candidate with similar relocation and settlement support.	2 to 12 weeks and may run in parallel	Housing availability and family settlement can affect start dates and retention.
10	Start day and first 90 days	Practice, supervisor and doctor	Confirm registration conditions, supervision plan, orientation, billing setup, prescribing, clinical systems, local referral pathways and escalation supports. Share COORDINARE's GP Orientation guide with the candidate and schedule an orientation visit with the practice's Health Coordination Consultant (HCC). Establish a post-start compliance calendar for supervision reviews, workplace reports, registration renewals, college milestones, provider-number changes and visa expiry dates.	First day to 3 months after start	Commencement is not the end point. Early orientation and documented support reduce risk.

#	Stage	Lead	Practice actions	Planning timeframe	Watch-outs
11	Orientation to working in Australia	Practice, supervisor and doctor	Use the Australian Government Health Workforce Taskforce resources, including the medical practitioner pathway guides and Working in Australia orientation units, to support the doctor and supervisor after recruitment.	Before start and first 90 days	Orientation should cover the Australian health system, Medicare, prescribing, cultural safety, privacy, communication and local practice systems, not just the practice's IT and billing setup.

3. Scenario-specific guidance

Scenario A: Expedited Specialist Pathway eligible GP

Use this scenario when the doctor appears to be a specialist international medical graduate with a general practice qualification on the Medical Board accepted qualifications list. As at 1 July 2026, general practice is included in the accepted specialties and accepted qualification countries for general practice include Ireland, New Zealand and the United Kingdom. Always check the current accepted list before relying on this pathway.

- **Practice focus:** confirm the doctor is actually eligible, prepare a strong role description, clarify supervision and orientation, and avoid overpromising a start date before registration and provider number requirements are confirmed.
- **Candidate focus:** use AHPRA and Medical Board resources to apply for specialist registration and gather pathway-specific documents.
- **After commencement:** the Medical Board states this pathway includes six months of supervised practice, cultural safety education, orientation and workplace-based assessments.
- **Sponsorship check:** even if the pathway is primarily registration-focused, confirm early whether the candidate needs employer sponsorship, a new visa, a nomination update or evidence of work rights before agreeing to a start date.



Watch-out

Expedited does not mean instant. It removes some assessment steps for eligible qualifications, but registration, supervised practice requirements, Medicare arrangements, work rights and relocation still need active management.

Scenario B: IMG already in Australia requiring PESCI or registration steps

Use this scenario where the candidate is already in Australia or has work rights but still needs registration or position-specific assessment before working in general practice. The Medical Board states that IMGs on the Competent Authority or Standard pathway who apply for provisional or limited registration to work in general practice are required to have a PESCI.

- **Practice focus:** make sure the position description, supervisor agreement and supervised practice arrangements are ready before the candidate submits key applications.
- **Candidate focus:** confirm the pathway, complete primary source verification where required and prepare for PESCI if needed.
- **Planning implication:** the registration and PESCI sequence may affect when the practice can commit to a start day.
- **Sponsorship check:** being in Australia does not automatically remove visa or sponsorship considerations. Confirm the candidate's current visa conditions, whether a sponsor or nomination is required, and any expiry dates or work limitations.



Watch-out

PESCI is usually specific to the proposed position. If the role or practice substantially changes, seek advice before assuming an existing PESCI outcome is transferable.

Scenario C: Overseas IMG requiring sponsorship and relocation

Use this scenario where the preferred candidate is overseas and requires the practice to support visa sponsorship or work-rights processes. Home Affairs states that some immigration pathways may require the employer to become an approved sponsor, nominate a position and meet sponsorship obligations. Always refer to current Department of Home Affairs guidance as visa requirements and pathways can change.

- **Practice focus:** seek migration advice if needed, understand employer obligations, factor in labour market testing if applicable and confirm who pays which costs.
- **Candidate focus:** complete registration steps, provide visa documentation and plan travel and settlement.
- **Settlement focus:** start housing, schooling, partner employment and social connection planning early. This should not wait until the visa is finalised.



