

Clinical Psychology Internship

2021-2022 Internship Program Brochure



Malcolm Grow Medical Clinics and Surgery Center Joint Base Andrews, MD

A scientist practitioner psychology internship in the generalist tradition



Training experiences include:
Outpatient Mental Health
Clinical Health Psychology
Basic Neuropsychology
Prevention and Outreach
Emergent Care Center Consultation
Aerospace Psychology
Substance Abuse Prevention and Treatment



Accredited by the American Psychological Association since 1988
Member, Association of Psychology Postdoctoral and Internship Centers
National Matching Service match number: 134311

Dear Applicant:

Thank you for your interest in our Clinical Psychology Internship Program at Malcolm Grow Medical Clinics and Surgery Center (MGMCS) at Joint Base Andrews, MD! We anticipate we will have six intern positions available beginning in August 2022 for applicants who are eager to learn, who are committed to excellence, and who are interested in developing leadership skills and beginning their professional psychology careers as Air Force officers.

Our Internship has been providing evidence-based clinical training since 1989 in the National Capitol Region, and has been APA accredited since 1988. The aim of our program is to provide generalist training using a scientist-practitioner model to develop clinical psychologists who are ready to join our family of Air Force psychologists worldwide. Trainees complete two core training experiences in the Outpatient Mental Health Clinic and Behavioral Medicine Service. These training areas are supplemented by required mini-rotation experiences including: mental health assessments at the En Route Patient Staging Facility (entry point for military medical evacuations from overseas), crisis assessments, substance abuse treatment and prevention, prevention and treatment of family maltreatment, neuropsychological assessment, and Primary Care Behavioral Health (PCBH). Additionally, interns may participate in elective mini-rotations to gain experiences in the areas of military headquarters mental health policy development, forensic psychology, intelligence and national security, and small base mental health clinics.

Our multi-disciplinary team of psychologists, psychiatrists, social workers, and mental health technicians are dedicated to our role in shaping the future of military psychology through the training, supervision and experiences provided to the interns of our program. The overarching vision of our program is to transition interns from students to autonomous professionals, ready for licensure.

We will be hosting two Open Houses on December 15, 2021 and January 5, 2022, by invitation. The Open Houses are an excellent opportunity to talk in person with our faculty and current interns and get a glimpse of what the National Capitol Region has to offer. Please read this brochure and reach out to our current interns to learn about our program and determine if the training opportunities provided match your interests as you prepare to continue the next phase of development in your journey to become a psychologist.

If you have additional questions, I encourage you to contact me at (240) 857-7186 or email stephen.m.stouder.mil@mail.mil.

//SIGNED//

**STEPHEN M. STOUDER, Lt Col, USAF, BSC, ABPP
Director of Training, Psychology Internship Program**

Our program has been accredited by APA since 1988 and a member of APPIC since 1993. We received our most recent 7-year re-accreditation by the APA's Commission on Accreditation (COA) in July 2015 with our next site visit scheduled for 2023/2024 (date pending confirmation with APA). Questions related to the program's accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street NE, Washington DC, 20002
Phone: (202)-336-5979 / E-mail: apaaccred@apa.org
Web: www.apa.org/ed/accreditation

We invite your questions, encourage your visit and look forward to your application to our program.

NOTE: Our internship program uses the terms "Residency" and "Residents" to be on par with other military healthcare professional training programs within the Air Force. Thus as you read through the brochure, please recognize "Residency" is equivalent to "Internship" and "Residents" are equivalent to "Interns" in our program. Likewise, the terms "client" and "patients" are also considered equivalent and used interchangeably.

Our program code for the National Matching Service match is 134311 and the name is Malcolm Grow Medical Clinics and Surgery Center (USAF).

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Quick facts about the Malcolm Grow Internship

- ❖ Accredited by the American Psychological Association (APA) since its first year of existence in 1988.
- ❖ Scientist-practitioner and empirically based training/practice model.
- ❖ Collegial, full-time faculty of 14 covering a wide range of specialties and interests.
- ❖ Experience with diverse patient populations presenting a wide variety of problems.
- ❖ Experience with telehealth (telephone and video enabled) patient care.
- ❖ “State of the science” training in Adult Psychological Assessment/Treatment, Clinical Health Psychology, Primary Care Behavioral Health, Neuropsychological Screening/Testing, Substance Abuse Treatment, Community Outreach/Prevention plus unique elective mini-rotations.
- ❖ Training and experience in clinical supervision of psychology practicum students from a local graduate program.
- ❖ Training in leadership and program management.
- ❖ Supervision rated as outstanding in both quantity and quality by program alumni.
- ❖ Training in operational and aviation psychology applications.
- ❖ Extensive didactic program including Distinguished Visiting Professors (DVPs) of national reputation.
- ❖ Immediate post-internship employment with high levels of professional autonomy and the opportunity to develop leadership and management skills that greatly enhance competitiveness for future positions.
- ❖ Excellent preparation for either an Air Force or civilian career in psychology.
- ❖ Rank, pay and benefits of an Air Force Captain: competitive salary, including tax free housing and food allowances, medical and dental benefits for the member and full medical coverage for the family; discounted shopping privileges; inexpensive life insurance and family dental package; 30 days paid vacation plus ten federal holidays per year. For current pay and benefit information, see the military active duty basic pay chart (<https://www.dfas.mil/MilitaryMembers/payentitlements/Pay-Tables/>). Salary based on officer pay grade O-3 with <2 years of service and includes base pay as well as tax free subsistence and housing allowances (use zip code for Joint Base Andrews, 20762). For an officer with no dependents, in 2021 the annual salary was approximately \$85,000 a year, higher with dependents.
- ❖ The Air Force offers opportunities for paid post-doctoral fellowships in Clinical Neuropsychology, Clinical Health Psychology, Operational Psychology, Aviation Psychology / Human Factors, and Forensic Psychology.
- ❖ To maximize the quality and effectiveness of interns’ learning experience, all interactions among interns, supervisors and training staff are expected to be collegial, respectful and conducted in a manner that reflects the highest standards of the profession. The program has identified avenues of recourse if problems in this area arise.

AIR FORCE INTERNSHIP PROGRAMS

The United States Air Force (Air Force) offers up to 20 fully-funded one-year internship positions in clinical psychology. Internships are available across three training sites, each located in Air Force Medical Treatment Facilities: Malcolm Grow (Joint Base Andrews in Maryland), Wilford Hall (Lackland AFB in San Antonio, Texas), and Wright-Patterson (Wright-Patterson AFB in Ohio). All three internship programs are APA-accredited.

The Air Force accepts applications from all qualified persons who meet the following eligibility requirements.

ELIGIBILITY CRITERIA

To be eligible for consideration for an officer commission and Intern selection, the applicant must:

- a. Be a U.S. citizen.
- b. Meet the requirements for commissioning in the United States Air Force, including an Air Force physical examination.
- c. Satisfactorily complete all academic and practica requirements for a Ph.D. or Psy.D. in clinical or counseling psychology from an **APA-accredited graduate program**. This includes, at a minimum, the completion of preliminary and comprehensive examinations.
- d. Must be certified as ready for internship by their program Director of Clinical Training.
- e. Committee approval of the dissertation proposal is **mandatory** before entering active duty and beginning the internship. Since dissertation progress is a factor in the selection process, we recommend that the proposal be approved by the time one submits his/her application and at minimum before internship match day. Completion of the dissertation prior to internship is **strongly** encouraged to allow for full participation in the wealth of experiential opportunities available during the internship. Those interns who have not completed their dissertation are expected to continue to consistently work toward completion and to utilize the dissertation elective mini-rotation.
- f. Complete a minimum of 500 face-to-face hours of supervised practicum experience by the time the application is submitted. Note: it is understood that COVID-19 may have limited practicum hours and experiences! Please discuss any questions or concerns with the Psychology Internship Training Director.

Admittance into our internship program is contingent upon being selected for and accepting a commission in the United States Air Force, and agreeing to an active duty service commitment. The service commitment begins after successful completion of internship. The standard length of the service commitment duration is a minimum of three years, provided the psychologist obtains independent licensure within the first year of service post-internship. Further, psychologists in other situations will incur longer service commitments, such as recipients of the Health Professions Scholarship Program, graduates of Uniformed Services University of the Health Sciences, Reserve Officer Training Corps, and other prior active duty service related commitments. The actual terms of your commitment will be clearly outlined in your commissioning paperwork that will be provided to you by a health professions recruiter and will be consistent with AFMAN 36-2100, Table A2.2 (https://static.e-publishing.af.mil/production/1/af_a1/publication/afman36-2100/afman36-2100.pdf).

NON-DISCRIMINATION AND EQUAL OPPORTUNITY

- As a matter of Federal and military policy, the Air Force and Air Force psychology training programs fully adhere to the practices and procedures of the Equal Employment Opportunities Act in the selection of trainees and employees. The Air Force views diversity and equal opportunity as a vital part of providing patient care, creating a fair and respectful work environment, and ultimately maintaining a healthy and synergistic workforce. We are committed to fostering diversity through hiring and selection practices including attracting and training diverse interns.

- **Eligibility for military service requires certain physical abilities and attributes including age, height, weight, and physical ability requirements. The main point of contact for questions about these eligibility standards is a Health Professions Recruiter for the Air Force Recruiting Service (AFRS).** Age limits are determined on an annual basis and listed in the AFRS Procedural Guidance Message (PGM). In addition, recruiters will screen for medical issues and facilitate the applicant's physical exam with a physician.

