



AMANI

Clinical Services

Clinical Psychology
Post-Doctoral
Fellowship Program

2025-2026





**Clinical Psychology Post-Doctoral Fellowship Program at AMANI
Clinical Services:
Specialized Training in Systems: Pediatrics, Families, & Couples
Summer 2025- Summer 2026**



**2 Hours Individual
Supervision**

**2 Hours Group
Supervision:
Therapy &
Assessment**

**1 Hour Didactic
Training**

**Fully Stocked Play
Therapy And Art
Rooms**

**One Way-mirrors In
Offices For
Observation And
Live Supervision**

**Pediatric, Teen,
Adult, Geriatric
Testing**



A Supervisor Team That Delights In Training And Strongly Identifies As Supervisors

Pediatric, Health, Addiction, Reproductive/Family Formation Specialties

Spa-like Environment



Aim of Our Training Program

AMANI Clinical Services aims to equip the next generation of Clinical Psychologists to provide systemically and holistically focused, culturally competent, and internationally grounded services to patients and their families throughout the lifespan.

AMANI Values

AMANI Clinical Services has been in practice for 12 years, first as Dr. Hastings & Associates and then re-branded about 5 years ago as AMANI Clinical Services. AMANI Clinical Services is a place where people come to heal. We pride ourselves in personalized, boutique-style care from the moment a prospective patient first makes contact with our New Patient Concierge and through every level of the care and interaction they receive from our amazing administrative team and the entirety of their clinical treatment. We value a personalized, boutique style approach to supervision and training and seek to mentor our trainees along their unique path of professional development. Our approach with our patients is similar to our training approach—it is **warm and understanding AND results oriented, compassionate and developmental AND challenging. Flexible AND rigorous.**

AMANI Clinical Services

A Dr. Hastings & Associates LLC Company
15 Spinning Wheel Rd., Suite 116
Hinsdale Illinois 60521

www.amaniclinical.com



Definitions of AMANI

We chose AMANI as our name because of its meaning in multiple languages, and how those meanings capture our aims.

In Sanskrit, AMANI means road and way

In Swahili (a language spoken throughout Eastern Africa and is deeply important to Dr. Hastings), AMANI means peace, safety, and security

In Inuit, AMANI is a suffix that notes presence and location.

In Arabic, AMANI means love.

Our **value is to work with people of all ages** (starting with newborns in parent-child dyads, all the way to geriatrics) to help sift through their life circumstances and symptoms. We help people find their way to a sense of peace, security, and wellbeing. Each one of us works hard to help our patients find peace, presence, and love in their most important relationships. We also talk a lot about cultivating each patients' "emotional GPS," so that patients learn to locate themselves, their needs, and the driving forces of their symptoms.

Our Patients Get Better

We are **warm, understanding...AND results oriented and challenging**. Our patients enjoy watching themselves change over time and we enjoy celebrating with them! Everyone's journey towards change, symptom reduction, and well-being is different. We tailor each patient's treatment plan to best fit their unique style of growth, goals, and life circumstances. We are strongly committed to systemic conceptualization and treatment for all of our patients, and tailor the level of intervention to the needs of the patients.

We do not do "bobble head" therapy here. We value the expertise of each provider, and also honor the inherent expertise each patient brings regarding their own phenomenological experiences. Our approach is **integrative** and along the spectrum of client-led to structured, we err on the side of active for most cases. We are highly influenced by **Integrative Systemic Therapy** and as such, sequence interventions which are integrated from evidence-based models for specific presenting problems to achieve the most efficient symptom relief for our patients. We know what works and balance that knowledge with the art of psychotherapy.

APA's Professional Competencies Are the Foundation of Our Training Objectives

The guidelines for training recommended by APA's Commission on Accreditation (CoA) are our foundation. In congruence with the Standards of Accreditation, we seek to provide training in the nine profession-wide competencies (PWCs) for health service psychologists.

1. **Science, Research, & Evaluation: Utilization and acquisition of scientific knowledge; program/outcome evaluation; and conduct and dissemination of scientific research.**
 - a. The Fellow demonstrates independent proficiency in critical evaluation of empirical literature, integration of literature into clinical practice, and uses empirical literature as a foundation for case conceptualization and professional presentations.
2. **Ethical & Legal Standards: Patient risk management, confidentiality, ethics and the law.**
 - a. The Fellow displays ethical and legal conduct and comportment in professional activities.
 - b. The Fellow demonstrates knowledge of, and behavior that is congruent with APA's Principles of Psychologists and Code of Conduct (most recent version).
 - c. The Fellow demonstrates awareness of ethical conflicts and demonstrates an ethical decision making process which is applied to conflicts to resolve them.


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- d. The Fellow demonstrates a strong foundation of knowledge of, and will act in accordance with, relevant laws, regulations, rules, and policies applicable to the delivery of health service psychology services in all systemic levels (e.g. at the organizational, local, state, regional, and federal levels).

3. Cultural & Individual Diversity: Sensitivity to patient diversity and awareness of one's own cultural background.

- a. The Fellow demonstrates proficiency in independent application of their knowledge of diverse populations and personal/individual characteristics. This knowledge results in effectively working with a range of diverse individuals and groups.
- b. The Fellow demonstrates understanding of the role of diversity in the context of theoretical and empirical models in all professional activities.
- c. The Fellow demonstrates an integrated understanding of the role of their own biases, attitudes, and personal/cultural history on interactions with people different from themselves.
- d. The Fellow displays integrated awareness and knowledge of individual and cultural differences in various professional roles. The Fellow demonstrates proficient application of a model or framework which supports the provision of effective services within areas of individual and cultural diversity the Fellow has not previously experienced yet in their career.
- e. The Fellow demonstrates the ability to work proficiently with people or systems whose identity, characteristics or worldviews are in conflict with their own.

4. Professional Values, Attitudes, & Behaviors: Professional interpersonal behavior; professional responsibility; efficiency, administrative competency, and time management; and use of reflective practice and self-care in professional development.

- a. The Fellow utilizes self-reflective processes, focusing on their functioning in personal and professional domains. The Fellow pursues activities which support, maintain, and improve their performance and efficacy in service delivery, as well as well-being.
- b. The Fellow actively seeks feedback and supervision, as well as demonstrates responsiveness, and openness to feedback and supervision. The Fellow demonstrates integration and synthesis of feedback and supervision in their personal and professional activities.
- c. The Fellow conducts themselves in a manner that reflects the values and attitudes of psychology. The Fellow demonstrates integrity, deportment, professional identity, accountability, lifelong learning, as well as concern for the welfare of others in their professional and personal choices.
- d. The Fellow demonstrates developing proficiency and efficacy in responding professionally to increasingly complex situations with increasing autonomy.