Watch-out

Visa, registration and provider number steps can be interdependent. The Medical Board states that visa applications are made to the Department of Home Affairs and notes that visa applications without an AHPRA registration number may be delayed.

3.1 Pathways to RACGP or ACRRM Fellowship

Registration and Fellowship are related but separate milestones. The practice should confirm whether the doctor is entering a college Fellowship program, which program applies, and what the practice must provide as an approved workplace, training post or supervised practice location.

RACGP Fellowship pathways for IMGs

For specialist international medical graduates with a recognised overseas general practice specialist qualification, the RACGP Practice Experience Program – Specialist Stream (PEP SP) is the pathway to Fellowship of the RACGP (FRACGP) through the Medical Board Specialist Pathway. The RACGP first completes a comparability assessment. Eligible applicants may be assessed as substantially comparable or partially comparable.

RACGP step		What happens	Practice manager involvement
1	Check the Medical Board pathway	Confirm whether the doctor is using the Specialist Pathway or is eligible for the Medical Board Expedited Specialist Pathway.	Candidate, with practice awareness
2	Apply for RACGP comparability assessment	RACGP assesses the doctor's overseas training, qualifications, assessment, clinical experience, continuity of practice and professional development.	Candidate
3	Secure an RACGP-approved job offer	The role must meet RACGP requirements. The PEP SP application information states the practice must be accredited against RACGP Standards, provide comprehensive Australian general practice and meet placement location requirements.	Candidate and practice
4	Apply for medical registration	Apply to the Medical Board of Australia/AHPRA for the relevant registration.	Candidate
5	Complete PEP SP application and entry steps	Accept the program agreement, complete required provider number documentation and submit evidence of registration and work rights at the relevant application stage.	Candidate, supported by practice
6	Participate in PEP SP	Complete required general practice experience, core units and workplace-based assessments. RACGP states supervision is required until Fellowship is awarded.	Candidate, supervisor and practice
7	Complete exams where required	The RACGP pathway chart identifies exam enrolment for partially comparable participants once eligibility requirements are met.	Candidate
8	Apply for FRACGP	Apply for Fellowship once all program and Fellowship requirements are met.	Candidate

RACGP practice manager watch-outs

- Confirm the job offer and practice meet RACGP approval requirements before presenting the role as a Fellowship placement.
- Document supervisor availability, practice accreditation and any required workplace-based assessment support.
- Do not assume every overseas-trained GP belongs in PEP SP. An applicant assessed as not comparable may need to consider another eligible Fellowship route, such as the Fellowship Support Program, Australian General Practice Training or Remote Vocational Training Scheme.
- The Medical Board Expedited Specialist Pathway provides a route to specialist registration. RACGP separately notes that PEP SP is recommended for specialist GPs seeking RACGP Fellowship and its support and guidance.

RACGP links: PEP Specialist overview | PEP Specialist pathway chart | PEP Specialist application | RACGP IMG Practice Experience Program overview

ACRRM Fellowship pathways for IMGs

ACRRM identifies several IMG pathway options. Specialist IMGs with an ACRRM-recognised overseas specialist qualification may seek assessment through the ACRRM Specialist Pathway, which leads to specialist registration in general practice and Fellowship of ACRRM (FACRRM). Non-specialist IMGs may first use the Standard Pathway and PESCI to obtain limited or provisional registration. ACRRM states that, after successful Standard Pathway assessment and 12 months of practice in Australia, a doctor may be eligible to train towards FACRRM through the Independent Pathway.