POST INTERNSHIP PROFESSIONAL DUTIES

The position of clinical psychologist in the Air Force is comparable to that of many civilian psychologist positions. Duties depend primarily upon the needs of the individual Mental Health Clinic or the Air Force community in which one works. However, depending upon one's interests or skills, even in initial duty assignments, Air Force psychologists are usually given levels of responsibility and autonomy rarely seen in other contexts. The MGMCSO internship prepares graduates to effectively transition into their role as Air Force psychologists and officers. The initial assignment invariably provides a superb foundation for a future military or civilian psychology career.

BENEFITS

Interns receive the rank, pay and benefits of an Air Force Captain including full medical and dental coverage; full family medical coverage, discounted shopping privileges and life insurance; family dental packages; 30 days paid vacation per year (though the number of days one may take "away from training" during the internship year is limited) plus all federal holidays. For specific salary and benefits, see the military active duty basic pay chart (<https://www.dfas.mil/MilitaryMembers/payentitlements/Pay-Tables/>). To calculate current pay and assuming that the intern does not have prior military time (i.e., O-3E pay), use the website to identify:

1. Basic pay
 - a. At the above link, select the current year "military active and reserve component pay tables"
 - b. On the chart, find the monthly pay for "<2" Years of Service row and Pay Grade column of "O-3"
 - c. This number is your monthly basic pay
2. Basic allowance for subsistence (tax free)
 - a. At the above link, select "Basic Allowance for Subsistence (BAS)"
 - b. Use the rate for "BAS" officers
 - c. This number for "Officers" is your monthly, tax-free basic allowance for subsistence (i.e., food)
3. Basic allowance for housing (tax free)
 - a. Go to: <https://www.defensetravel.dod.mil/site/bahCalc.cfm>
 - b. Select the current year, enter zip code "20762", and select the pay grade "O-3"
 - c. The figure under the heading "O-3 without Dependents" is the monthly tax-free housing allowance if you are single. The figure under the heading "O-3 with Dependents" is the monthly tax-free housing allowance if you are married and/or have a child(ren). The rate does not change with the number of "dependents" you have. For this purpose, one "dependent" is the same as 7 or 8 "dependents".
4. Add the figures obtained in 1-3 above for an estimate of monthly pay and multiply by 12 to calculate your total pay for the internship year. Keep in mind the total from 2 and 3 above are tax free.

Note: basic pay will increase according to the pay schedule during the 3 years following internship. To calculate pay rate changes, go to back to #1 above and look at the pay for 2 years of service (this will be your pay rate one year out of internship) and for 3 years of service (this will be your pay rate at 2 years out of internship). These rates are current as of now, however, these pay rates are typically increased by cost of living adjustment each year. Therefore, the basic pay figure may increase a couple of percentage points by the time interns enter the program and future pay rates will be higher as well. Housing allowances are also re-evaluated regularly based on local conditions, so this figure may change by the time of entry.

An Air Force Health Professions Recruiter can help you calculate your pay if you have difficulty accessing the above website or calculating the total. They can also provide you with detailed information about the other extensive benefits you receive as an officer in the Air Force.

ADMINISTRATIVE ASSISTANCE

The Psychology Internship Program has an Education Coordinator who supports the internship training program. The Medical Group (MDG) and Mental Health Flight staff also provide technical support and assistance with required training for medical staff, logistics, computers, pay, and leave (time off) issues.

The MH Flight ensures the internship has needed resources to support the training and clinical missions, including office space, computers, internet access, webcams, telephones, and office supplies. All interns and staff are provided with individual offices designed to be welcoming and of sufficient size to comfortably interact with patients. Each office is fully furnished with modern modular desks, bookshelves, adjustable high quality office desk chairs, and 1-2 patient chairs and is equipped with a networked computer and telephone with voicemail.

The Mental Health Flight encourages easy collaboration between supervisors and interns, and between mental health disciplines. Intern offices are located together in one area to facilitate peer socialization, support, and interaction. Intern offices are also located near their supervisors' and other staff offices to encourage intern-supervisor interaction and consultation. MGMCSC and Joint Base Andrews have spacious conference rooms and a conference center equipped with computers, power point projectors, TV's, DVD players, and video-conference capabilities for didactics, workshops by national experts, and teleconferences. The training office and Training Director's office have secure and orderly storage for psychology training program files. The Training Directors office is in a central location to facilitate equal access by interns and staff.

The MDG and Mental Health Flight also ensure the internship program has a wide array of training resources and audiovisual equipment. For example, interns will have access to computer-based psychological testing packages for multi-dimensional batteries, multiple manually administered tests, one office designated for psychological testing and an office designated for biofeedback treatment. The interns also have ready access to electronic copies of journal articles through Air Force Medical Service's web-based portal.

SCHEDULE, VACATIONS & HOLIDAYS

The internship year is preceded by a five-week to eight-week course at Maxwell AFB in Alabama. This course serves as an introduction to the Air Force and the Air Force Medical Service and is called Officer Training School (OTS). OTS is designed to prepare medical, chaplain, and legal professionals to understand core aspects of officership. This course does NOT provide training specific to psychology nor is it specific to your role as a military psychologist. During this time (typically late June/early July to late July/early August), new interns obtain uniforms, establish pay records, learn officership basics, and get to know the other incoming Air Force psychology and social work interns. Upon arrival to the internship at Joint Base Andrews (usually by late July/early August), all interns participate in a three-week orientation to MGMCSC, Joint Base Andrews, and the internship experiences and mini-rotations.

Interns are permitted **10 total training days** away from the internship program if their dissertation is not completed, and are permitted **15 total training days** away if their dissertation defense has been completed by the start of internship. A day away from training is defined as any day on which an intern is absent for any reason, when other interns are present and engaged in training. Examples of days away from training include personal leave and sick days. It does not include days when all interns are out of the office such as federal holidays, downtime during holiday periods, occasional days off designated as "family days", attendance at an approved professional conference or meeting in town, dissertation defense, or dissertation time away from MGMCSC that is part of allocated dissertation work time, etc.

POST-INTERNSHIP ASSIGNMENTS

The Air Force offers assignments at more than 70 locations in the continental United States and overseas. Your preferences, along with any applicable special needs or circumstances for interns, are considered when assignments are made. However, the needs of the Air Force are the primary determining factor. Initial (post-graduate) placements are almost always in outpatient mental health clinics housed in medical treatment facilities within the continental United States. On average, interns receive an assignment within their top 10 rankings of preferred assignments (out of 20-28 ranked options). Positions outside the continental United States (e.g., in Europe and the Pacific) are generally granted to individuals after their initial Air Force assignment rather than directly after the internship year, but on occasion interns have been placed in overseas bases.

The internship seeks to facilitate a smooth transition from intern to Air Force psychologist. Therefore, in addition to enhancing interns' clinical skills, the program is also geared toward developing leadership and managerial skills. Intern knowledge of Air Force programs and policies is ensured so graduates are well prepared to tackle the responsibilities they will have at their post-internship assignment. Throughout the training year interns will complete a number of tasks that will provide awareness and understanding of the wide array of programs they may have a direct role in as a psychologist in the Air Force. This may include observation of various components of a particular program, review of military policies, and discussion with faculty about readings and observations. In summary, the internship faculty is very invested in preparing interns to be top-notch, autonomous clinicians and officers because every intern will become their Air Force colleague upon graduation.

WHAT MAKES THE MALCOLM GROW INTERNSHIP UNIQUE?

We are frequently asked what makes our site unique compared to other Air Force sites. The Air Force internships in general, and MGMCSC in particular, offer a number of exciting training opportunities that are a function of each program's training model and location. Here is a quick summary of some of the unique training opportunities at MGMCSC, the general philosophy of training, and the recreational opportunities in the local area:

▪ **Realistic Transitional Training Model**

- Staff view interns as "junior colleagues" and our emphasis is on training and mentoring to transition interns from a graduate student, to professional psychologists who become our peers
- Concurrent core training experiences simulate real-world work processes and enhance time management skills
- Interns are given increasing autonomy across the training year
- To the degree possible, tailored preparation of follow-on roles and responsibilities

▪ **Scientific Focus**

- Training focuses on empirical and critical thinking, as well as case conceptualization skills
- Covers wide range of empirically-based practices (EBPs) including assessment, treatment, supervision, and community-based psychology
- Encourages pursuit of research and use of outcome measures to evaluate treatment
- Dedicated time for dissertation work and elective research mini-rotations

▪ **Support Intern Autonomy and Professional Development**

- Interns choose their elective mini-rotations and submit preferences for their supervisors
- All interns have the leadership opportunity of being Chief Resident for about 6-9 weeks
- Supervision and other training focus on professional and officership skills development
- As part of their professional development, interns may receive tours of the Pentagon, White House, and/or U.S. Capitol

▪ **Wide Range of Elective Mini-Rotations**

- Dissertation (required if not completed)
- Examination for Professional Practice in Psychology (EPPP) Prep
- Applied Research / Program Development
- Headquarters Mental Health Policy Development
- Forensic Psychology
- Intelligence and National Security
- Operational Psychology
- Inpatient Mental Health
- Small Base Mental Health Clinic
- Primary Care Behavioral Health
- Advanced Biofeedback
- Advanced Neuropsychology
- Individually Tailored Experience

▪ **Presidential Support**

- MGMCSC is located near the White House and several units who provide direct and support operations to the President of the United States. Interns regularly evaluate military members under consideration for Presidential Support duties, and learn to manage military members in this program who are under care for mental health conditions

- **Supervising Practicum Students**
 - Most interns participate in supervision of a clinical psychology practicum or clerkship student from the Uniformed Services University of Health Sciences PhD program in clinical psychology