5. Communication & Interpersonal Skills: Effective interpersonal communication and appropriate use of supervision.

- a. The Fellow demonstrates proficiency in managing challenging and/or conflictual communication well.
- b. The Fellow develops and maintains supportive relationships with a wide range of individuals, including other staff/professionals, colleagues and peers, supervisors and supervisees, parents and loved ones of patients, professionals in related disciplines, organizations, and patients.
- c. The Fellow proficiently comprehends and produces communications that are well written, well integrated, and which transmit knowledge in digestible ways in oral, nonverbal, and



written domains. The Fellow consistently demonstrates a synthesized and thorough grasp of professional language and concepts.


- d. The Fellow demonstrates proficiency in interpersonal skills, awareness and understanding of the impact of their interpersonal interaction patterns, and overall effective communication.

6. Psychological Assessment & Diagnosis: Assessment and diagnostic skills; clinical interview skills; and competencies associated with neuropsychological assessment.

- a. The Fellow proficiently selects and applies assessment methods. The Fellow demonstrates continuous professional development and awareness of the latest empirical literature and assessment methods.
- b. The Fellow demonstrates up-to-date knowledge of professional diagnostic classification systems, as well as functional and dysfunctional behaviors patterns and sequences. The Fellow integrates information related to dysfunction with an understanding of patient strengths fluently.
- c. The Fellow demonstrates proficiency in the collection of multi-source and multi-method data as appropriate to the assessment referral questions, initial data analysis, and relevant diversity/personal characteristics of the patient.
- d. The Fellow demonstrates proficiency in accurately interpreting assessment data in accordance with research and best practices. The Fellow proficiently analyzes, synthesizes, and conceptualizes multi-source and multi-method data in congruence with professional standards and guidelines. The Fellow's analysis and conceptualization supports a holistic, developmental understanding of the patient, classification if appropriate, and recommendations including treatment sequences. The Fellow displays awareness of, and proficiency in, prevention of decision-making biases.
- e. The Fellow produces oral and written communication of evaluation findings, and implications of assessment data, accurately to a spectrum of audiences based on needs and resources.
- f. The Fellow demonstrates proficient understanding of the systems and interaction patterns/sequences which affect human behavior and contextualize it. Functional and dysfunctional behaviors are contextualized and systemically analyzed in the diagnostic and evaluation process.

7. Psychotherapeutic Intervention: Goals in this domain include patient rapport building and maintenance; case conceptualization and treatment planning; psychotherapy; case management; group therapy; and clinical intervention.

- a. The Fellow demonstrates proficiency in establishing and maintaining supportive and effective therapeutic relationships with diverse clients with diverse concerns, symptoms, diagnoses, strengths, and constraints.
- b. The Fellow demonstrates effective formulation of treatment strategies and sequences. Formulated treatment integrates systemic analysis, theory, up-to-date evidence-based information, evaluation findings if applicable, diversity and personal characteristics.
- c. The Fellow effectively and fluently implements interventions which are grounded in current empirical literature, understanding of systems which contextualize the patient, evaluation findings if applicable, diversity and personal characteristics. The Fellow fluently utilizes relevant empirical and scientific literature in their clinical decision-making process.
- d. The Fellow flexibly and consistently evaluates the effectiveness of interventions and solution sequences and adapts interventions, solution sequences, and methods based on ongoing evaluation.

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8. **Supervision, Education, & Training: Provision of supervision and developing teaching/training skills through presentations at seminars, case conferences, and team meetings.**
 - a. The Fellow demonstrates proficiency in applying knowledge of supervision models, experiential learning knowledge derived from supervisory relationships, and information from empirical literature in peer supervision with colleagues and a practicum trainee.
 9. **Consultation & Inter-professional Collaboration: Development of consultation skills in interdisciplinary practice.**
 - a. The Fellow demonstrates knowledge of, respect for, and proficient understanding of the perspectives and treatments offered by other professions and professionals. The Fellow demonstrates proficiency in communicating possible benefits of referrals to other professionals to patients and their systems.
 - b. The Fellow demonstrates effective application of knowledge about other professions during consultation with other health-care professionals and/or health or behavior systems.

Post-Doctoral Fellowship Requirements

Structure

12 month, 2000 hour full-time Post-Doctoral Fellowship

Due to our setting, and the needs of our patients, **Fellows are required to be on-site** and engage in the direct delivery of psychological services **3 evenings/nights per week and a weekend day OR 4 evenings per week to ensure that 2000 hours are met within 12 months.** Which option above will be **determined by the Supervisory Team** and be **based on licensure.** The training program is **immersive** and **hands on, with an emphasis on learning by doing.** About 25 hours per week will be spent in direct provision of psychological services, or about 65% of your time.

Our training year runs from August 4, 2025 to July 31, 2026.

Program Designed to Meet Requirements for Licensure as a Licensed Clinical Psychologist in Illinois

Illinois requires:

- 1750 post-doctoral supervised practice.
Our post-doctoral training program is designed such that the Post-Doctoral Fellow will accrue 2000 hours.
- Post-doctoral hours may not be accrued in less than 50 weeks nor more than 36 months.
Our post-doctoral training program is 52 weeks.
- Hours may be accumulated full-time or part-time. Full-time is defined by 35 hours per week, in a single setting, for 6 months.
Our post-doctoral training program is Full-time, 40 hours per week, in a single setting, for 12 months.
- Post-Doctoral Fellows must be personally and individually supervised by a Clinical Psychologist, face-to-face, whose license is in good-standing in the state of Illinois, for at least 1 hour per week.
Our training program has 3 Clinical Psychologists who are licensed in Illinois and in good standing. Post-Doctoral Fellows receive 2 hours of face-to-face individual supervision per week with a Licensed Clinical Psychologist.

Your post-doctoral work must be done under the complete professional control and responsibility of your supervisors.

Our supervisors are hands-on, involved, and highly dedicated professionals that control and take responsibility for the work of their supervisees.

