BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. DO NOT EXCEED FIVE PAGES.

NAME: Troy Christian Andersen

eRA COMMONS USER NAME (credential, e.g., agency login): Pamstroy

POSITION TITLE: Associate Professor-Lecturer of Social Work; Executive Director, W.D Goodwill Initiatives on Aging, Director of Social Work Services, Cognitive Disorders Clinic, Neurology Department, School of Medicine

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)

| INSTITUTION AND LOCATION | DEGREE(if applicable) | Completion DateMM/YYYY | FIELD OF STUDY |
| --- | --- | --- | --- |
| University of Utah, Salt Lake City, UT | B.A. | 08/1987 | Psychology |
| Brigham Young University, Provo UT | MSW | 04/1989 | Social Work  |
| University of Utah, Salt Lake City, UT | MS | 05/2010 | Gerontology |
| University of Utah, Salt Lake City, UT | PhD  | 05/2013 | Social Work  |

**A. PERSONAL STATEMENT**

The primary objective of this project is to utilize an existing intervention for complicated grief (CG) that has been shown to be efficacious, and adapt this intervention for soon-to-be bereaved dementia caregivers who are at risk of CG. This intervention will prepare caregivers for the ensuing death in an attempt to mitigate the risks for CG through utilizing the Pre-Loss Group Therapy intervention. I will be working with my colleagues Dr. Kathie Supiano (PI) and Dr. Marilyn Luptak to administer and evaluate PLGT in long term care facilities, targeting caregivers at risk for CG and whose care recipient has a life expectancy of less than 6 months. We will be utilizing a Stepped Wedge study design to evaluate intervention outcomes. If this intervention is found to be effective we will seek to create a comprehensive caregiver support program that can be utilized in settings where active caregivers for individuals with dementia seek assistance in an attempt to reduce risks for CG.

I am a committed clinician and research investigator with the primary goal of making advances in psychosocial interventions for individuals with dementia and other progressive neurological disorders.  I want to assure that new and more effective interventions will be available to meet the needs of individuals with dementia and their care support networks. After 20 years of clinical social work experience, I returned to graduate school in 2007 to pursue an academic career in social work.  In conjunction with this transition I began a clinical practice with individuals with dementia and their families.  In order to enhance my academic expertise, I have successfully completed an additional master’s degree in Gerontology and a doctoral degree in Social Work.  My academic focus has been on health services research and pragmatic clinical trials. My dissertation research was a random assigned trial of the Proactive Dementia Care (PDC) intervention, which infused social work and health educations services into the diagnostic process in a sub-specialty neurology clinic.  I was awarded two national awards during my doctoral studies.  First, I was selected as a John A. Hartford pre-dissertation awardee and subsequently, a John A. Hartford Doctoral Fellow in Geriatric Social Work.  These awards are given to PhD students in social work that show particular promise in research and teaching content related to older adults.  The Hartford experience has allowed me access to national and international experts in the field of geriatric social work, gaining invaluable mentoring and tutelage.  My excellent clinical opportunities at the Center for Alzheimer’s Care, Imaging and Research and the Hartford Doctoral programs have prepared me to be a successful scholar in dementia care services.  During my 10-year tenure at the Center for Alzheimer’s Care, Imaging and Research, I have been a key contributor in developing and refining PDC interventions with my expert colleagues.

**B. POSITIONS and HONORS**

**Positions and Employment**

1988-1989 Teaching Assistant, School of Social Work, Brigham Young University, Provo, Utah

1987-1988 Research Assistant, School of Social Work, Brigham Young University, Provo, Utah

1989-1990 Adolescent Program Director & Clinician, Aspen Crest Hospital, Pocatello, Idaho

1991-2006 Emergency Room Crisis Worker University Healthcare, SLC, Utah

1991-1997 Provider Relations & Clinical Social Worker United Behavioral Health, SLC, Utah

1998-2001 Clinical Social Worker, University of Utah, Student Counseling Center, SLC, Utah

1995-2008 Designated Examiner State of Utah, SLC, Utah

2006- Dementia Specialist, Licensed Clinical Social Worker, University of Utah, Center for Alzheimer’s Care, Imaging and Research, SLC, Utah

2013-2015 College of Social Work, University of Utah, SLC, Utah Assistant Professor-Lecturer