- **Interdisciplinary Teamwork and Consultation**
 - Interns work closely with staff from other disciplines (e.g., psychiatrist, psychiatric mental health nurse practitioners, social work residents)
 - Interns work closely with other medical specialties in the medical treatment facility, members of base agencies, and military unit leaders
 - Mental Health consultation role to the En Route Patient Staging Facility (returning “wounded warriors”)

- **Access to Mental Health and Medical Expertise**
 - MGMSC is located in the Washington DC National Capital Region (NCR). The NCR has multiple military and civilian agencies related to health care and research including the Defense and Veterans Brain Injury Center (DVBIC), the Defense Centers of Excellence (DCoE), the Center for Deployment Psychology (CDP), Walter Reed National Military Medical Center (WRNMMC), National Institutes of Health (NIH) and Mental Health (NIHMH), offering potential training opportunities on state-of-the-art health issues. Furthermore, there are several doctoral level psychology graduate programs in the NCR, including: George Washington University, Howard University, Catholic University, American University, Uniformed Services University of Health Sciences, and George Mason University

- **Working in a Joint Service Environment**
 - The NCR is a Joint Medical Command. This is important because the military is moving towards joint operations (i.e., multi-service operations) and military healthcare providers need to know how to work with patients and leadership from other military services
 - Interns work with patients from all services (Air Force, Space Force, Army, Navy, Marines, as well as Public Health Service and Coast Guard members) and learn about each service’s unique culture, missions, and regulations. Interns also work with providers and leaders from all services
 - Interns may attend trainings and interact with Army and Navy interns as well as local interns from Washington D.C. and Baltimore Veteran’s Administration Hospitals

- **D.C. Area Attractions**
 - The Washington D.C. metropolitan area offers exciting cultural, historical, political, academic and international attractions. One can travel around the area by Metro train, crowded beltway, or curvy country/park roads. There is a lot going on, and yet with minimal effort, one can be in the country driving on rural routes exploring the Chesapeake Bay coast or Amish country. Below are some examples of D.C. area attractions:
 - White House, National Capitol, Supreme Court, Library of Congress, The Pentagon
 - Free national art, history, and technology museums
 - Historic sites and national monuments such as the Washington, Jefferson and Lincoln Monuments and the Vietnam and World War II Memorials
 - Famous neighborhoods such as Georgetown, Old Town Alexandria, DuPont Circle
 - Cultural diversity and richness
 - Wide range of premier and ethnic restaurants, shopping and professional sports.
 - Three major airports (Reagan National, Baltimore-Washington International, and Dulles International)
 - Proximity to the eastern seaboard and Chesapeake Bay, New York City and Philadelphia
 - Proximity to the Appalachian Trail and Skyline Drive
 - Variety of outdoor recreational activities

MGMCSO TRAINING MODEL

The Clinical Psychology Internship Program is based on a scientist-practitioner approach to understanding human behavior and providing psychological services. The purpose of the MGMCSO internship program is to prepare interns for a broad array of post-internship entry positions in the field of clinical psychology. To accomplish this goal, the program's primary goals are to develop psychologists who can fill "generalist" roles and who are ready for entry level practice. **The overwhelming emphasis is on outpatient services for adults given the likely experiences and duties awaiting graduated interns at their first duty assignment.**

Faculty predominantly employ a competency-based developmental model in clinical supervision of interns (e.g., increasing level of autonomy as knowledge, skills, and competencies develop; challenging interns in a collegial manner to view clinical issues differently; tailoring supervision interventions to the intern's level of knowledge and skill). Supervisors also draw heavily on principles of competency-based supervision models (e.g., assessing areas of strength and weakness early in the supervision process, promoting self-reflection on what happened in therapy sessions to plan for what needs to happen next session, evaluating skills using specific competency based criteria). Additionally, they also frequently draw on the concept of fostering the innate capacities for becoming a good therapist found within a person-centered supervision model.

Training and supervision focus on the following competencies, which are the emphasis of intern evaluation throughout the training year:

1. Research
2. Ethical and legal standards
3. Individual and cultural diversity
4. Communication and interpersonal skills
5. Professional values, attitudes, and behaviors
6. Assessment
7. Intervention
8. Supervision
9. Consultation and interprofessional/interdisciplinary skills
10. Implementation of military-specific guidance and processes
11. Officership

We view the internship year as a transitional year between being a student and a professional. Thus, while providing strong training, supervision, and support, we also promote autonomy, critical thinking, and problem solving for dealing with challenges that psychologists encounter. Similarly, we have structured the program such that interns learn critical skills in managing caseloads, efficient administrative processes, effective use of support staff, program management, etc. We consistently see our interns being highly sought after and succeeding in military and civilian settings where professional excellence is valued.

OUR MEDICAL CENTER AND COMMUNITY

MGMCSO was established in 1958. It currently offers a full range of primary care services along with medical and surgical subspecialties, dental care, and aerospace medicine. In addition, a 37-bed En Route Patient Staging Facility servicing over 20,000 transient medical patients annually from around the world is also located at MGMCSO.

The MGMCSO mission is highly conducive to psychology training, stressing the importance of top quality medical services, prevention services, education and training, personal and professional growth, and partnerships with other military medical agencies in the National Capital Region. Interns work in a busy Air Force outpatient mental health clinic alongside of experienced active duty and civilian psychologists, psychiatrists, social workers, and mental health technicians to deliver high quality services to a wide range of beneficiaries, as well as meet the mental health needs of the installation population through activities such as

outreach and community intervention. In this way, the duties of interns very closely mimic duties they may expect to have in their first post-internship assignment.

MGMSC provides direct health care services to over 70,000 eligible Department of Defense (DoD) service members and their families, to include retirees and their families, high-level government officials, and foreign dignitaries who reside in the National Capital Area.

The APA has accredited the Clinical Psychology Internship Program at MGMSC since 1988. The APA Commission on Accreditation is located at 755 1st Street NE, Washington DC, 20002 and can be reached by phone at 202-336-5979. The internship maintains membership in the Association of Psychology Postdoctoral and Internship Centers (APPIC).

We are located in suburban Maryland, 11 miles from downtown Washington, D.C. ("The Mall"). "The Mall" is the traditional place to see many of the historical locales and landmarks including the Washington Monument, the Vietnam, Lincoln, and Jefferson Memorials, and the Smithsonian complex, which includes the Air & Space Museum, Hirshhorn Museum, and National Gallery. Other points of interest include Congress, the Supreme Court, Kennedy Center, White House, National Museum of African American History and Culture, Holocaust Museum, International Spy Museum, National Portrait Gallery, and National Zoo. All these sites, and many others, offer free or low cost activities for the entire family. Washington also has a safe and efficient Metro system, making the Capital and surrounding areas easily accessible. Nearby mountains and lakes offer a full range of outdoor activities. We are also within an hour of the Chesapeake Bay, Annapolis and Baltimore. Entertainment ranges from concerts, plays, ballets, to professional and college sports, some within minutes of the base.

Washingtonians enjoy all four seasons in a moderate climate. The coldest month is normally January, with an average temperature of 35 degrees Fahrenheit. July is the hottest month, with an average temperature of 86 degrees. Washington D.C. is green almost year round with spectacular fall and spring seasons. It is surrounded by beautiful countryside, and the ocean and mountains can both be reached within a two-hour drive.

The educational, medical and scientific communities are large and active. Washington D.C. is home to the Headquarters of the American Psychology Association and several flagship medical treatment and education facilities (listed previously). Through an affiliation agreement, Air Force interns are often able to take advantage of presentations and seminars offered by local Army and Navy psychology training programs. With faculty permission, interns may tap into the multitude of educational and research institutions in the D.C. area.

Shopping is abundant and varies from many malls as well as a wide variety of specialty shops. Many restaurants, pubs and shops are available in and around the greater D.C. area. The beautiful National Harbor provides fine dining only 20 minutes from the base.

As home for the President's airplane, Air Force One, and as the entry point into the United States for numerous foreign dignitaries including kings, queens, presidents and prime ministers, Joint Base Andrews and the 316th MDG are regular subjects for the news media covering national and international events.

DYNAMIC TRAINING ENVIRONMENT

Please note that the Air Force operational and training environment can be affected by external events related to national defense. For example, deployment of active duty Air Force staff members has been a regular occurrence, as well as recent support for COVID-19 operations. Thus, we periodically adjust our training activities to meet changing organizational and training demands and opportunities. Usually, these changes are to improve the program, but at times mission demands may require the program to cut specific minor components of the training program for periods of time. The needs of the interns are always a primary concern. Such changes would not significantly affect the core training experiences or mini-rotations of the program.