Candidacy Requirements For All Trainees

1. **Evidence of degree conferral provided by start date of Fellowship from an APA-accredited or CPA-accredited doctoral program in counseling or clinical psychology. We are also willing to consider an applicant whose program is not APA-accredited** if the program prepares students adequately from a practitioner-scholar model and if the course sequence produces sufficient mastery of APA's core competencies to prepare the applicant for our training program.
2. We require **official graduate school transcripts** to ensure appropriate exposure to key areas of competence.
3. A **curriculum vitae** outlining clinical experiences and any additional experiences—specifically volunteer work in the social service sector are preferred. Teaching, teaching assistance-ships, or leadership experiences are valued.
4. Applicants must have completed (or be in the process of completing) **at least an 1800 hour APA or CPA accredited, APPIC member doctoral internship, or doctoral internship that meets APPIC standards** after completing at least 3 years of supervised, clinical experience.
5. We value the opinions of previous clinical supervisors and professors that have played a key role in the professional development of the applicant. Thus, we require **3 reference letters** provided by members of the applicant's faculty and/or clinical supervisors. We **prefer letters from previous clinical supervisors**
6. As a training site, we are focused on the **systemic treatment of pediatric patients and their families**. Previous supervised, clinical experience working with children and/or the demonstration of significant volunteer/charity work/childcare with children is required. A genuine interest in working with children is necessary to thrive in our environment. Child and adolescent development, child psychotherapy, family and couple therapy courses are required.
7. Similarly, Fellows are required to work 3 evenings and a half-day on Saturday or 4 evenings.
8. Fellows will need to **successfully pass a preemployment screening** which includes a drug test and a background check. We do recognize that marijuana is now legal in Illinois. However, use of marijuana will show up on the drug test. Failure to pass these processes will result in ineligibility to train at AMANI.
9. **Malpractice insurance coverage**. You must provide us with a copy of this insurance.
10. Completion of AMANI **orientation process** including HIPAA, Theranest, DCFS, etc.
11. **Previous administration of at least 8 psychological/neuropsychological batteries is preferred**, specifically with children. Experience with diagnostic interview, measures of intelligence and academic achievement, neuropsychological, and personality assessment measures are preferred. A de-identified psychological assessment report must be provided with the application.
12. Applicants with **diverse phenomenological experiences** and backgrounds are welcomed and encouraged to apply.
13. Some **level of licensure** in mental health in the state of Illinois (Licensed Professional Counselor-LPC; Licensed Clinical Professional Counselor-LCPC) is preferred **but not required**.

Application


1. Cover letter
2. Curriculum Vitae

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3. A de-identified psychological assessment report writing sample
 4. 3 letters of recommendation. Preference for letters from clinical supervisors and/or professors with significant knowledge of the applicant's clinical strengths.
 5. Official graduate school transcripts

Interview Process

1. Interview with the Clinical Director/Owner Dr. Massey-Hastings and practice manager Ryan
2. Interview with the Supervisory Team
3. Interview with the Clinical Team
4. Tour of our site (if possible)
5. Meet and greet with as many of our administrative team as possible

Benefits


- \$55,000 year W2 salary/stipend paid bi-weekly
- Excellent Blue Cross Blue Shield PPO health insurance, 2 plan options, with \$200 per month site contribution; deducted pre-tax which may lower your tax liability
- Dental PPO
- 10 days of paid time off (PTO)
- 8 paid holidays
- \$500 training stipend
- Opportunity to acquire short term disability insurance including maternity coverage, critical illness insurance, accident insurance, and cancer protection insurance. All plans are transportable and can follow you to next place of employment
- Opportunity to contribute to retirement savings account
- AMAZING full administrative staff support for scheduling, case load management and coordination, charting/medical record keeping, new patient set up, etc. They genuinely approach their support of providers with a concierge mentality to ensure you are best supported in the provision of care.

Ideal Applicants

The members of our supervisor team strongly identify as supervisors and approach training and supervision with dedication and genuine enthusiasm. We have a supportive and warm environment with a healthy dose of laughter and fun that is cultivated by each member of our team.

Thus, we are looking for applicants and trainees that:

1. Are hungry for learning, growth, and challenge.
2. Can independently problem solve.
3. Can seek and are comfortable receiving support, supervision, consultation, validation, and challenge.
4. Are assertive communicators.
5. Trainees that enjoy collaboration, exploration, and self-discovery would fit best. Applicants that have experience with children and teens, specifically clinical experience, are preferred.
6. Interested in the following clinical areas:
 - a. As a training site, we are focused on the systemic treatment of pediatric patients and their families. Previous supervised, clinical experience working with children and/or the demonstration of significant volunteer/charity work/childcare with children is required. A genuine interest for working with children is necessary to thrive in our environment. Child and adolescent development, child psychotherapy, family and couple therapy courses are required.

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- b. We are a clinic that exists in an affluent suburb of Chicago and meets patients' needs at the outpatient level. **We emphasize systemic treatment.** The populations that we serve are broad and representative of the diversity of our supervisor team. We serve patients across the developmental lifespan.
1. Adoptees and families formed by adoption; specializing in the unique needs of adoptees; trans-racial adoptees
 2. Those involved in the family formation process including reproduction, infertility and trying to conceive, and adoption
 3. Parent-infant dyads and children in early childhood
 4. Those with substance abuse and addiction as well as those with process addictions
 5. Chronic and complex medical needs
 6. Those suffering from Adverse Childhood Experiences and other traumas
 7. Perinatal and post-partum populations

Weaknesses in Populations Served

In an affluent suburb of Chicago at the outpatient level, there are several populations that doctoral Fellows will not likely be exposed to in a meaningful way. We consider this a significant gap in the training that we can offer.

1. Diverse socio-economic backgrounds
2. Culturally diverse and historically underrepresented and served communities such as Black, Latin X, and Asian-American communities.


Model of Training & Supervision

Values & Goals

Our Fellowship program is designed to offer the Fellow a rigorous, practitioner-scholar generalist training experience in a private practice, outpatient setting with a focus on Systemic Thinking and specialization in Pediatrics, Families and Couples. The private practice, outpatient setting is much like a primary health care setting for mental health in its clinical diversity. There is great breadth of patient presentation with significant diversity in age, sexuality, cultural and religious affiliations, systemic needs, diagnosis, treatment goals, and need for collaboration with community-based providers and systems. **Fellows are valued members of our clinical team and of our organization.** As a developing Fellowship program that values the pursuit of excellence, we deeply value the feedback of our trainees to help us refine our training program. We are an active team and will actively integrate Fellow feedback and ideas.

Our main goal is to comprehensively prepare scholar-practitioners as generalists who provide high-quality, efficacious direct therapeutic and assessment services in a manner that is culturally sensitive and competent, globally aware and internationally informed, integrative, and skilled in systemic intervention. We believe that professional psychologists, like all health care professionals, must be life-long learners and problem solvers.