2015- Executive Director, Goodwill Initiatives on Aging, Assistant Professor-Lecturer, College of Social Work, University of Utah, SLC, Utah

**Honors**

1989 Utah NASW Graduate Student Research Paper of the Year

2008 Sigma Phi Omega National Gerontology Honor Society

2008-2010 Co-President, Social Work PhD program, University of Utah, College of Social Work

2008 The Ruth Weg Emerging Scholar Award, presented by Sigma Phi Omega

2008-2010 John A. Hartford Pre-Dissertation Scholarship

2010 Anna Dresel Award for Outstanding Graduate Student in Gerontology

2010-2012 John A. Hartford Doctoral Fellow in Geriatric Social Work

2013-2014 College of Social Work Ph.D. Faculty Award for Promise in Social Work

**Other Experience and Professional Memberships**

1991- National Association of Social Workers: Member

2007-2011 Utah Aging Alliance: Member

2007- Gerontological Society of America - Social Research, Policy & Practice Section: Member

2007-2009 Association for Gerontology Education in Social Work: Member

2007- University of Utah Center on Aging Member

2009- Alzheimer’s Association ISTART Member

2015- SAGE Utah Board Member Committee: Member

2016- Social Work Leaders in Health Care Board Member

2017- University of Utah Interprofessional Education (IPE) Advisory Committee: Member

**C. CONTRIBUTIONS TO SCIENCE**

1. Grief, Complicated Grief, and End-of-Life Care in Families

I have participated in Dr. Supiano’s CGGT pilot study in older adults and subsequent CGGT studies, as an interventionist and a content consultant for her bereaved dementia caregivers. I worked with Dr. Supiano on a journal article documenting two case studies of sudden-on-chronic death from the results of our group encounters.

1. Supiano, K.P., Andersen, T. C., & Burns Haynes, L. (2015) Sudden-On-Chronic Death and Complicated Grief in Bereaved Dementia Caregivers: Two Case Studies of Complicated Grief Group Therapy, Journal of Social Work in End-of-Life & Palliative Care, 11:3-4, 267-282

2. Clinical Research with Application to Dementia

In my ten-year tenure at the Cognitive Disorder Clinic at the University of Utah I have participated in clinical interventions and research into early stage interventions with individuals with dementing illnesses. During this time, I have co-authored several papers addressing concerns with this population. With my neurology colleagues, I co-authored a journal article addressing process of advancing drug development in Alzheimer’s disease. My colleague Dr. Dan Kaplan and I authored a paper addressing new directions for dementia care in the 21st century and with Dr. Kaplan and other colleagues we crafted a paper addressing relocation for older adults with neurocognitive disorders.

1. Foster, N.L., Andersen T. C., Zamrini, E.Y. (2009) Commentary on "a roadmap for the prevention of dementia II. Leon Thal Symposium 2008." Innovations in care that advance Alzheimer's disease drug development. Alzheimer’s & Dementia, the Journal of the Alzheimer’s Association. 5,159-62.
2. Kaplan, D., Andersen, T. C. (2013) Social work practice in dementia care: An historical review and new directions for the 21st century. Journal of Gerontological Social Work, 56, 164-176
3. Kaplan, D., Andersen, T.C., Lehning, A. J., & Perry, T.E. (2015) Aging in Place vs. Relocation for Older Adults with Neurocognitive Disorder: Applications of Wiseman’s Behavioral Model, Journal of Gerontological Social Work, 58:5, 521-538, DOI: 10.1080/01634372.2015.1052175
4. Perry, T., Andersen, T. C., Kaplan, D., (2014) Relocation remembered: perspectives on senior transitions in the living environment. The Gerontologist, published online July 9, 2013 doi:10.1093/geront/gnt070

# D. RESEARCH SUPPORT

**Ongoing Research Support**

NIH STTR (R41/R42) Phase II Foster (PI) 2016-2018

The *Memory Care Partner* (*Partner*) is an innovative mobile application allowing dementia specialists to guide individuals concerned about memory loss of a family member through the complicated process of seeking care, determining a definitive case and utilizing the latest management techniques to assure the highest quality care. *Partner* takes advantage of Proactive Dementia Care (PDC), a coordinated, multidisciplinary preventative intervention. This is a 2-year phase 2 STTR application from ProActive Memory Services, Inc. (PAMS), a University of Utah start-up company, to develop of *Memory Care Partner*, a tablet / smartphone web-based application for proactive and preventative planning of care for memory concerns. focused approach pioneered at the University of Utah Center for Alzheimer’s Care, Imaging and Research.