SUMMARY OF THE PSYCHOLOGY INTERNSHIP YEAR

1. Mental Health Clinic (MHC)

- Outpatient Mental Health Clinic, yearlong dual track with BMS
 - Intake evaluations and therapy cases
 - Individual therapy, Group therapy (e.g., psychoeducational, DBT, PTSD)
 - Crisis/Risk assessment and intervention (e.g., walk-in triages)
 - Psychological assessment/testing (e.g., security clearances, deployment clearances, medical retirement, flying status evaluations)
 - Commander directed and fitness for duty evaluations (i.e., personnel & occupational fitness evaluations)
 - Community outreach and prevention
 - Consultation to leadership
 - Coordination of care with multi-disciplinary providers (psychiatry, social work, primary care managers, case management, and primary care managers)
 - Supervision of practicum/clerkship students

2. Behavioral Medicine Service (BMS)

- Clinical Health Psychology, yearlong dual track with MHC
 - Behavioral/functional analysis of patients with chronic medical problems
 - Self-regulation strategies (biofeedback, relaxation techniques)
 - Biopsychosocial case conceptualization strategies for chronic medical conditions
 - Consultations with medical providers
 - Health promotions (e.g., pain management, sleep, smoking cessation)
- Targeted Care Behavioral Health
- Primary Care Behavioral Health Phase I Certification
- Biofeedback assessment and treatment (approx. 40 total hours of training and experience)

3. Required Mini-Rotations / Experiences

- Alcohol Drug Abuse Prevention and Treatment Program (2 weeks)
- Family Advocacy Program (variety of experiences over the course of 6 weeks)
- Neuropsychology/Psychological Assessment (approximately 4-6 assessment cases)
- Emergent Care Center
- En Route Patient Staging Facility

4. Elective Mini-Rotations (two across the year). Some mini-rotations may vary in availability based on military requirements

- Dissertation (required if not completed)
- Examination for Professional Practice in Psychology (EPPP) Prep
- Applied Research / Program Development
- Headquarters Mental Health Policy Development
- Forensic Psychology
- Intelligence and National Security
- Operational Psychology
- Inpatient Mental Health
- Small Base Mental Health Clinic
- Primary Care Behavioral Health
- Advanced Biofeedback
- Advanced Neuropsychology
- Individually Tailored Experience

5. Didactics. Weekly half and full day trainings on a variety of didactic training topics.

6. Supervision. Interns are assigned supervisors for both the MHC and BMS tracks. At the half-way mark, supervisors will change to facilitate diversity of thought and exposure to multiple veteran faculty members (i.e., interns will have a total of two MHC supervisors, and two BMS supervisors). Each track also has group supervision where all interns participate and benefit. An additional long-term supervisor will also be assigned to each intern, with the focus on long-term patient cases and mentoring in leadership and military specific topics. Interns receive at least 4 hours of scheduled supervision time per week.

DESCRIPTION OF THE PSYCHOLOGY INTERNSHIP YEAR

The internship year is currently divided into two broad areas of training (core training experiences) and a variety of additional training mini-rotations. The Outpatient Mental Health Clinic (MHC) focuses on adult outpatient therapy and assessment, multi-disciplinary collaboration, and prevention and community consultation. The Behavioral Medicine Service (BMS) provides training in clinical health psychology, basic biofeedback, and consultation in the primary care settings. Both core experiences occur at the same time (i.e., each week, time is spent in both the MHC and BMS), allowing the intern early exposure to both areas and yearlong practice in both skill sets (including the immediate practice of skillsets learned in didactics).

All interns will participate in the required mini-rotations. Interns select a total of two elective mini-rotations over the course of the year, split between the first and second half of the training year. Dissertation and research elective mini-rotations may be selected twice, but other electives may only be done once. If the dissertation is not complete, interns are required to select the dissertation elective. See below for full descriptions of the major and mini-rotations.

CORE TRAINING EXPERIENCES

OUTPATIENT MENTAL HEALTH CLINIC

The Outpatient Mental Health Clinic (MHC) provides clinical training across a range of activities and a diverse spectrum of patients with presenting problems ranging from situational and work-related stressors to acute psychosis (on rare occasion). Most common diagnoses are Depressive Disorders, Anxiety Disorders, Post-traumatic Stress Disorder, and Adjustment Disorders. Initial triage, safety evaluation, and determination of patient disposition are conducted for all patients who walk-in on an emergency basis. The majority of daily clinical work is by scheduled appointments (intakes and follow-ups), including both traditional in person care and telehealth (phone or video-enabled care). The patient population is mostly active duty with some family members. Patients are routinely assessed for fitness for duty and ability to deploy while in care for mental health conditions. Further, patients on certain military status (e.g., flying, arming, presidential support, and top secret clearance) are also assessed for their ability to continue performing their duties, and interns become accustomed to coordinating care with other medical specialties and unit leadership. Interns are supervised by a staff psychologist in providing individual, and psycho-educational group therapies for both long- and short-term care. Marital/couples therapy cases are also sometimes available. Interns also conduct or co-lead 1-2 group therapy or psychoeducational groups. Clinical supervision focuses on empirically supported treatments, primarily from a cognitive-behavioral theoretical orientation.

While working in the MHC, interns regularly conduct supervised formal psychological assessments. These testing cases are generated by colleague and medical referrals, as well as via military-specific clinical evaluation processes such as medical discharge evaluation boards, security clearances, special duty applicant evaluations (e.g., presidential support program, military recruiters and military training instructors), flight status evaluations, and "commander-directed" mental health evaluations (CDE). In conducting the latter evaluations, the intern not only learns about various job requirements within the military and how personnel are managed, but also how to conduct oneself professionally and ethically when analyzing, interpreting, and acting as a command consultant. An additional part of the training goals on this experience is to ensure basic competency in widely used cognitive tests (e.g., WAIS and RBANS). These training experiences provide excellent preparation for general duties within an Air Force setting or in a similar civilian, clinical/community setting.

Additionally, interns have the opportunity to be the primary supervisor and coordinator of a practicum student's (clinical psychology graduate students) experience while working in the MHC, in close collaboration with a staff member.

BEHAVIORAL MEDICINE SERVICE

The Behavioral Medicine Service includes a variety of outpatient clinical health psychology experiences, including working on interdisciplinary programs (e.g., pain management, sleep, and smoking cessation). This area provides the intern the opportunity to evaluate and recommend treatment for medical and psychophysiological conditions in which the patient's behaviors, emotions, cognitions, spirituality, culture, or environment may be a significant determinant in the severity or extent of dysfunction. Cognitive-behavioral interventions are implemented to assist patients in modifying health compromising behaviors. BMS receives consultation requests from providers throughout the medical clinic to include the gastrointestinal clinic, nutritional medicine, internal medicine, primary care, physical therapy, and consult liaison psychiatry. The BMS core training experience also includes training using biofeedback as an adjunctive treatment for appropriate conditions. Interns receive Primary Care Behavioral Health (PCBH) Phase I Certification training, and most commonly utilize the training in Targeted Care appointments. Targeted Care appointments are 30-minute appointments intended to quickly identify the patients' most pressing concerns, complete a focused assessment, and provide an evidence-based intervention. Patients may return for additional 30-minute follow-up appointments for additional tools and strategies as needed.

REQUIRED MINI-ROTATIONS

ALCOHOL AND DRUG ABUSE PREVENTION AND TREATMENT

Substance use disorder treatment training is provided through the Alcohol and Drug Abuse Prevention and Treatment (ADAPT) Program. ADAPT is embedded in a robust continuum of treatment interventions, ranging from early intervention and targeted prevention using evidence-based practice, through an Intensive Out Patient (IOP) and Partial Hospital Program (PHP) for addiction and dual diagnosis disorders. The ADAPT mini-rotation involves the intern in a multidisciplinary team. Interns learn a biopsychosocial approach to addictions with input from physicians, addictions medicine specialists, nurses, social workers, counselors, and technicians. Treatment team planning decisions in the military involve commanders, first sergeants, and supervisors. Interns learn the advantages to this approach as well as the requirements for ethical practice.

ADAPT is one of the three primary Mental Health Flight missions, and it is not uncommon for psychologist to provide leadership roles within ADAPT during subsequent assignments. Current emphasis is on exposure to and collaboration with the ADAPT Program Manager to provide insight into filling this key leadership assignment.

FAMILY ADVOCACY PROGRAM

The Family Advocacy Program's (FAP) mission is the prevention and treatment of family maltreatment (e.g., physical, emotional, and sexual abuse). Abuse of family or intimate partners is antithetical to the military ethos and the Air Force family, and a variety of services and programs are available to compassionately address abuse when it happens. The FAP mini-rotation is intended to provide interns a working knowledge of the process, programs, and outcomes of maltreatment allegations and treatment. Treatment team planning decisions in the military involve commanders, first sergeants, and supervisors. Interns learn the advantages to this approach as well as the requirements for ethical practice.

FAP is one of the three primary Mental Health Flight missions, and it is not uncommon for psychologist to provide leadership roles within FAP during subsequent assignments. Current emphasis is on exposure to and collaboration with the Family Advocacy Officer to provide insight into filling this key leadership assignment.

NEUROPSYCHOLOGY/PSYCHOLOGICAL ASSESSMENT

The Neuropsychology and Psychological Assessment portion of the internship is conducted under the supervision of a fellowship trained neuropsychologist. The goal is exposure to neuropsychology as a specialty (clinical processes and tools) and ongoing relevant psychological assessments within a robust clinical setting. The patient population consists of primarily of active duty adults. Referrals for neuropsychology assessments address a wide variety of presenting problems, with the most common being attention deficit hyperactivity disorder, early dementia, vascular injuries, psychiatric cases, persistent cognitive complaints, and traumatic brain injury. Psychological assessment referrals also address a wide range of presenting problems and questions, including differential diagnosis, commander directed mental health evaluations, fitness for duty evaluations, and evaluations for consideration for medical retirement. Training goals on this mini-rotation are exposure to the various neuropsychological, intelligence, and personality assessment tools, how to conduct military specific assessment interviews, feedback to patients and military commanders, and disease/injury course and presentations.

Interns will be expected to attend neuropsychology and assessment related didactics, case presentations, and be heavily involved in at least one comprehensive neuropsychological evaluation (interviewing, test interpretation, drafting a report, etc.), and at least 5-6 other assessment cases over the course of the year. Depending upon staffing, referrals, and intern interest, individual interns may have additional opportunities for involvement in other neuropsychological evaluations to sharpen their skills in conceptualizing clinical care within the context of neuropsychological complaints/deficits.