ACRRM step		What happens	Practice manager involvement
1	Identify the pathway	Check ACRRM pathway options and whether the doctor has a specialist qualification on ACRRM's Codified List.	Candidate and practice
2	Specialist Pathway assessment, if applicable	ACRRM assesses the specialist IMG's training and experience for comparability with FACRRM.	Candidate
3	Confirm the proposed rural placement	The ACRRM Specialist Pathway page states doctors on this pathway must work in an ACRRM-approved rural health service in an MM4–7 location so rural generalist competencies can be assessed.	Candidate and practice
4	Complete registration and program requirements	Complete the registration, supervision, assessment and other requirements advised by ACRRM and the Medical Board.	Candidate, supervisor and practice
5	Standard Pathway/PESCI route, if applicable	A non-specialist IMG may undertake PESCI and seek limited or provisional registration for the nominated position.	Candidate and practice
6	Move into an eligible Fellowship training pathway	Following Standard Pathway assessment and 12 months of Australian practice, the doctor may be eligible for the ACRRM Independent Pathway. ACRRM also lists AGPT, Independent Pathway, Rural Generalist Training Scheme and RVTS as Fellowship training pathways.	Candidate, with practice/ training-post support
7	Complete training and assessment	Meet the applicable ACRRM curriculum, training, workplace and assessment requirements.	Candidate, supervisor and accredited training post
8	Achieve FACRRM	Fellowship leads to specialist registration as a general practitioner.	Candidate

ACRRM practice manager watch-outs

- Check whether the practice or health service must be approved by ACRRM and whether the location meets the pathway's Modified Monash requirements.
- Confirm supervisors and the post meet ACRRM standards before promising that time in the position will count towards Fellowship.
- Distinguish the Specialist Pathway from training pathways. The correct route depends on the doctor's qualification, comparability outcome and registration status.
- Build education, assessment and supervision time into the workforce plan after the doctor starts.

ACRRM links: IMG pathway options | ACRRM Specialist Pathway | ACRRM Rural Generalist Fellowship

3.2 What the practice should expect: workload, cost and support

IMG recruitment can be a lengthy, high-effort project for a practice manager because it may require coordination across the candidate, practice principals, supervisors and multiple external agencies. The process can also involve direct costs, staff time and ongoing compliance responsibilities. Treat it as a resourced project rather than an ordinary appointment.

- Nominate one internal coordinator and one back-up, with protected time and a shared tracker.
- Agree a cost plan early. Record who pays registration, college, PESCI, visa, migration, relocation, supervision and training-related costs. Check current RDN and other eligible support or grant programs, noting that availability and eligibility can change.
- Use person-to-person support as well as written guidance. Contact RDN, the relevant college, AHPRA, the PESCI provider, Home Affairs or a registered migration professional according to the issue.
- Build a post-commencement compliance calendar. Registration conditions, supervision levels, reports, college requirements, renewals and Medicare or visa changes may continue after the doctor starts.

PESCI and registration document pack

Create a candidate-specific document register rather than a fixed universal pack. For an RACGP PESCI application, current requirements include the RACGP CV template, applicant declaration, PESCI position description and the AHPRA SPPA-30 - Supervised practice plan and principal supervisor's agreement for IMGs with limited or provisional registration. The IMG and proposed supervisor(s) complete this form, where required, to document the proposed supervision arrangements. Registration applications are separate and depend on the pathway; for example, ALPS-30 is the form title historically used for applications for limited registration for postgraduate training or supervised practice. Current registration applications are generally completed through the AHPRA practitioner portal, and requirements depend on the registration pathway. Confirm the current checklist, online process and templates directly with the responsible organisation because requirements differ between candidates and may change.

4. Useful tools, links and resources

This directory is designed for the practice manager or practice owner to keep open while project-managing the recruitment process. Links should be checked before each use because requirements and forms can change.