Thus, we have an environment of intellectual stimulation, consumption of research, and translation of research into clinical practice. We engage in the exploration of intellectual inquiry and examination. Fellows are encouraged and supported in submitting posters and presentations to conferences and may also be afforded opportunities to co-author presentations with our Supervisory Team. We focus extensively on best-practice. Exposure to best practice principles occurs through supervision, training, exposure to other trainees, and didactic learning activities. We hope to prepare the Fellow for professional practice by helping the Fellow to acquire a broad base of clinical skills—and the wisdom and proficiency to know in which clinical circumstances and how to masterfully implement those skills.



Our training program, our Supervisory Team, and all members of our staff are held to the legal expectations of mental health professionals in the state of Illinois and to the American Psychological Association's Ethical Principles of Psychologists and Code of Conduct.

Our **supervision philosophy** is grounded in our Fellowship goals:

1. Fellows will be trained and supervised utilizing a model that honors the development of the Fellow during a formative year of clinical training which refines and prepares a generalist practitioner. Fellows will receive personalized supervision and significant access to supervisors with an emphasis on apprenticeship and mentorship. Our boutique practice model ensures personalized, tailored care for our patients and that is how we approach training as well. We want to help you grow and traverse your path to professional development.
2. Clinical caseload is designed to increase in number and clinical complexity and support a cumulative training experience. Learning activities are planned and sequenced to support the developmental progression of the Fellow. Tasks assigned within neuropsychological battery administration, report writing, and analysis will follow a prescribed plan based on level of developmental progression.
3. Fellows will increase mastery in foundational and generalist competencies as described by the APA to a level acceptable of a doctoral Fellow through an emphasis on the direct delivery of clinical services.
4. Fellows will increase their mastery of clinical skills and treatment modalities necessary to treat a vast variety of clinical presentations, demographics, and systemic needs. Fellows will build clinical skills that facilitate the development of human resilience in the Fellow's patients and their systems.
5. Fellows will develop and/or refine competency in key risk assessment skills, level of care determination and recommendation conversations, and crisis management skills.
6. Fellows will increase their breadth and depth of understanding of theories of change and theoretical models of treatment.
7. All Fellows will increase mastery in the process of psychological and neuropsychological testing for children, adolescents and adults.
8. The advanced Fellow will also increase competency in the delivery of several specialty areas as represented by our diverse supervisor team, including:
 1. psychotherapeutic treatment of children and their families;
 2. psychotherapeutic treatment of couples;
 3. health-psychology focused psychotherapy;
 4. third-wave Cognitive Behavioral Therapy and ACT treatment
 5. psychotherapeutic treatment of substance abuse, addiction and process addictions
 6. special population competency: adoptees and members of the adoption triad
 7. treatment for complex trauma
 8. neuropsychological evaluations of children, adolescents, and adults;
 9. professional speaking and presentations;
9. The Fellow will increase competency in clinical collaboration with community-based multi-disciplinary treatment professionals.
10. The Fellow will be exposed to outside clinical psychologists and other health-focused professionals.
11. The Fellow will have the opportunity for exposure to grass-roots and non-governmental agency mental health efforts in Tanzania due to the Clinical Director's consultation and charity work with the Ilula Orphan Program.

Model of Training & Fellow Development

We emphasize a **developmental model** with emphasis on **apprenticeship and mentorship that is sequential in clinical complexity** as the doctoral Fellow develops in key areas of competency. We value the role and relationship of the Clinical Supervisor and the role all other members of our team play in the development of the Fellow.

The training curriculum will support development, apprenticeship, and **cumulative skill development** of the Fellow through:

Individual Supervision	Group Supervision	Learning Opportunities/Didactics
1 hour weekly with primary supervisor who is a Licensed Clinical Psychologist	1 hour weekly clinical group supervision with clinical staff and trainees (Thursdays @12pm)	Weekly didactics and learning opportunities (Thursdays at 1pm)
1 hour weekly rotating with secondary supervisors who are Licensed Clinical Psychologists	1 hour weekly diagnostic/assessment group supervision (Thursdays at 2pm)	Bi-weekly testing lab: psychological and neuropsychological test administration training and report writing support with a Licensed Clinical Psychologist and/or psychometrist (day/time to be decided)
		Quarterly consult with outside psychiatrist on cases

Our **primary supervision model is integrated** and inclusive of administrative, clinical, and supportive supervision to trainee. We provide **supportive, skills-based, and process-oriented** supervision to the Fellow. Supervisors will educate supervisee on techniques/interventions for varied populations, while cultivating trainee clinical strengths and problem-solving individual growth edges that present throughout the course of provision of care. **Our approach to supervision is to emanate a non-judgmental stance, professionalism, compassion, empathy, and warmth with high expectations that inspire and encourage the development of the Fellow. We dialectically balance** a warm/ supportive and challenging approach to supervision. Developmental models of supervision focusing on integrated development in administrative, assessment, professionalism, and clinical areas are emphasized.

We have designed it sequentially to support the personal and professional development of the doctoral Fellow in main areas of competency and is supportive of increasing clinical acuity and independence throughout the progression of the training year. All direct delivery of psychological services are supervised by the Supervisory Team, comprised of both Licensed Clinical Psychologists and a Licensed Clinical Professional Counselor.

Our training sequence occurs in **3 phases**:

<p>Supervision Methodology</p> <ul style="list-style-type: none"> • Supportive and challenging, • Directive, skills-based and evidence based. • It will prepare doctoral Fellows for the second phase of training. 	<p>1: Orientation</p> <ul style="list-style-type: none"> • The <i>first phase</i> is the general orientation phase, which involves a multi-day, detailed series of presentations regarding the policies and procedures of the AMANI Clinical Services Training Program. • Site orientation, which allows doctoral Fellows to settle in and interact with members of the team. • Doctoral Fellows will also be briefed and oriented to their upcoming clinical schedule. Fellows will meet with their supervisors to review their self-assessment of areas of competency and growth in the context of the orientation phases and determine a plan for supervision. • Doctoral Fellows will meet with the practice Psychometrist manager and be oriented to the plan for assessment training. Fellows will be oriented to risk and level of care assessment.
<p>Supervision Methodology</p> <ul style="list-style-type: none"> • Supportive and challenging, • Directive, skills-based, and evidence based. • Acquisition of clinical skills and knowledgeable implementation of skills is emphasized. • Systemic analysis and intervention is emphasized. • Clinical problem solving and risk assessment are targeted. 	<p>2: Experiential Learning</p> <ul style="list-style-type: none"> • The <i>second phase</i> of training will begin quickly, in line with our emphasis on experiential learning through the immersion in direct delivery of psychological services. • Advanced Fellows begin to be scheduled with new patients for intake interviews, begin initial assessment and diagnosis processes, begin treatment planning (advanced), and initiate a course of treatment with their patients (advanced). Doctoral Fellows work with their supervisors regarding the characteristics, needs, and complexities of the cases. Cases will be added in a titrated manner until case load is achieved. • Advanced Fellows and psychodiagnostic/assessment Fellows will also begin working with the practice Psychometrist manager and testing Psychologist to begin the process of testing, scoring, and writing sections of reports. Proficiency will be assessed with an emphasis on modeling and live supervision which will be titrated as the Fellow's mastery and independence increases.
<p>Supervision Methodology</p> <ul style="list-style-type: none"> • Supervision becomes more process-oriented. Supervision will also become more personalized to the needs of each Fellow and their personal rate of progress and development. • Clinical application of scholarly research, critical thought and higher-order conceptualization, systemic conceptualization and intervention and assessment become foci. • Fellows will be encouraged to share their knowledge regarding special interest areas and provide consultation to the team. 	<p>3. Growing Independence & Consolidation</p> <ul style="list-style-type: none"> • The <i>third phase</i> involves increasingly independent, supervised work on the part of the Fellow. • The Advanced Fellow will be expected to serve as a leader in group supervision, will implement and monitor treatment plans, will engage in case consultation and collaboration with other health professionals and systems, will complete risk assessments, and will be encouraged to develop more integrated, systemic, and in-depth conceptualizations of their patients. • Assessment Fellows will present 1 assessment case per quarter in group supervision. As skills develop, Assessment Fellows will also be afforded opportunities for increased independent tasks in the assessment process.

Supervisor expectations for trainee include legal and ethical provision of care and seeking supervision in challenging/uncertain experiences. We expect that the **supervisee will approach the rigorous training experience of Fellowship with an intrinsic desire to grow, learn, and absorb.** This will be demonstrated by coming to supervision with organized notes and items to focus on that are particularly challenging. We expect that the Fellowship will **acknowledge that feeling overwhelmed is an inherent part of the learning process that should be honored** and will solve the problem by learning new material and seeking mastery, as well as seeking support. We expect that the doctoral Fellowship will **practice honesty with him/her/their self and supervisors re growth-edges, missteps, and struggles.**

We take the legal requirement and ethical duty of documentation very seriously. The practice-wide expectation is that all clinical notes are completed **no later than 24 hours post-session for Post-Doctoral Fellows who are licensed in Illinois and before the end of the day for pre-licensed Fellows.** The doctoral Fellow will **review their charts** for errors weekly, and the Fellow will review supervisor feedback on documentation weekly.

Fellows are expected to follow and adhere to all practice policies and procedures.

Structured Learning Activities Schedule

Activity	Day	Hours	Description
Clinical Group Supervision-Therapy	Each Thursday 12pm – 1pm	1 hour per week	Weekly therapy clinical group supervision with clinical staff including clinical psychologists, counselors, and trainees. Post-doctoral fellows are expected to participate in clinical group supervision by participating in structured case conceptualization practice, offering clinical information, receiving clinical information, and collaborating effectively with other clinical staff that is treating other parts of the system. Additionally, fellows will present 3 cases formally. Post-doctoral fellows are also expected to participate by offering support and demonstrating critical thought about cases of other clinical professionals. Fellows will present their end of year portfolios to the group as well.
Didactics	Each Thursday 1pm-2pm	1 hour per week	Weekly didactics and learning opportunities with other clinical staff and trainees. Topics are identified in advance and demonstrate a sequential progression of mastery of theoretical concepts and clinical skill. Modifications to the didactic schedule will be made based on clinical needs of patients and training needs of Fellows and other trainees. May also include outside psychologist presentations. <i>Fellows will be required to present 1 didactic training. Fellows will also be required to present 1 psycho-educationally focused training based on directed practice principles.</i>
Clinical Group Supervision-Diagnostic & Assessment	Each Thursday 2pm-3pm	1 hour per week	Weekly diagnostic and assessment group supervision with a Licensed Clinical Psychologist. Diagnostic interviewing skills, foci of upcoming diagnostic interviews for assessment cases based on paperwork received, battery selection, behavioral plans for supporting administration of next week's cases, review of data and decision making regarding additional information that would benefit the assessment, creating assessment summaries focused on integration of data, and preparation for feedback will be practiced.
Group Consultation with Child/Adolescent Psychiatrist	Quarterly on Wednesdays	1 hour per quarter	Quarterly group consultation with outside Child and Adolescent Psychiatrist, Dr. Iyad Alkhouri
Illinois Marriage & Family Therapy Conference	Usually in March	2 training days	Attendance at the Illinois Marriage & Family Therapy conference sponsored by the training program
International Family Therapy Association World Congress	Usually in March	2 training days	Attendance at the International Family Therapy Association congress sponsored by the training program if the Fellow chooses to pay for travel/accommodation



Learning Opportunities

We are passionate and involved in supporting the Ilula Orphan Program in Ilula, Tanzania (in East Africa). Interested Fellows may have the opportunity to travel to Tanzania and experience a culturally immersive experience while focusing on the effects of poverty on life and orphaned children. A large portion of the trip will be sponsored by AMANI (See separate handout for more information).

- You'll support the IOP Center through various volunteer projects while receiving daily group supervision and didactics.
- Opportunities to experience: Tanzanian culture
- Mental health and human services professions in Tanzania
- The Ilula Orphan Program, subprograms, schools, and farms
- Safari at Ruaha National Park
- Maasai Tribe cultural visit
- Visit to Isimila Stone Age Site
- Extensive learning about trauma, institutional settings, and child development

Support for Learning

- The Training Program will sponsor conference fees for the Fellow to attend the **Illinois Association of Marriage and Family Therapy Association Conference**. The Training Program will also **sponsor conference fees** for the Fellow to attend the International Family Therapy Association conference if the Fellow chooses to travel for the conference.
- The Training Program will **sponsor conference fees** for the Fellow for **any other conference** they wish to attend if they have an **accepted poster or talk presentation that they have personally authored**. The Director of Training has extensive experience in presenting and has been published and will provide additional supervision to support the Fellow in this process.