EMERGENT CARE CENTER (ECC) SUPPORT

ECC support is not a true mini-rotation as all interns will support this service during the training year. MGMCSC does not have a full Emergency Department, but the clinic does have an Emergent Care Center that is open 24 hours/7 days a week, and is the location base personnel and other beneficiaries report for medical and mental health emergencies (including on weekends, holidays, and evenings). Each intern will have several (approximately 5-6) full weeks during the training year when they serve as the primary, on-call mental health provider with back-up/supervision from a licensed mental health provider. Primary presenting problems typically include suicidality or other risk/crisis assessment and management. ECC support is often accomplished outside of the normal duty day.

EN ROUTE PATIENT STAGING FACILITY (ERPS; formerly known as the Aeromedical Staging Facility)

This experience is not a true mini-rotation as all interns will support this service during the training year. This experience involves engagement with the multidisciplinary medical team who receives, triages, and monitors “wounded warriors” coming back to the United States from overseas because of medical and/or mental health issues. The ERPS houses “wounded warriors” temporarily (less than 24 hours) as a way-station after a lengthy transatlantic flight before they move on to their next medical care facility. The psychology intern and staff engage with the ERPS team to provide mental health consultation to the flight physicians, nurses, and medical technicians for both medical and mental health patients. The consultation focuses primarily on patient care as well as assisting the ERPS leadership in team development and training. All interns will participate in ERPS support several times over the course of the year, which typically occurs outside normal duty hours.

ELECTIVE MINI-ROTATIONS

The Training Director regularly reviews and updates elective mini-rotations and other training opportunities as they arise. Some of these experiences may not always be available, based on staff availability and military realities. It is possible that an elective is planned, only to have the experience unexpectedly be unavailable due to a military deployment. The Training Director will work with the interns about current availability.

DISSERTATION

This mini-rotation is required for all interns who have not completed their dissertation. Through this mini-rotation interns receive time in their training schedule and access to program resources to work toward dissertation completion and defense. The goal is to help ensure all interns complete their dissertation by the end of the training year. Long-term supervisors support and encourage progress on dissertation goals.

EXAMINATION FOR PROFESSIONAL PRACTICE IN PSYCHOLOGY PREP

A major focus for Air Force internships is on dissertation completion and obtaining licensure as soon as possible, so that provider is fully capable to perform the duties of a psychologist. This mini-rotation provides time and study materials for preparation of the EPPP. Interns are encouraged to consider this mini-rotation only if the dissertation is either done prior to the start of internship or within the first half of the training year, and it is likely that the intern will take the EPPP prior to the end of internship.

APPLIED RESEARCH / PROGRAM DEVELOPMENT

Interns have the ability to craft a mini-rotation for the application of research, either as participation in an existing military related research project, or development of an applied research program, such as creating a treatment program for a military-related population or psychoeducation group. The potential breadth of this mini-rotation is intentionally broad to allow interns to work with the Training Director to create an experience that is tailored to interns' interests and current opportunities.

HEADQUARTERS MENTAL HEALTH POLICY DEVELOPMENT

Our location in the D.C. area allows us the unique opportunity to have interns work with colleagues at the Defense Health Agency (DHA) and the Air Force Medical Readiness Agency (AFMRA), which create and direct health care policy for the Department of Defense and the Air Force, respectively. Interns may observe and participate in working groups that research, develop, and integrate policy. They may participate in conferences or working groups, such as the annual review of suicides to extract lessons learned that may translate into policy changes for the field. In the past, interns have been involved in activities such as "beta testing" tools such as smart phone resiliency apps, participating in a working group developing new suicide or sexual assault prevention videos and training materials, and research related to military transgender policy.

FORENSIC PSYCHOLOGY

The Air Force Office of Special Investigations (AFOSI) Directorate of Behavioral Sciences offers a mini-rotation for active duty Air Force psychologists in the psychology residency program. The mini-rotation involves spending 5-8 days at AFOSI Headquarters, Quantico, VA. The mini-rotation will focus on areas relevant to clinical psychologists in the Air Force, including police psychology, investigative psychology, assessment and selection, threat detection and mitigation, and consultative roles of psychologists.

INTELLIGENCE AND NATIONAL SECURITY

Ft. Meade is a United States Army installation located in Maryland that is home to a variety of intelligence and cyber related missions. Interns have the opportunity to work with an Air Force Operational Psychologist embedded with Intelligence, Surveillance, and Reconnaissance (ISR) and other national security mission-related airmen. This mini-rotation provides insight into the ISR mission, the role of an embedded psychologist, and experience working with military and civilian members with mental health concerns who have top secret security clearances. This mini-rotation does not provide access to classified missions or information.

OPERATIONAL PSYCHOLOGY

The 89th Airlift Wing is a tenant unit at Joint Base Andrews, and provides global special airlift mission duties to the President, Vice-President, and other senior government and military officials. Interested interns may have

the opportunity to work with the 89th Airlift Wing Operational Psychologist to gain insight and experience in embedded mental health roles, aviation psychology, assessment and selection of key personnel, key issues involved in presidential support missions, command consultation, walkabouts in the units, review of key aircraft, and other relevant topics. This mini-rotation does not provide access to classified missions or information.

INPATIENT MENTAL HEALTH

Ft. Belvoir Community Hospital is a flagship Army hospital located on Ft. Belvoir in Virginia. Interested interns may have the opportunity to work on the inpatient substance abuse treatment unit at Ft. Belvoir. In this 28-day program, interns will be fully integrated into all aspects of the program including initial evaluation, group treatment, individual intervention, case staffings, discharge planning, and documentation. Additional clinical experiences may include risk assessment and psychological testing as indicated.

SMALL BASE MENTAL HEALTH CLINIC

The Mental Health Flight at JB Andrews is a large clinic within a flagship military hospital and has access to multiple specialties and resources; however, the wealth of personnel and resources are not common for most Medical Treatment Facilities in the Air Force. Most follow-on assignments for interns are at locations that are smaller and ran by staff that are accustomed to filling multiple roles. This mini-rotation is intended to provide the intern the experience of working at a small active duty mental health clinic at the nearby JB Anacostia-Bolling to help prepare them for the realities of day to day work for future assignments.

PRIMARY CARE BEHAVIORAL HEALTH

The Primary Care Behavioral Health (PCBH) program is a behavioral health consultation service within primary care clinics. The Behavioral Health Consultant (BHC) works with primary care staff to address a patient's emotional health, habits, or behaviors when they are impacting overall health. Each intern has the opportunity to provide behavioral health screening and brief, solution-focused interventions to adults and, to a lesser extent, children. The BHC also tries to decrease burden on the primary care managers as well as the Emergent Care Center through follow-up visits and feedback to primary care managers on issues impacting patient care. By working as BHCs, interns provide early intervention for patients suffering from lifestyle- and stress-related disorders, as well as more chronic medical conditions.

ADVANCED BIOFEEDBACK

The Advanced Biofeedback mini-rotation focuses on developing additional skills in measuring physiological responses to anxiety such as heart rate (HR), skin conductance (SC), temperature (TMP), respiration (RSP), surface electromyography (sEMG), and Heart Rate Variability (HRV). Interns learn to use the NeXus-10 with Biotrace+ software biofeedback equipment to evaluate and treat patients with a variety of physical and mental health conditions. In addition, patients are taught proper mechanics and chemistry of respiration via use of capnometry training. Patients referred for biofeedback may present with a range of disorders including panic disorder, phobias, generalized anxiety, fibromyalgia, chronic pain, sleep disturbance, temporomandibular disorders, or headache/migraine. The goal of biofeedback is to help the patient increase their awareness of their body's physiological responses, bring them under greater voluntary control, and generalize this new learning to environments outside the clinic.

ADVANCED NEUROPSYCHOLOGY

The goal of the mini-rotation is a broad exposure to clinical neuropsychological evaluation and hands-on experience with all aspects of the neuropsychological evaluation process. Most neuropsychological evaluations in this setting are clinical assessment of relative cognitive strengths and weaknesses via objective neuropsychological evaluation (testing, record reviews and interviews) for patients referred for evaluation by

their physician. Common referral questions include: assessment of cognitive difficulties or persistent complaints related to medical conditions or history (e.g., post-traumatic brain injury, seizure disorders, cardiovascular accidents, and chronic diseases such as diabetes) as well as evaluations to assess patient functioning related to concerns of early dementia. Interns are heavily involved at all stages of the process including interviewing, records review, learning to administer and interpret a variety of neuropsychological tests, designing test batteries/evaluation processes, test administration and interpretation, report writing, face-to-face patient feedback and drafting clinical recommendations for the referring physician. Depending upon staffing and activities at our site and other NCR training sites (e.g., Walter Reed National Military Medical Center or Ft. Belvoir) additional training opportunities are possible including: participation in weekly multi-site DOD/VA neuropsychology VTC case conference and readings, visit(s) to DVBIC (Defense and Veterans Brain Injury Center) or NICoE (National Intrepid Center of Excellence) and neuropsychology specific lectures/presentations.

INDIVIDUALLY TAILORED

This mini-rotation simply means that an intern can develop—with Training Director approval—a customized elective mini-rotation to fill a gap in training or meet an interest that is not obtainable through established mini-rotations. The Training Director or other faculty member will assist interns in coordinating the mini-rotation, setting goals, and evaluating progress.

DIDACTIC PROGRAM

The internship emphasizes a strong knowledge base for professional practice through an extensive didactic program. Supervisors incorporate research discussions on topics relevant to particular cases. Inclusion of didactic material provides integration of theory, science, and practice through discussion of issues germane to patients that interns are actively treating. Didactics are incorporated within both core training experiences, and additional weekly all-intern didactics on intern training days. Faculty regularly participate in didactics, both as instructors and to provide inputs to teachings.