Role: Andersen (Co-PI)

U1QHP28741 Pepper (PI) 2015-2018

HRSA GWEP (UIQ)

Utah Geriatric Education Center: Integrating Primary and Geriatric Long Term Care

Project objectives: 1) Integrate geriatrics and primary care into the delivery systems in 21 nursing facilities and transform the learning environment for academic trainees and career development; 2) Develop health professionals and direct care workers with competencies in interprofessional collaboration who can assess and address the needs of older adults and their families/caregivers at the individual, community, and population levels; 3) Develop and deliver programs for interprofessional teams of providers and direct care workers, patients, families and caregivers focused on communication skills and transitions of care in the long term care setting that will promote a shared understanding of health information and goals of care, reducing unnecessary emergency department transfers and hospital readmissions; and 4) Improve the care of older adults with ADRD through academic, career development, and community outreach education for direct care workers, families, and health professionals.

Role: Curriculum Panel Member

National Alzheimer’s Association Supiano (PI) 2014-2016

Complicated Grief Group Therapy for Bereaved Dementia Caregivers

This study evaluates the efficacy of complicated grief group therapy (CGGT) for bereaved dementia caregivers with complicated grief. Bereaved dementia caregivers with complicated grief will receive the CGGT intervention and treatment effectiveness will be measured as a change in scores on the Inventory of Complicated Grief and the Brief Grief Questionnaire. The researchers will also explore the impact of the CGGT intervention on depression, anxiety, family relationships, and utilization of social supports.

Role: Interventionist

**Completed Research Support**

National Alzheimer’s Association K. Supiano (PI) 2014-2016

Complicated Grief Group Therapy for Bereaved Dementia Caregivers

A randomized controlled attention wait-list clinical trial evaluating the impact of Complicated Grief Group Therapy (CGGT) on treatment process and grief outcomes of bereaved dementia caregivers experiencing complicated grief in five 16-week treatment groups.

Role: Interventionist

J.A. Hartford Foundation K. Supiano (PI) 2011/10/10-2012/09/30

Complicated Grief in Older Adults: A Randomized Controlled Trial of Complicated Grief Group Therapy

The goal was to develop and evaluate a group psychotherapy therapy treatment for older adults experiencing complicated grief (CGGT), modifying the manualized complicated grief therapy under the guidance of its developer, Dr. Katherine Shear.

Role: Interventionist

VISN 19 660 Telehealth Enhanced Collaborative Geriatric Care M. Supiano (PI) 2012-2016  Our project has improved access and quality geriatric and dementia care for veterans in rural communities, effectively utilized telemedicine to address transportation barriers, and provided education and training for rural CBOC healthcare providers. Role: Co-I

NIH STTR (R41/R42) Phase I Foster (PI) 2012-2013

This is a 1-year phase I STTR application from ProActive Memory Services, Inc. (PAMS), a University of Utah start-up company, to develop of *Memory Care Partner*, a tablet / smartphone web-based application for proactive and preventative planning of care for memory concerns. focused approach pioneered at the University of Utah Center for Alzheimer’s Care, Imaging and Research.

Role:(Co-PI)

Center for Health Improvement Zamrini (PI) 2011-2013 Proactive Dementia Care Planning In this 3 year project, a randomized controlled trial was conducted in order to evaluate the effectiveness of proactive dementia care (PDC), an early stage psychosocial dementia care intervention that integrates health education and social work services into a sub-specialty neurology clinic. Role: Co-I

J.A. Hartford Foundation Andersen (PI) 2010-2012

Proactive Dementia Care for Individuals with Early Stage Alzheimer’s Disease and Related Dementias. Proactive Dementia Care Planning. In this 3 year project, a randomized controlled trial was conducted in order to evaluate the effectiveness of proactive dementia care (PDC), an early stage psychosocial dementia care intervention that integrates health education and social work services into a sub-specialty neurology clinic. Role: PI