Topic	Resource	Use it for	Link
Pathway check	Medical Board IMG pathways	Use to understand the major IMG registration pathways and access the registration self-assessment tool.	Open resource
Pathway check	AHPRA employer and recruiter IMG resources	Resources and videos for employers and recruiters helping IMGs apply for the right registration type and pathway.	Open resource
Expedited pathway	Expedited Specialist Pathway	Use for pathway overview, requirements and registration steps for eligible specialist IMGs.	Open resource
Expedited pathway	Accepted qualification list	Use to confirm whether the candidate's specialist qualification is on the accepted list before assuming expedited eligibility.	Open resource
Specialist pathway	Medical Board Specialist pathway	Use where the doctor has an overseas specialist qualification that is not on the expedited accepted list.	Open resource
PESCI	Medical Board PESCI page	Explains who needs a PESCI, when to arrange it and how the Board uses the information.	Open resource
PESCI	RACGP PESCI	RACGP information about PESCI, including application, fees, resources, policies and FAQs.	Open resource
PESCI	RACGP apply for PESCI	Application requirements include items such as a CV template, position description template and supervised practice plan where required.	Open resource
College pathway	ACRRM international medical graduates	ACRRM information for IMGs wanting to practice rural and remote medicine in Australia.	Open resource
College pathway	ACRRM pathway options	Overview of ACRRM specialist, Standard pathway (PESCI) and Independent Pathway options.	Open resource
Medicare	Services Australia HW019	Application form page for an initial or additional Medicare provider number and/or prescriber number for a medical practitioner.	Open resource

Topic	Resource	Use it for	Link
Medicare	Provider and prescriber numbers	Services Australia confirms provider and prescriber numbers are required to claim under MBS and PBS.	Open resource
Visa and sponsorship	Home Affairs employer options	Use to understand options for employers, ImmiAccount, sponsorship, nomination and sponsored visa types.	Open resource
Visa and sponsorship	Home Affairs sponsoring workers	Use to understand sponsor obligations, safeguards, income thresholds, skilled occupation list and labour market testing requirements.	Open resource
Visa and sponsorship	Skills in Demand visa information	Current information about employer-sponsored skilled migration pathways and sponsorship requirements.	Open resource
Visa and sponsorship	Visa options for skilled sponsored workers	Compare employer-sponsored visa options and understand current sponsorship arrangements.	Open resource
Skilled migration	Skilled occupation list	Confirm whether an occupation remains eligible under current skilled migration settings.	Open resource
Work rights	VEVO (Visa Entitlement Verification Online)	Verify visa status and work rights where applicable.	Open resource
Recruitment support	Rural Doctors Network GP recruitment	RDN offers free end-to-end recruitment support for rural medical practices in remote, rural and regional NSW and ACCHS.	Open resource
Advertising	Rural Health Pro jobs	Use the Rural Health Pro jobs board to advertise GP, nursing, allied health and other rural NSW health workforce vacancies.	Open resource
Advertising and relocation	SENSW Places page	Use to promote South Eastern NSW GP and health workforce vacancies, showcase local communities and point candidates to relocation support information.	Open resource
Relocation and settlement	The Welcome Experience	Free NSW Government support for eligible essential workers and their families moving to regional NSW, including local connection, services and settlement support.	Open resource
Orientation	COORDINARE GP Orientation Guide	Share with new GPs to support orientation to South Eastern NSW, local systems, referral pathways and regional primary care context.	Open resource
Orientation	COORDINARE orientation visit request	Use to request an orientation visit with the practice's HCC so the candidate can be introduced to local supports and COORDINARE resources.	Open resource
National IMG resources	Health Workforce Taskforce IMG resources	Australian Government resources for internationally qualified health professionals and employers, including guides for moving to Australia, medical practitioner pathways, and orientation to the Australian health system.	Open resource
RACGP Fellowship	PEP Specialist overview	Eligibility, comparability, program structure and Fellowship requirements	Open resource

Topic	Resource	Use it for	Link
RACGP Fellowship	PEP Specialist pathway chart	Step-by-step pathway from comparability assessment to FRACGP	Open resource
ACRRM Fellowship	ACRRM Specialist Pathway	Specialist IMG assessment pathway leading to FACRRM and specialist registration	Open resource
ACRRM Fellowship	ACRRM Rural Generalist Fellowship	Fellowship training structure and available training pathways	Open resource

5. Practice manager checklist and tracker

The checklist below can be copied into a spreadsheet or project tracker. It is designed to make accountabilities and dependencies clear.