The MHC didactics focus on in-depth understanding and skills development of topics relevant to working in the outpatient mental health military settings. Initial topics include orientation to the clinic and military specific aspects of assessment and treatment, confidentiality, roles of military psychologists, and ethical considerations. Interns and Faculty meet to discuss assigned topics and readings on a wide variety of topics, such as: common issues and resources of empirically based practice, partnership and roles of various base helping agencies relevant to patient care, consultation to base leadership, case conceptualization models, cultural competence, assessment, and various military specific issues which are a part of understanding the system and culture of our patient base.

The BMS didactics and readings focus on general topics pertinent to the behavioral medicine field and disorders likely to be seen in a behavioral medicine clinic. Orientation to BMS includes training on health psychology concepts and practices (e.g., biopsychosocial conceptualization, functional analysis, relaxation training, biofeedback, and consultation), the most common presenting problems (i.e., chronic pain, headaches, and insomnia), and basic concepts in primary care consultation.

All interns participate in weekly department level didactics that transcend core training emphases, either in 90-minute focused instructions on key issues and topics (most common), or 1-to-2 day all day training events (least common). Subject matter experts from outside of the Malcolm Grow faculty are regularly incorporated as visiting faculty to teach these didactics. Recent examples include:

- Prolonged Exposure Therapy (2-day, all day)
- Cognitive Processing Therapy (2-day, all day)
- Acceptance and Commitment Therapy (2-day, all day)
- Operational Psychology

- Survive Evade Resist Escape (SERE) Psychology
- Aviation Psychology
- Senior Air Force Officer/Psychologist Perspective
- Treatment of LGBTQ/Transgender patients
- Medical Legal Consultation
- Sanity Board Evaluations
- Psychopharmacology for Non-Prescribers
- Embedded Mental Health Operations

In addition, our program brings in at least two Distinguished Visiting Professors (DVP's) each year. DVP's conduct 1 to 2 day workshops on their areas of expertise and spend informal time with the interns at lunches and dinners. A selected list of DVPs at MGMCSC since 1994 is below. In addition to MGMCSC DVPs interns may attend selected DVP workshops hosted by Walter Reed National Military Medical Center Psychology Internship Programs.

1994 - 2021 SELECTED MGMSC DISTINGUISHED VISITING PROFESSORS

Presenter	Affiliation	Topic
Albert Ellis, Ph.D.	Ellis REBT Institute	Advanced REBT
Alex Caldwell, Ph.D.	UCLA	MMPI-II
Art Nezu, Ph.D.	Hahnemann University	Clinical Decision Making
Arthur Freeman, Ph.D.	University of Pennsylvania	CBT: Depression Management
Beverly Thorn, Ph.D.	University of Alabama	Behavioral Management of Chronic Pain
Bruce Ebert, Ph.D., J.D.	Calif. Board of Psychology	Forensic Psychology
C DiClemente, Ph.D.	UMD, Baltimore	Addictions/Stages of Change
Candace Monson, Ph.D.	Boston Veterans Medical Center	Conjoint Treatment of PTSD
Carol Falender, Ph.D.	UCLA	Competency Based Supervision
Charles M. Morin, Ph.D.	Laval University – Quebec	Treatment of Insomnia
Christine Nezu, Ph.D.	Allegheny U of Health Sciences	Problem-Solving Therapy
Christopher Martell, Ph.D.	Private Consulting Firm	Diversity/Multicultural Issues in Working with the LGBT Community
Craig Bryan, Ph.D.	University of Utah	Cognitive Therapy for Suicidal Behaviors
Daniel Taylor, Ph.D.	University of North Texas	Behavioral Treatment of Sleep Disorders
David Jobes, Ph.D.	Catholic University	Assessment/Treatment of Suicide
Donald Meichenbaum, Ph.D.	University of Waterloo	CBT: Issues of Comorbidity
Douglass Snyder, Ph.D.	Texas A&M University	Promoting Recovery in Military Couples Struggling with Infidelity
Frank Andrasik, Ph.D.	University of Memphis	Biofeedback
George Albee, Ph.D.	University of Vermont	Primary Prevention
George Clum, Ph.D.	Virginia Tech	Panic Disorder
James McCullough, Ph.D.	Virginia Commonwealth Univ.	Chronic Depression & CBASP
Jeffery Young, Ph.D.	Private Consulting Firm	Cognitive Therapy
Jeffrey Barth, Ph.D.	University of Virginia	Mild-Traumatic Brain Injury
Johan Rosqvist, Psy.D.	Pacific University	OCD and Hoarding
John P. Foreyt, Ph.D.	Baylor College of Medicine	Obesity
John Reid, Ph.D.	Oregon Social Learning Center	Conduct Disorder
Joseph Matarazzo, Ph.D.	Oregon Health Sciences University	History & Future of Psychology
Katy Higgins Neyland, Ph.D.	Uniformed Services University of the Health Sciences	Interpersonal Psychotherapy for Groups
Kent Corso, Ph.D.	Private Consulting Firm	Proactive Reduction of Suicide in Populations via Evidence-based Research
Kermit Crawford, Ph.D.	Center for Multicultural Mental Health, Boston Univ.	Disaster Behavioral Health

Kirk Strosahl, Ph.D.	Mt View Consulting Group	Mental Health & Primary Care
Mark Staal, Ph.D.	Private Consulting Firm	Introduction to Operational Psychology
Michelle Craske, Ph.D.	University of California-LA	CBT with Anxiety & Panic
Pamela Hays, Ph.D.	Nakenu Family Center	Culturally Responsive CBT
Patricia Resick, Ph.D.	Boston University	Cognitive Processing Therapy
Paul Retzlaff, Ph.D.	Univ of Northern Colorado	MCMI - Clinical Applications
Ray DeGiuseppe, Ph.D.	St John's University	Anger Management
Sonya Batten, Ph.D.	Baltimore VA	Acceptance & Commitment Therapy (ACT)
Stephen Behnke, Ph.D.	Private Consulting Firm	Ethics in a Military Context
Terence M. Keane, Ph.D.	VA Boston Healthcare System	PTSD
Theodore Millon, Ph.D.	University of Miami	MCMI Assessment
Theresa Moyers, Ph.D.	University of New Mexico	Motivational Interviewing
Yossef Ben-Porath, Ph.D.	Kent State University	MMPI-2, MMPI-2-RF

EVALUATIONS

The process of evaluation has two components: (a) measurement of intern performance, and (b) evaluation of the internship program.

INTERNSHIP PERFORMANCE EVALUATION

Evaluations assess intern performance and competency in each of the identified domains. Each competency domain is evaluated based on developmental performance levels, which are defined and operationalized using behavioral anchors.

Internship faculty strives to give prompt on-going feedback to interns so they always know what they are doing well and what they need to improve on. Continuous feedback in this manner ensures interns are not surprised by any feedback given on the formal evaluations. Long-term supervisors assist interns with an initial self-evaluation to promote self-reflection in practice, and conduct formal mid-year and end-of-year evaluations. Supervisors provide formal evaluation/feedback for quarter, mid-year, three quarter, and end-of-year evaluations. Intern progress and performance are discussed monthly at training staff meetings and on an as needed basis so all staff members are aware of each intern's progress in the program and developmental needs.

The information from these evaluations will be used to inform a Training Report at the end of the internship year, and mid-year feedback to the intern's graduate program. The Training Report will essentially document completion of internship requirements and becomes part of graduates' military personnel record. Notification of internship completion will also be sent to interns' graduate programs. Additionally, information on intern progress is shared with the intern's graduate school program director at the mid-year point, as needed or as requested by the graduate program.

INTERN PROGRAM EVALUATION

Interns have multiple avenues for providing feedback about the program. The Chief Resident attends the weekly faculty meetings to represent intern issues. The interns formally evaluate their supervisors at the end of each core training experience, and are asked to provide other informal feedback at the mid-way mark or as needed. Additionally, the interns also provide a comprehensive and aggregate feedback of their whole training experience about three quarters through the year as part of the program's annual review. Interns also meet with the program director regularly during the year to discuss the program, professional development topics, and the direction of psychology nationally and in the Air Force, or any other issue they desire.

The training director also conducts exit interviews with each intern after they have received their final evaluations to obtain candid, qualitative feedback on the program, with a particular focus on how the program compared with what was "advertised."

Finally, graduated interns are also asked for feedback six to nine months after they have left the program. These critiques provide valuable input into program design in terms of the effectiveness of the program in preparing interns for the responsibilities they encounter post-internship. Lastly, current supervisors at graduate's first post-internship assignment are asked for feedback related to graduates' readiness for entry level practice.

SUPERVISION

Interns are assigned core training experience supervisors (i.e., one supervisor for the MHC, another for BMS) and meet weekly for assessment, treatment and consultation issues related to patient care. It is normal for supervisors to switch at the mid-year mark to allow interns opportunities to work with additional faculty members, normally resulting in a total of four supervisors (two from each core training experience) for the

intern to benefit learning from. In addition, each intern is assigned an active duty faculty mentor for the entire year. This preceptor (or long-term supervisor) is responsible for the intern's overall training to include supervision of long-term therapy cases and guidance and assistance on issues relevant to his or her growth as a clinical psychologist and Air Force officer. Supervisor expertise, caring, and accessibility are consistently lauded in intern critiques.

Overall, interns receive a minimum of two hours per week of individual supervision and two hours per week of group supervision/case discussion in various formats. Across the year interns will receive periodic direct supervision via observation, audio or video recording, or during telehealth appointments.

However, supervision is not limited to official supervision times. We encourage students and colleagues to have ready access to each other. Informal supervision, consultation, or support happens easily and interns use it often. All supervisors have "open door" policies welcoming intern consultation between formal supervision times.