Learning Activities

- Individual Supervision
- Group Supervision
- Weekly Didactics
- Neuropsychological Assessment with emphasis on conceptualization of whole person
- Psychotherapy across the lifespan with individuals and systems (couples, parents, families, siblings)
- Systemic consultation and collaboration with clinical team and external, related disciplines
- Quarterly Consultation with Psychiatrist
- Requirement: 3 Case Presentations
- Requirement: Didactic Presentation
- Requirement: Testing Battery Case Presentation
- Domestic & International Conference attendance opportunities
- Peer Supervision
- Leading Group Supervision
- Case Collaboration Consultations with: psychiatrists, pediatricians and primary care physicians, neurologists, therapists,
- pelvic floor physical therapists, occupational therapists, speech pathologists, school districts,
- IEP meeting attendance, teachers and social workers,
- staff of higher level of care facilities
- etc.
- Daily completion of billing responsibilities
- Daily completion of medical record
- Neuropsychological Assessment case management start to finish
- Opportunity to practice program development
- Articulation of experience to guide post-doctoral fellowship program modifications



2025 - 2026 DIDACTIC SCHEDULE (TENTATIVE)

DATE	TOPIC	PRESENTER
8/7/25	DSM V Diagnosis in Outpatient Treatment	Ms. Amanda Owen, MA, LCPC
8/14/25	Parent Management Training I	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
8/21/25	Basic Testing Administration Skills	Dr. Collins, PhD, LCPC, CADC, Post-Doctoral Fellow
8/28/25	3 rd Wave Therapy Intervention Skills I	Dr. Daniels, PsyD, Licensed Clinical Psychologist
9/4/25	CBT Therapy Intervention Skills I	Dr. Kroencke, PhD, Licensed Clinical Psychologist, HSP
9/11/25	Infant, Toddler, & Early Childhood Development & Family Systems	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
9/18/25	Integrative Systemic Therapy & Working With Disrupted Families	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
9/25/25	Documentation Requirements: Legal & Contractual	Ms. Amanda Owen, MA, LCPC
10/2/25	Documentation Requirements: Clinical, Ethical and Privacy Consideration	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
10/09/25	Documentation Requirements: Professional Writing Skills	Dr. Daniels, PsyD, Licensed Clinical Psychologist
10/16/25	Creative Interventions with Kids I	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
10/23/25	Parent Management Training II	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
10/30/25	3 rd Wave Therapy Intervention Skills II	Dr. Daniels, PsyD, Licensed Clinical Psychologist
11/6/25	CBT Therapy Intervention Skills II	Dr. Kroencke, PhD, Licensed Clinical Psychologist, HSP
11/13/25	Play Therapy	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
11/20/25	Middle & Late Childhood Development & Family Systems	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C



11/26/25	Basic Testing Administration Skills II	Dr. Collins, PhD, LCPC, CADAC, Post-Doctoral Fellow
12/4/25	Narrative Exposure Therapy, Prolonged Exposure & Judith Herman I	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
12/11/25	Narrative Exposure Therapy, Prolonged Exposure & Judith Herman II	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
12/18/25	Narrative Exposure Therapy, Prolonged Exposure & Judith Herman III	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
12/25/25	Narrative Exposure Therapy, Prolonged Exposure & Judith Herman IV	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
1/1/26	Narrative Exposure Therapy, Prolonged Exposure & Judith Herman V	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
1/8/26	Working with Grief	Dr. Kroencke, PhD, Licensed Clinical Psychologist, HSP
1/15/26	Office Closed	--
1/22/26	Office Closed	--
1/29/26	Families Formed Through Adoption & Adoptee Needs I	Amanda Owen
2/5/26	Trainee Didactic Presentations	Supervisor Team
2/12/26	Trans-diagnostic Symptoms in Children & Adolescents and Trans-diagnostic Treatments	Supervisor Team
2/19/26	Working with Addiction	Ms. Daniels
2/26/26	Working with Chronic Health Conditions	Dr. Collins, PhD, LCPC, CADAC, Post-Doctoral Fellow
3/5/26	Exposure Response Prevention & Habit Reversal Training I	Dr. Collins, PhD, LCPC, CADAC, Post-Doctoral Fellow
3/12/26	Exposure Response Prevention & Habit Reversal Training II	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
3/19/26	Exposure Response Prevention & Habit Reversal Training III	Ms. Amanda Owen, MA, LCPC
3/26/26	Working with Grief II	Dr. Kroencke, PhD, Licensed Clinical Psychologist, HSP
4/2/26	Working with Personality Disorders	Dr. Daniels, PsyD, Licensed Clinical Psychologist
4/9/26	Adolescent Development & Family Systems	Dr. Daniels, PsyD, Licensed Clinical Psychologist



4/16/26	Working with Couples I	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
4/23/26	Interventions for Working with Chronic Pain	Dr. Kroencke, PhD, Licensed Clinical Psychologist, HSP
4/30/26	Working with Couples II	Ms. Daniels
5/7/26	Perinatal Mental Health Issues	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
5/14/26	Working with Families Formed through Adoption to Meet Adoptee Needs	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
5/21/26	Trauma Interventions	Dr. Daniels, PsyD, Licensed Clinical Psychologist
5/8/26	Developmental Progression of the Trainee	Dr. Kroencke, PhD, Licensed Clinical Psychologist, HSP
6/4/26	Preparing for Termination I	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
6/11/26	Adult Development	Ms. Daniels
6/18/26	Sunset Years Development	Dr. Kroencke, PhD, Licensed Clinical Psychologist, HSP
6/25/26	Preparing for Termination II	Dr. Daniels, PsyD, Licensed Clinical Psychologist
7/2/26	Created for Connection (Dr. Sue Johnson)	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
7/9/26	Trainee Didactic Presentations	Supervisor Team
7/16/26	Art Therapy and Sand-Tray Interventions	Dr. Massey-Hastings, PsyD, Licensed Clinical Psychologist, HSP, PMH-C
7/23/26	Trainee Portfolio Presentations	Supervisor Team
7/30/26	Trainee Portfolio Presentations	Supervisor Team

Learning & Training Highlights #tldr

Post-Doctoral Fellowship Program at AMANI Clinical Services

Summer 2025 -
Summer 2026



Amani Clinical Services
www.amaniclinical.com
A Dr. Hastings & Associates, LLC Company

15 Spinning Wheel Road #116,
Hinsdale, Illinois 60521
Ph. 630.708.0362
Fax 630.282.7084

Personalized & Supportive Supervision Focused on Developmental Progression

- Focused on facilitating the developmental progression of the Fellow
- Sequential and planned training sequence
- Focus on apprenticeship and mentorship
- High ratio of supervisors to supervisees
- Supervisor Team comprised of supervisors that strongly identify as supervisors
- Supportive, skills based, and process-oriented
- Dialectical balance of warmth/support and challenge
- You will learn how to write well for several audiences
- You will learn how to code services for insurance billing
- You will be developed as a supervisor and receive specialized didactics

