# Buncombe County Supplemental Aging Funding (BCSAF)
# Monitor Report for FY26

**Name of the Organization:** Emberlight: Center for Conscious Living and Dying

**Program Name:** End of Life Care Management

**Amount Funded:** $14,000

**Staff Members Present:** Courtney Smith, Director of Development

**Date:** 4/29/26

1. What were your highlights and challenges in accomplishing your program in FY26?
   The Buncombe County Supplemental Aging Funding (BCSAF) helped Emberlight to further their outreach and form partnerships in Buncombe County. Seeing their success in Buncombe County gave them the motivation to spread out and expand their reach to surrounding western North Carolina counties like McDowell, Rutherford, Jackson, Haywood, Henderson, Madison, and others. (BCSAF was only used in Buncombe County.) Emberlight very much appreciated the funding and the support which made a big difference to them.
   Emberlight partners with Givens Communities, Deerfield Episcopal Retirement Community and National Church Residences (Battery Park, Vanderbilt) to provide education about planning for end of life as well as services they provide for caregivers and their loved ones at end of life. One memorable client was a lady who Courtney met during outreach. Emberlight supported this client and her daughter, granddaughter and nieces while the client stayed at Emberlight at the end of her life.
   The challenges were not being able to do outreach in Black Mountain due to damage from Helene. Emberlight was not able to do outreach at the Lakeview Center for Active Aging in Black Mountain nor at the White Horse where community groups gather during the day. Both buildings were recently repaired and have re-opened.

2. How do you determine eligibility for clients?
   Eligibility for clients is determined by age (60 and over) and a terminal illness diagnosis. Also, caregivers are eligible if they are age 60 and over and their loved one has a terminal illness diagnosis.

3. Has the vendor met the invoice guidelines laid out in the supplier responsibilities in the

contract? Is there adequate documentation to support payment?

Yes, Emberlight has met its responsibilities as outlined in the contract. See Scope of Work below. There is adequate documentation to support payment each month. Documentation details direct care to older adults and caregivers, educational sessions about end of life care and planning, grief support, and community outreach.

4. BCSAF monitor will review the Scope of Work for the supplier in each contract to make sure each area related to supplier responsibilities is being met. If an area is not, find out the barriers to meeting the guidelines and does the contract need to be amended?

   There are no barriers to meeting the scope of work.

5. How can Buncombe County best support your organization as you do the work?

   Emberlight would like Buncombe County and the HCCBG Advisory Committee to know how much they appreciate the BCSAF funding which allowed them to achieve good results with community outreach and educational sessions in Buncombe County. Recognition of this important work is the best support.

6. Review 10% of client files, but no less than 3 client files and/or receipts.

   Seven client files were reviewed. The files detailed client eligibility, daily care notes, narrative notes, who the client was as a person so to provide person-centered care, treatments received, medications, etc.

# SCOPE OF WORK

Center for Conscious Living and Dying provides end-of-life Care Management services for older adults and their caregivers. Our Guidance and Support team offers 365 days of phone support, educational services, caregiver training, and support to help navigate complex care needs.

The Contractor will:

1. Focus on improving the quality of life for clients and their caregivers during the last six months of life through education, training, medical equipment, and emotional/social support. Reduce emotional distress, increase connection and community support, and increase personal empowerment and decision making through education & skill building.
2. Provide end-of-life Care Management services for aging adults and their caregivers, reduce abuse/scams of the elderly as they age and inform caregivers and residents about options for end-of-life and after-death care beyond traditional hospice options as identified in elder & palliative care studies, community feedback, and from The Lancet article's recommendations on The Value of Death.
3. Address the pressing need for education on aging well, and accessible end-of-life care for Buncombe County's 60+ yr aging residents, particularly those with economic/social vulnerabilities, prioritizing underserved Latinx, Black, and single-family households.
4. Use the Share the Care model to help families create a network of volunteers who distribute caregiving responsibilities, transforming potentially isolating or abusive experiences into meaningful connections.
5. Provide training and ongoing support to ensure sustainable care that honors elders while strengthening community bonds.
6. Empower families with resources, skills, and a supportive community framework to care for aging loved ones.
7. Utilize volunteers dedicated to supporting end-of-life care outside medical settings.
8. Volunteer-led teams provide most services, including:

Guidance and Support Team: Acts as a bridge between the community and our death care services, offering resources and information about aging and dying in Buncombe County and referrals to our assessment teams for potential residential or in-home care. Will offer 365 days of phone support, educational services, caregiver training & support to help navigate complex care needs, including:

a. Comprehensive end-of-life care management
b. In-home support for ADL's so adults can safely die at home
c. Support for caregivers to reduce the risk of abuse or neglect
d. Care for those with complex physical, mental and behavioral needs including memory issues

In-Home Direct Care Team: Provides caregiver support for adults aging in place through the Share the Care model as well as supplemental & educational service options to reduce caregiver stress.

Education Team: Conducts workshops on end-of-life and after-death care options.

After Death Care Team: Assists families after their loved one has died, helping prepare the

body and make decisions about after death care.
9. Upon client's inquiries about the services, will send someone from the Guidance & Support assessment team into their home/facility to determine eligibility, appropriateness, and options.
10. Partner with existing hospice organizations, allowing them to focus on medical care while the contractor provides social, emotional, physical and spiritual care. Also partner with residential and social organizations that support or house aging adults. These partnerships include offering education, collaboration and referrals.
11. Work closely with:
a) Four Seasons Hospice & CarePartners: These hospice providers offer crucial medical care to Center for Conscious Living & Dying clients and referrals. The center for Conscious Living & Dying will reciprocate by connecting those needing hospice services and providing supplemental care management.
b) HCA Mission's Palliative Care Program: To receive referrals and offer alternative care options for those seeking non-hospital or non-facility end-of-life experiences.
c) Council on Aging: To partner for information sessions, mutually sharing resources and information with respective communities.
d) Residential Elder Housing (Highland Farms, Givens Estate, Battery Park Senior Apts): To provide educational workshops & tours, with residents often becoming volunteers or beneficiaries of the programs. The shared goal is to empower seniors with informed end-of-life choices.
12. The unit of service is one hour of service from a Care Mgt/Education team to a dying person or caregivers. This may include phone support, in-person assessment, training and assistance, implementing the "Share the Care" model, skills training for caregivers, & respite/support for in-home care. Assistance with acquiring durable medical equipment, educational offerings on campus, and education with affiliated partners and community events.
13. Agree to keep and maintain good and proper business records of all residents seeking information or services and charges provided for under this agreement.
14. Assess service delivery by completing weekly confidential surveys sent one week after each service received so that clients and families can rank professionalism, expertise, usefulness, and offer narrative feedback. Three months after death, will contact caregivers to request feedback and offer grief support services, which are also provided at no cost. Using trauma-informed language, will aim to evaluate the impact services had with questions such as "How did our services support you and your loved one's wishes?" "Were cultural preferences honored?" and "What might we improve?" In order to provide quantitative measures for outcomes, employ a few numerical scale questions. These include things like "How essential were these services in supporting your end-of-life journey?" (1-5). Rankings above 3 show we are adding value to their experience and comfort.
15. Comply with all relevant Federal, State laws, regulations, and local policies.