Done	Task	Owner	Evidence or output	Due date
☐	Advertisement placed	Practice	Advert posted, role details clear, location and supervision expectations included	
☐	Rural recruitment support contacted	Practice	RDN or other support contacted if relevant	
☐	Candidate pathway check completed	Practice and candidate	Medical Board self-assessment or college advice used	
☐	Eligibility evidence collected	Candidate	Qualification, registration, CV, identity and verification documents started	
☐	Conditional offer issued	Practice	Offer states commencement depends on approvals	
☐	Supervisor identified	Practice	Supervisor availability and responsibilities confirmed	
☐	Position description completed	Practice	Use template if required for PESCI or registration	
☐	Supervised practice plan prepared	Practice and supervisor	Required documents prepared and signed where applicable	
☐	PESCI requirement confirmed	Candidate and practice	Document whether required, not required or pending advice	
☐	Registration application submitted	Candidate	AHPRA practitioner portal application submitted with supporting documents	
☐	Work rights or visa process confirmed	Candidate and practice	Existing work rights checked or sponsorship pathway started	
☐	Visa classification and sponsorship pathway confirmed	Practice and candidate	Visa subclass identified, sponsorship requirements documented and responsibilities agreed.	

Done	Task	Owner	Evidence or output	Due date
☐	Medicare provider number application submitted	Candidate and practice	HW019 or HPOS pathway used as relevant	
☐	Relocation support activated	Practice and doctor	Housing, schooling, partner employment and local connection plan started	
☐	Start-day readiness check completed	Practice	Registration, provider number, work rights, IT, billing and induction confirmed	
☐	Working in Australia orientation plan added	Practice, supervisor and doctor	Health Workforce Taskforce guides/ orientation units reviewed and relevant completion checklist added to induction plan	
☐	College Fellowship pathway confirmed	Candidate and practice	RACGP or ACRRM program and stream recorded	
☐	Practice or job offer approval checked	Practice	RACGP/ACRRM placement, accreditation and location requirements confirmed	
☐	Fellowship supervisor and assessment support confirmed	Practice and supervisor	Supervision, workplace-based assessment and protected education arrangements documented	
☐	Post-start Fellowship milestones added to tracker	Candidate and practice	Program, assessment, exam and Fellowship milestones tracked after commencement	
☐	Recruitment budget and cost responsibilities agreed	Practice and candidate	Fees, reimbursements and responsible party documented	
☐	PESCI provider checklist confirmed	Candidate and practice	Current provider checklist and templates saved	
☐	Letter of offer and employment contract completed	Practice	Documents meet current pathway/ provider requirements	
☐	Registration pathway forms checked	Candidate and practice	Current AHPRA online process or pathway-specific form confirmed; SPPA-30 supervised practice plan and principal supervisor's agreement completed by the IMG and proposed supervisor(s), where required; the current AHPRA portal process or pathway-specific application confirmed for limited registration	
☐	Support contacts recorded	Practice	RDN, college, AHPRA, PESCI provider and migration adviser contacts listed	
☐	Post-start compliance calendar established	Practice, supervisor and doctor	Supervision reports, registration, visa and Fellowship milestones scheduled	

Using the tracker template

Use the tracker to manage IMG recruitment as a project rather than a single appointment process. For each candidate, record the current stage, task owner, actions required from the candidate and practice, external agencies involved, evidence needed, dependencies, due dates, status, risk level and notes. This helps the practice work backwards from the proposed start date, identify delays early and keep registration, PESCI, visa or work rights, Medicare, relocation and orientation tasks visible in one place. A blank Template: IMG recruitment guide and tracker is provided at the end of this document and can be copied into a spreadsheet or used as a working table for each candidate.



Suggested wording to add to the advert

Considering a move to our region? The Welcome Experience is a free NSW Government initiative that helps eligible workers and their families settle into their new community by connecting them with local people, services and support. To learn more about The Welcome Experience, visit www.nsw.gov.au/welcomeexperience.

For information about relocation support for eligible health professionals, as well as the lifestyle, communities and opportunities available across South Eastern NSW, visit the SENSW Places page: https://nswrdn.my.site.com/s/south-eastern-nsw.