Learning Structure

- 2 hours per week: individual clinical supervision
- 2 hours per week: group supervision (assessment & therapy)
- 1 hour per week: didactic trainings
- Testing & Writing lab
- Quarterly consultation with psychiatrist

In-Depth Learning & Training in Several Evidence Based Theoretical Orientations Throughout the Lifespan

- Pediatrics & Systems Theories: Integrative Systemic Therapy; Parent Management Training; Structural Family Therapy; Play Therapy; Parent-Child Interaction Therapy; Emotionally Focused Family Therapy; Emotionally Focused Couples Therapy; Gottman
- Acceptance Commitment Therapy
- Cognitive Behavioral Therapy
- Exposure Response Prevention Therapy
- Narrative Exposure Therapy & Narrative Therapy

In-Depth Learning & Training in Clinical Specialties Throughout the Lifespan

- Pediatrics, Families, and Dyads
- Addictions
- Health Psychology
- Addictions
- Families formed through adoption, adoptees, and adoption triad
- Reproductive Psychology
- Complex trauma throughout the lifespan
- Couples

In-Depth Learning & Training in Neuropsychological Assessment Throughout the Lifespan

- Focus on Differential Diagnosis, Conceptualization, and Treatment Planning
- Children 3+
- Adolescents
- Adult:
- Geriatrics: comprehensive assessment of age-related cognitive decline vs. neurocognitive disorders
- Emphasis on structured, coded observation skills

Highlights

Post-Doctoral Fellowship Program at AMANI Clinical Services

Summer 2025 -
Summer 2026

Support of the Whole Person

- We love Entrée Kitchen! Entrée Kitchen provides different meal options each month that are either ready to cook right away or require minimal assembly and are affordable.
 - They have options for all different kinds of dietary needs. Dr. Hastings & Mr. Hastings feel like Entrée Kitchen meals make their lives possible.
 - We offer free delivery to the office once a month for all staff and students. You order direct through Entrée Kitchen, it's delivered to our home (the office is outside of delivery zone), and we will leave your food in the office freezer for you and Entrée Kitchen will bill us for the delivery fee!

Support for Learning & Training:

- AMANI will sponsor conference fees for the Fellow to attend the Illinois Association of Marriage and Family Therapy Association Conference.
- AMANI will sponsor conference fees for the Fellow for any other conference they wish to attend if the trainee has an accepted poster or presentation that they have personally authored. The Director of Training has extensive experience in presenting and has been published and will provide additional supervision to support the Fellow in this process.
- \$500 Training Stipend

Support for Learning: Internationally Focused Opportunities

- AMANI will sponsor conference fees for the Fellow to attend the International Family Therapy Association conference if the Fellow chooses to travel for the conference (cost of travel is student responsibility).

Learning Through Cultural Immersion and Travel Abroad

- You may choose to accrue 2 weeks of hours July 16-30, 2026 in *Tanzania!*
 - A large portion of the trip will be sponsored by AMANI (See separate handout for more information).
 - You'll support the IOP Center through various volunteer projects while receiving daily group supervision and didactics.
 - Opportunities to experience:
 - Tanzanian culture
 - Mental health and human services professions in Tanzania
 - The Ilula Orphan Program, subprograms, schools, and farms
 - Safari at Ruaha National Park
 - Maasai Tribe cultural visit
 - Visit to Isimila Stone Age Site
 - Extensive learning about trauma, institutional settings, and child development



TANZANIA TRIP SCHEDULE

AMANI Clinical Services will be proud in 2026 to provide the opportunity for our externs, trainees, and associates to take part in a cultural immersion experience in central Tanzania as part of our work with The Ilula Orphan Program. The following is a sample itinerary, subject to change.

Depart from Ohare in Chicago 7/16/2026

Overnight stop in Doha, Abu Dhabi, or Dubai
7/17/2026

Overnight stay in Dar es Salaam 7/18/-7/19/2026

Ilula Orphan Program 7/19-7/27/2026

- Room and Board on site of the Ilula Orphan Program
- Masaai cultural site visit
- Isimila Stone Age site visit
- Iringa town
- Farm for the Future
- IOP Schools, young mother's program, library STEM center, village visit, IOP farm

Safari 7/27-7/29/2026
Ruaha National Park

Dar es Salaam 7/29-7/30/2026

Depart 7/30/2026 Dar es Salaam



AMANI Sponsored	Trainee Financial Responsibility
Hotels in Dar es Salaam, Doha/ Abu Dhabi/ Dubai	All vaccines (Typhoid, Tetanus highly recommended) and malaria prophylaxis (e.g. Malarone)
Ground transportation in Doha/ Abu Dhabi/ Dubai and Tanzania	Airfare (approx. \$2200)
Room and board at Ilula Orphan Program	Meals in Doha/ Abu Dhabi/ Dubai and Dar es Salaam
Room and board on safari at Ruaha National Park (except \$200 student cost)	\$200 fee for safari
	Travel insurance





Overview of Our Clinic Setting

Environment

We believe in the power of a **healing space**. We have taken exceptional care to create a **spa-like environment** for our patients and our clinicians which emphasizes bringing the beauty of nature inside. We have paid painstaking attention detail to making our space as **seamlessly operational and supportive of our clinicians** as possible. We have ensured that the space also meets the **clinical needs of our patients**.

Additionally, we have designed our space to be **supportive and inclusive of training needs**. We have 2 separate offices with one-way mirrors which are wired for audio and video. These spaces allow for **live supervision, implementation of Parent-Child Interaction Therapy** and various models of Parent Management Training, and support **increasing mastery of the administration** of psychological and neuropsychological tests and assessments. We also have 2 fully Child-Centered Play Therapy stocked play rooms and a fully stocked Art Therapy room.

Fellows are **provided with** IPADs, all testing materials, have access to practice computers, access to our practice reading materials and therapy handouts.

We are located in **the suburbs of Chicago**. As such, **a car is recommended for transportation**.

Appreciation and Respect for Diversity

As a team, we are curious and interested in growth, development, diverse ways of being, and sources of diversity. We honor the dignity and value of all. We value the unique phenomenological experiences the self of the developing Fellowship brings to our team and the ways we can grow simply by exposure to the Fellowship. We also honor the ways in which **Fellows who are part of groups that are underrepresented, underserved, and systematically oppressed may present with unique training needs and interests**. Our goal is to **privilege the voices** of these Fellows. We appreciate individual differences many areas, including but not limited to: age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, physical and mental abilities, size and appearance, and socioeconomic status, and way in which one entered their family of origin.