FACULTY AND INTERN LISTS

In compliance with DoD policy, we are happy to provide you with a list of internship core and adjunct faculty including their training information and affiliations, curriculum vitae, a list of graduates from the program and their first assignment and/or a list of recent graduates who have agreed to be contacted by prospective applicants. To request any of these lists, please contact the program at:

Malcolm Grow Medical Clinics and Surgery Center
Air Force Psychology Residency Program
316 OMRS/SGXW
1060 W. Perimeter Rd
Joint Base Andrews, MD 20762
(240)-857-7186

Additional information about our program can also be found in our Resident Handbook, which is available on request.

APA ACCREDITATION STATUS

The MGMCSC internship program has been accredited by the American Psychological Association (APA) since 1998. We were most recently re-accredited in July 2015, for a full seven-year accreditation, the longest accreditation period APA grants. **Our next site visit is projected for some time between fall 2023 and winter 2024.** Questions related to the program's accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street NE, Washington DC, 20002
Phone: (202)-336-5979 / E-mail: apaaccred@apa.org
Web: www.apa.org/ed/accreditation

APPIC POLICY

This internship site agrees to abide by the Association of Psychology Postdoctoral and Internship Centers (APPIC) policy that no person at this training facility will solicit, accept, or use any ranking-related information from any internship applicant.

ADDITIONAL AIR FORCE REQUIREMENTS

1. Internship candidates are required to complete and pass a physical examination in order to be considered for a commission in the United States Air Force. All Air Force personnel are required to take annual/bi-annual physical fitness tests.
2. Intern applicants, like all Air Force psychologists, are required to have a background investigation in order to obtain a “secret” security clearance. An Air Force Health Professions Recruiter can give you more details regarding what this process entails.
3. All Air Force active duty members, including interns, are subject to random drug testing through urinalysis.

APPLICATION PROCEDURE

Contact the nearest **Air Force Health Professions Recruiter (AFHPR)** for additional information and application processing. Go to <https://www.airforce.com/find-a-recruiter> or <http://www.airforce.com> for the exact location and phone number of the nearest **AFHPR** or call 1-800-423-8183. Also, feel free to call the internship training director (contact information below) if you encounter problems in connecting with a recruiter.

Please note there are actually two application processes. One process is through the Air Force Recruiting Service and the second is through the APPIC on-line application to the individual Air Force internship site. Application packages are usually due to the US Air Force Recruiting Service Headquarters in early January (talk to the AFHPR for specific deadline). Since this can be a lengthy process it is important that interested applicants contact a recruiter as soon as they determine they are interested in pursuing an Air Force internship (engaging with a recruiter by early or mid-September is strongly encouraged). The recruiter will require the same materials the individual sites require as well as the completion of additional forms and a physical exam. Your AFHPR will guide you through the completion of the other Air Force specific forms and procedures and submit to the Recruiting Service for you. In addition to the APPIC application form, there are Air Force specific questions (see below) that should be addressed, in bullet format, as part of your cover letter.

Your APPIC materials will be printed from the website by the Air Force Recruiting Headquarters staff and included in your package for review by the Air Force selection board. This selection board examines applicant’s qualifications to serve as an officer in the Air Force. Selection board membership consists of the Psychology Consultant to the Air Force Surgeon General and the three Air Force Psychology internship training directors or their representatives. Only applicants selected by this board are able to be ranked for matching through APPIC by Air Force internship programs (i.e., applicants must be determined to meet basic qualifications to be an Air Force officer before training directors consider how well the applicant would match at the psychology internship). It is up to each Air Force psychology internship program to determine which applicants selected by the Air Force selection board are ranked and in what order for each particular program. Training Directors are not able to release the results of the Air Force selection board prior to Match Day.

Please call an AFHPR or Air Force Internship Training Director if you have any questions or uncertainties about this somewhat complex process. Note, in general, the AFHPR is the best source of information on the Air Force application process, Air Force requirements, and benefits. The Air Force training directors are the best source of information regarding specifics of the training program or Air Force psychology. Please do not hesitate to call. Contact information for the three Air Force Training Directors is below.

TRAINING SITES

While all three internship programs hold to the same standards and goals, each has its own distinctive location, character and emphases. Information about each site can be obtained from the Training Director at that facility:

Lt Col Stephen M. Stouder, Psy.D., ABPP

Aviation Psychologist

Mental Health Flight, 316 OMRS/SGXW

Malcolm Grow Medical Clinics and Surgery Center

1060 West Perimeter Rd

Joint Base Andrews, MD 20762

Voice: (240) 857-7186

Email: stephen.m.stouder.mil@mail.mil

Dr. Ann Hryshko-Mullen, Ph.D., ABPP-CHP, CBSM

59 MDOS/SGOWV

Wilford Hall Ambulatory Surgical Center

1100 Wilford Hall Loop, Bldg 4554

Lackland Air Force Base, TX 78236

Voice: (210) 292-5961

Lt Col David S. Tubman, Psy.D., ABPP

Clinical Health Psychologist

88 OMRS/SGXW

Department of Mental Health

Wright-Patterson Medical Center

(88th Medical Group)

4881 Sugar Maple Drive

Wright-Patterson AFB OH 45433

Voice: (937) 257-1367 or 257-6877

Current information on the 3 Air Force psychology internships may be found at this link:

<http://www.usafpsychologists.com/usaf-resident-sites>

APPLICATION INSTRUCTIONS

1. Complete the on-line **APPIC Standardized Internship Application Form**. For instructions on completing the application see the APPIC website at www.appic.org.
2. Use the on-line process and request **official transcripts of all graduate level courses**.
3. Arrange for a minimum of **three supporting letters** from your professors, program directors, supervisors or others with direct knowledge of your psychological knowledge, academic training, and research experience and/or supervised clinical experiences. A minimum of one letter should be from the current or previous year's clinical supervisor. The three supporting letters should be completed using the on-line process. General "character references" may supplement, but do not substitute for letters addressing your specific skills and training in psychology. Such letters should be uploaded as supplement data to the application.
4. Submit **Curriculum Vitae** listing honors, publications/presentations, research experience, clinical experiences, and other information relevant to your training and performance in psychology via the on-line application process. Additionally, information such as community involvement/volunteer service, leadership roles and other non-psychology jobs that demonstrate training or experiences relevant to potential roles as a psychology professional and officer in the Air Force may also be included.
5. Submit a cover letter that in addition to your introduction also answers, in bullet format, the Air Force Psychology Applicant Questions (see below) via the on-line application process as part of your cover letter.
6. We will provide the Air Force Health Professions Recruiting Service access to the APPIC on-line applications to enable them to print applications for their applicant files or provide them copies directly. Additionally, there are other requirements not associated with the APPIC application that the Air Force will require you to complete. The deadline for your recruiter's submission of these and other materials (e.g., medical examination documents, interview and recommendation by a Recruiting Service Flight Commander, other Air Force application forms) to the USAir Force Accessions Selection Board is **typically in early January**. Be sure to check with your recruiter regarding specific due dates. A phone call to any Air Force recruiting station will yield the exact location, phone number, etc. of the Health Professions recruiter you should contact. An on-line locator service is also available at <https://www.airforce.com/find-a-recruiter>. **The health professions recruiter is critical to the application process, providing information and assistance to you throughout the application process.** Recruiter assistance is particularly important in completing requirements for qualification as an Air Force officer, including application forms and physical examinations which must be completed before you can be considered for the internship program.
7. The Air Force also requires a "Senior Consultant" interview with any of the three Training Directors as part of the Air Force's general application process. All applicants will be interviewed; therefore, no specific interview notification is provided. **Applicants should contact Training Directors to arrange an interview.** Although only one "Senior Consultant" interview is required, applicants are encouraged to at least conduct a telephone interview with Training Directors from each Air Force internship program for which they wish to be considered.
8. The entire application process usually takes a minimum of two months so it is best to start by early September at the latest. Additionally, during this process your recruiter should be in regular contact with you to ensure that all procedures are progressing. Do not let more than about 2-3 weeks go by without contact from your recruiter. Finally, if you encounter problems with your recruiter, please contact one of the Air Force Internship Training Directors as soon as possible.
9. If you are interested in the Air Force, it is best to apply to all three sites to increase your chances of selection at an Air Force internship. **The deadline for submitting applications through the APPIC website is 15 November.**

10. At the Air Force Accessions Selection Board in late January, you will be deemed eligible or ineligible for an Air Force psychology internship from an Air Force perspective. Selection at this board does not constitute selection by the internship program, but rather it indicates that you are eligible for consideration by the Air Force internship programs. Training Directors are not able to release any information about who is selected at the Accession Selection Board prior to Match Day. From the list of eligible persons, each individual site Training Director will submit his/her own preferences in rank order to the APPIC match system.

11. When participating in the match, you must list each Air Force site you are interested in (in order of preference) as a separate site. Application to the individual sites is accomplished by selecting the Program's Code in the APPI on-line process. The Air Force training sites are MGMCSC, Wilford Hall, and Wright-Patterson. **MGMCSC's Program Code is 134311.**

12. Questions about the military application process and qualification as an Air Force officer should generally be directed to your Health Professions recruiter. Issues relevant to the profession of psychology or the specifics of the training programs should be addressed to the Training Director at one of the Air Force internship sites. Training directors are eager to work with strong applicants in determining whether our programs are well suited to your career plans and to offer any information you may need in planning this critical part of your professional education. You may call, e-mail, or write at any time.