Suggested wording for a conditional offer

This offer is conditional on confirmation of the required Australian medical registration, work rights or visa status, Medicare provider number and any supervision, practice approval or other regulatory requirements necessary for the doctor to commence work in this role. The proposed start date may need to be adjusted if approvals or documentation are delayed.

We also encourage you to reach out to The Welcome Experience. The Welcome Experience is a free service for essential workers and their families who are considering moving to regional NSW. Local Connectors can make moving easier by helping you find a home, schools, childcare, job opportunities for your partner, and connections within the community.

Learn more at nsw.gov.au/welcomeexperience.

6. Common risks and mitigation actions

Risk	Why it matters	Mitigation
Candidate pathway assumed incorrectly	Start date and costs are based on the wrong process	Complete pathway check before offer. Use Medical Board and college resources.
Registration, work rights and Medicare eligibility assumed to be the same process	Candidate receives registration approval but is not yet ready to commence practice	Confirm registration, work rights and Medicare requirements separately before confirming commencement
PESCI documentation incomplete	Interview delayed or application unable to progress	Prepare position description, supervised practice plan and candidate documents early.
Registration conditions not understood	Practice is not ready to provide required supervision or supports	Review conditions and supervision obligations before confirming commencement.

Risk	Why it matters	Mitigation
Visa and sponsorship obligations underestimated	Unexpected cost, compliance or timing pressure	Seek migration advice where needed. Review Home Affairs sponsor information.
Provider number not ready	Doctor may be unable to bill Medicare	Submit provider number paperwork before the proposed location start date and track confirmation.
Housing or family settlement barriers	Candidate delays start, withdraws or leaves early	Connect early with The Welcome Experience and local settlement supports where eligible.
Practice onboarding too narrow	Doctor starts without local referral, systems or cultural orientation	Use a structured 30, 60 and 90 day orientation plan.
Practice workload and cost underestimated	Administrative burden affects business operations and creates pressure on the coordinator	Assign protected time, a back-up coordinator and a cost plan before proceeding
A previous candidate's document pack is reused	Forms and requirements differ by pathway, position and provider and may have changed	Obtain the current candidate-specific checklist and use version control
Post-start obligations are not tracked	Supervision, reporting, registration, visa or Fellowship milestones may be missed	Maintain a compliance calendar and review it with the supervisor and doctor

Appendix A: Template - IMG recruitment guide and tracker

Use this blank tracker to manage candidate-specific actions, dependencies, risks and evidence requirements from advertisement through to commencement and the first 90 days.

Stage	Task	Owner	Candidate action required	Practice action required	External agency	Evidence required	Dependency	Due date	Status	Risk level	Notes

Appendix B: Source notes used to prepare this guide

This guide draws on official regulator and government resources, plus internal COORDINARE practice manager development materials. It should be reviewed before external publication or use as formal advice.

Source	Used for
Medical Board of Australia	IMG pathways, PESCI, Specialist pathway and Expedited Specialist Pathway information.
AHPRA	Employer and recruiter resources for helping international practitioners register.
Australian Government Health Workforce Taskforce	Resources for internationally qualified health professionals and employers, including moving-to-Australia guidance, IMG pathway guides and Working in Australia orientation units.
RACGP	PESCI overview, application process and documentation references.
ACRRM	IMG information and pathway options for rural and remote practice.
Services Australia	Provider and prescriber number information and HW019 form page.
Department of Home Affairs	Employer options, sponsoring workers, visa and sponsorship obligations.
RDN and Rural Health Pro	Rural recruitment support and rural vacancy advertising.
NSW Government	The Welcome Experience support for essential workers and regional businesses.
COORDINARE internal resources	Internal practice support and workforce development resources.

Important disclaimer

This guide is intended to support workforce planning and practice project management. It does not replace advice from AHPRA, the Medical Board, RACGP, ACRRM, Services Australia, the Department of Home Affairs, RDN, legal advisers or registered migration professionals.