We strive to create an environment of **inclusion, acceptance, and support** where our team members feel **valued, affirmed, and understood**. We value continuous growth and believe that if we know better, we can do better. Therefore, we welcome and encourage biases to be brought forward and the role of the Fellows in raising our awareness to our blind spots. We make every effort to help our team feel valued, respected, and comfortable. We work hard to help all members of our team experience a sense of belonging and communicate the valuable contribution that each member makes to our environment.

Team

We value each and every member of our team and their equally important roles in serving our patients.

Manager

Our amazing practice manager Ryan is responsible for human resource related concerns and operations, technology concerns, and general problem solving related to the operations of the practice as a whole.

Administrative Support Team

Our administrative support team is second to none. We have a Billing Concierge, a Patient Happiness & Scheduling Concierge, and a New Patient Concierge. They are the spine of this practice, amazing human beings, and work very hard to support our clinical team.

Director of Clinical Training/Founder of AMANI Clinical Services

AMANI Clinical Services

A Dr. Hastings & Associates LLC Company

15 Spinning Wheel Rd., Suite 116
Hinsdale Illinois 60521

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FAX – 630.282.7084



The Director of Clinical Training fulfills the following responsibilities to serve the Fellow:

1. Procurement and organization of learning experiences and training opportunities. Ensure diversity, breadth, and depth of training and learning experiences.
2. Clinical supervision of trainees including externs, post-doctoral fellows, and master's level trainees.
3. Clinical supervision and development of supervisory team.
4. Ensuring that the clinical training program adheres to the organized plan of training for trainees, ensure that the program meets academic requirements for the respective doctoral program, and ensure that the program fulfills licensure requirements.
5. Decision making and case assignment based on the developmental model of training to ensure graded, increasing complexity of cases, systems involvement, and care coordination needs.
6. Ensure that fellows are evaluated by the supervisor team in a timely manner mid-way through and at the end of the training year.
7. Ensure that structure of the training environment is supportive of the utmost ethical and legal provision of care.
8. Ensure that diversity is an honored component of the environment.
9. Provide support and guidance in the event of a conflict between trainee and primary supervisor.

Supervisor Team

Our supervisor team is made up of 4 independently licensed professionals: 3 Clinical Psychologists and 1 Masters Level Licensed Clinical Professional Counselor. Our supervisory team is based on deep and abiding respect for the diversity represented in the team, honesty, reliability, accountability, collaboration...and a lot of fun!

Our **supervisory team is diverse in interests, experience, expertise, and backgrounds.**


Systems: Pediatrics, Families, & Couples

Dr. Nikki Massey-Hastings, PsyD, Director of Clinical Training is a Licensed Clinical Psychologist, Health Service Psychologist, and Certified Perinatal Mental Health Professional who specializes in pediatrics, families, couples. Her clinical work centers on treating mental health challenges which occur throughout the family life cycle, including problems common to children, parents, and their families. She has researched, presented, and published in the area of couples deciding to become parents or remain childfree. She provides pediatric and adult neuropsychological assessments with an emphasis on whole-person conceptualization.

Dr. Massey-Hastings is Adjunct Faculty for Northwestern University and teaches in the Masters of Marriage and Family Therapy program and supervised post-doctoral fellows, doctoral interns, and provisionally licensed professionals for many years. Dr. Massey-Hastings has presented trainings and talks domestically and internationally and is internationally awarded by the Society for Reproductive and Infant Psychology. She received the Illinois School of Professional Psychology's Distinguished Alumni Award. She consults for the Ilula Orphan Program (IOP) in Tanzania and travels to the IOP Center frequently with the long-term goal of bringing consistent mental health services to the orphaned and impoverished children of the Ilula region, and the adults that serve them.

Systems: Addiction, Personality Inflexibility, Adolescents & Couples

Dr. Laura Daniels, PsyD is a Licensed Clinical Psychologist who has been independently practicing for nearly a decade. She has been trained in, and predominantly utilizes, third wave modalities



(ACT/DBT) as well as motivational interviewing and Gottman techniques. She has worked the full spectrum of levels of care to include: outpatient, PHP/IOP, inpatient, and day treatment programs. Prior to her role at AMANI, she served, led, and supervised a team of mental health professionals as the Mental Health Services Director for the Northern Reception and Classification Center within the Illinois Department of Corrections. Her clinical experience is vast and includes ages throughout the lifespan. In addition, she provided care in specialized facilities to include addictions and forensic/corrections treatment.

Health Psychology

Dr. Kroencke, PhD is a Licensed Clinical Psychologist and Health Service Psychologist with 24 years of experience. She received her PhD from University of Kansas. She completed a rigorous Medical Psychology Residency at Oregon Health Sciences University in Portland, Oregon. She has worked with a variety of ages and mental health concerns throughout her career. She served as the Director of Psychology and Director of Training for interns, postdoctoral and fellowship programs for Northwest Missouri Psychiatric Rehabilitation Center in St. Joseph, Missouri and DuPage Medical Group in the Chicago suburbs. Dr. Kroencke maintains a strong focus on Cognitive Behavioral techniques. She currently treats adults with a specialty focus on mental health and coping with chronic illness (e.g., cancer, neurological issues, diabetes, etc). She has been actively involved in mentoring and teaching students both formally in the classroom and in the past and present context of a private practice setting.

Pediatrics & Families

Amanda Owen, MA, Licensed Clinical Professional Counselor has been in practice for just about a decade. She has recently been promoted to our supervisory team after training with us for several years. She has proven herself to be of upstanding character, clinically passionate, and providing valuable clinical expertise and support to our cohesive team. Amanda has significant clinical experience in structured systems like the Department of Child and Family Services and hospitals where she spent her early career years. She works extensively with adoptees and families formed through adoption, passionately treats "angsty" teens, and provides a lot of Parent Management Training.

Clinical Team

Our clinical team is comprised of our supervisory team, our Fellows, and our externs. We value each member of our clinical team and their unique contributions to learning, patient care, and the practice climate.

Evaluation Processes

The Fellow and all supervisors will review the Fellow's evaluation of the supervisor mid-year and end of year during scheduled supervision. We hope to learn and grow from the Fellow's valuable feedback.

The Fellow will be evaluated by all supervisors mid-year and end of year during scheduled supervisions. We have based our evaluation form on the American Psychological Association's Foundational Competencies and the rating form clearly delineates expected levels of mastery in various competencies. The form is well-organized which serves to structure the Fellow's strengths and growth edges. Strengths and growth edges will be discussed in-depth with each supervisor. **Due process will be initiated if the Fellow receives a score of 1 (Significant Development Needed) or 2 (Developing Skill Level) in any domain of the evaluation.**