13. Although the official Air Force deadline for application materials submitted through the recruiter is in January (see item 6 above), MGMCSC requests that the APPIC application be submitted no later than 1 December. The MGMCSC internship **typically hosts in-house interviews, which are by invitation only, during early December and again in early January.** At that time, in addition to seeing our program first hand and meeting staff and current interns, applicants receive interviews with site faculty members. At MGMCSC, such on-site interviews are not required, but are strongly encouraged. Applicants who are not able to visit on the dates of in-house interviews may request different dates for either an on-site or phone interview with the Training Director.

APPLICATION CHECKLIST FOR MGMCSC INTERNSHIP

Be Sure to Check for Changes in these Requirements

*Note: Required items may vary, and the list below may not be comprehensive.
Work closely with your recruiter to ensure that you submit requested materials quickly.*

Materials to be submitted through the AAPI and to the Air Force Professions Recruiter

- AAPI (due by 1 December)
 - Official Transcripts of all graduate level courses
 - Three letters of recommendation
 - Curriculum Vitae
 - Cover Letter (include Air Force relevant topics)
- Medical examination documents*
- Health recruiter interview, other Air Force application forms*

*NOTE: HPSP students are not required to re-accomplish these final two items.

Anyone having difficulty contacting or maintaining contact with a Health Professions Recruiter can go to <https://www.airforce.com/chat-live> for assistance

- In addition, be sure to arrange for a Senior Consultant/Training Director Interview



Air Force Psychology Applicant Questions Form

U.S. Air Force Psychology Internship Program

Revised October 2012



1. Why did you choose psychology as a profession?
2. Identify awards or public recognition that you have received for your academic accomplishments in your doctoral program.
3. Describe significant professional and community service activities you have engaged in during the past 5 years.
4. Describe notable leadership roles you have held and the impact you made (inside or outside of academia).
5. What do you believe are your most significant accomplishments?
6. Describe your short-term professional goals (1-5 years).
7. What type of professional life do you imagine for yourself 5-10 years from now?
8. Have you served in the military? Do you have close family or friends who have served as active duty military? What do you know about their experience?
9. What aspects of military service are attractive to you now?
10. What aspects of military service might present some difficulty or detract from the positive benefits you see?
11. Please discuss the benefits and limitations associated with military service in relation to your personal values

Internship Admissions, Support, and Initial Placement Data

INTERNSHIP PROGRAM TABLES

Date Program Tables are Updated: 1 Sep 2021

Internship Program Admissions

The Clinical Psychology Internship Program at Malcolm Grow Medical Clinics and Surgery Center (MGMCS) is based on a scientist-practitioner approach to understanding human behavior and providing psychological services. The purpose of the MGMCS psychology internship program is to prepare competent psychologists to provide empirically-validated mental health care services to military members and their families and to provide effective consultation to military leaders on issues related to military members' fitness for duty as well as risks to the public health of the local Air Force base community.

We intend our training activities to produce "generalist" clinicians who use careful, critical thinking skills to apply scientific evidence to the practice of psychology. We expect trainees to base their clinical decision making and treatments on strong empirical evidence when it is available. This critical thinking combined with a reliance on empirical science helps trainees minimize the inherent bias present in all human thinking, promotes the use of the most effective clinical strategies for patient care, and encourages the advancement of psychology as a health care profession.

Malcolm Grow Medical Clinics and Surgery Center's (MGMCS) Clinical Psychology training program provides training in all of the profession wide competencies (i.e., research, ethics and legal standards, individual and cultural diversity, professional values and attitudes, communication and interpersonal skills, assessment, intervention, supervision, and consultation and interprofessional/interdisciplinary skills) as required by APA standards of accreditation. Additionally, MGMCS provides program specific competency training in population health and officer development.

Required Minimum Number of Clinical Hours

Does the program require that applicants have received a minimum number of hours of the following at time of application? Yes.

If Yes, indicate how many:

Total Direct Contact Intervention Hours	No	Amount: NA
Total Direct Contact Assessment Hours	No	Amount: NA
Overall Total Direct Contact Hours	Yes	Amount: 500

Malcolm Grow Medical Clinics and Surgery Center's (MGMCS) Clinical Psychology training program requires a completed **minimum of 500 face-to-face hours** of supervised practicum experience by the time the application is submitted. NOTE: Training Directors take into account any applicant training opportunities and hours that may have been reduced due to COVID-19. Our training program does not require a specific breakdown or percentage of intervention hours to assessment hours to meet the minimum of 500 face-to-face hours requirement.

Describe any other required minimum criteria used to screen applicants:

The United States Air Force offers up to 24 fully funded one-year intern positions in clinical psychology across three training sites (Malcolm Grow Medical Clinics and Surgery Center, Wilford Hall Ambulatory Surgical Center, and Wright-Patterson Medical Center). The Air Force welcomes applications from all qualified persons who meet the following eligibility requirements:

- a. Be a U.S. citizen.
- b. Meet the health and fitness requirements for commissioning in the United States Air Force as determined by medical history and physical examination.
- c. Meet the standards for issuance of a secret security clearance as determined by history and background investigation.
- d. Satisfactorily complete all academic and practica requirements for the Ph.D. or Psy.D. in clinical, counseling, or combined professional-scientific psychology from an **APA-accredited graduate program** (Air Force Instruction 44-119, 7.9.2.1). This includes, at a minimum, the completion of preliminary and comprehensive examinations and doctoral dissertation proposal approval.
- e. Be ready for internship as certified by the Director of Clinical Training at their graduate program.
- f. Dissertation progress is a factor in the selection process. Completion of the dissertation prior to internship is **strongly** encouraged to allow for full participation in the wealth of training opportunities available during the internship.

Eligibility for commissioning as a United States Military Officer requires robust health as defined by a health history free of specified impediments, current physical strength/endurance tests, and impeccable moral character as defined by a life history free of impediment (specified list of exclusions related to ethical violations, personal finance/credit management, contacts with governmental authorities and law enforcement agencies, etc.) The main point of contact for questions regarding fitness for duty is a Health Professions recruiter from the Air Force Recruiting Service (AFRS). The Health Professions recruiter is authorized to screen for health, fitness, and legal conditions that may be disqualifying for service. To find your nearest recruiter, visit the following website:

<https://www.airforce.com/find-a-recruiter>

Financial and Other Benefit Support for Upcoming Training Year

Interns receive the rank, pay and benefits of an Air Force Captain, including competitive base salary, tax-free housing allowance based on regional cost of living, monthly food assistance, family medical coverage and optional family dental package, and time off including 30-paid vacation days plus all federal holidays. For specific salary and benefits, see the instructions included earlier in this brochure and the military active duty basic pay chart located at: <https://www.dfas.mil/MilitaryMembers/payentitlements/Pay-Tables/>.

Annual Stipend/Salary Full Time Interns **with dependents**: \$95,279 (\$7,939 per month)

Annual Stipend/Salary Full Time Interns **without dependents**: \$89,050 (\$7,420 per month)

Annual Stipend/Salary for Half-Time Interns: NA

Program provides access to medical insurance for intern?	Yes
Trainee contribution to cost required?	No
Coverage of family member(s) available?	Yes
Coverage of legally married partner available?	Yes
Coverage of domestic partner available?	No
Hours of Annual Paid Personal Time off (PTO and/or Vacation)	Yes
Hours of Annual Paid Sick Leave	No (see below)
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns in excess of personal time off and sick leave?	Yes

Other Benefits: Tricare, the medical insurance for military members, does require a relatively small annual deductible for individuals (\$300) and family members/dependents (no more than \$600 per family). Look at Tricare's website for more information: <https://www.tricare.mil/Costs/HealthPlanCosts/PrimeOptions>

Military members earn 30 days of paid leave per year (2.5 days per month). This is in addition to federal holidays or military family days (i.e., days when senior military leaders grant permission to have a day-off for service members). However, please note that interns are only allowed up to 10 days away from training (15 if dissertation is complete) in addition to federal holidays and military family days. If the medical condition prevents a service member from reporting to work for more than a single day, the service member will be evaluated by a medical professional and placed on convalescent leave (i.e., paid sick leave) for the appropriate amount of time; therefore, service members do not accrue a separate pool of sick leave hours. If necessary, it is permissible to take a medical leave of absence to receive appropriate treatment (e.g., cancer treatment, maternity leave after child birth). All medical leave is paid. For medical situations involving service members, family members, or dependents, it is important to note that if additional time is approved away from training (i.e., beyond the 10 or 15 days) it will result in a necessary extension in training to make sure all program requirements are completed. Another great benefit is that Air Force offers incentive and retention pay bonuses up to \$60,000 annually for fully licensed psychologists.

Initial Post-Internship Positions

	2019-2021	
Total # of interns who were in the three cohorts	22	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	PD	ED
Community Mental Health Center	0	0
Federally Qualified Health Center	0	0
Independent Primary Care Facility/Clinic	0	0
University Counseling Center	0	0
Veterans Affairs Medical Center	0	0
Military Health Center	0	22
Academic Health Center	0	0
Other Medical Center or Hospital	0	0
Psychiatric Hospital	0	0
Academic University/Department	0	0
Community College or other Teaching Setting	0	0
Independent Research Institution	0	0
Correctional Facility	0	0
School District/System	0	0
Independent Practice Setting	0	0
Not Currently employed	0	0
Changed to Another Field	0	0
Other	0	0
Unknown	0	0

The position of clinical psychologist in the Air Force is comparable to that of many civilian psychologists. Duties primarily depend upon the needs of the individual clinic or the Air Force community in which one works. Depending upon one's interests or skills, even in initial duty assignments, Air Force psychologists are typically given levels of responsibility and autonomy rarely seen in other contexts, and the MGMSCSC internship program prepares interns to effectively transition into their role as Air Force psychologists. The initial assignment invariably provides a superb foundation for a future military or civilian, clinical psychology career.