Dealing with loss: the nature of the business

Helping families cope with loss is an intrinsic part of daily work for Steven Skobel, a palliative care nurse practitioner. “Anyone who works in this business knows in their soul of understanding this is the nature of the business,” he says.

At Capital Caring Health, the largest non-profit provider of elder health, advanced illness, hospice, and at-home care services for the Maryland, Virginia, and Washington, D.C. area, he tends to the needs of patients and families alike as a life comes to an end. But even with that familiarity, it has been a challenge to cope with the sheer volume of Covid-19 deaths. There is no escaping the shadow of the pandemic at work, and away from the hospital Skobel and his colleagues have had to find new ways to recharge their batteries for another challenging shift.

A medical embrace

As an expert in the field of palliative care, Skobel is part of a relatively new discipline, but one with deep roots in the very origins of nursing. The first hospice was founded in the U.K. after World War II, and in 1990, the World Health Organization recognized palliative care as a specialty dedicated to relieving suffering and improving quality of life for people with serious illnesses. The specialty takes its name from the Latin word, pallium, meaning “cloak.”

Essentially, palliative care wraps the patient and their family in a sort of medical embrace, a way to ease the journey.

Skobel's career has paralleled the enormous growth in palliative care across the country. He earned his degree in 1991, his master's in 1998, and a doctorate in 2005. When he first entered nursing school, there were just a handful of men in his class. Over time the profession has become more diverse, embracing more men and a broad mix of ethnic and cultural backgrounds.

A job transformed

No one enters nursing without knowing that it is a “very dangerous” occupation, he says, and there have been diseases in the past that have threatened health providers. What is different with Covid-19 is the scope of the outbreak, he says. It is on a scale that has not been seen since the 1918 Spanish influenza epidemic.

Because of the high number of Covid-related deaths, he has been working as a full-time member of the intensive care team, combining his palliative care expertise with other nursing skills needed in the intensive care unit which, at one point, was operating an extended ward to cope with overflow.
Before Covid-19, Skobel was used to seeing families cope with both sudden, unexpected loss and those who have some warning of what is ahead. Perhaps a bad case of pneumonia takes hold unexpectedly, or a longtime cancer winds towards an inevitable end. Family members might be at a patient’s bedside for two or three weeks. Skobel would guide families through the final days, or hours as they sat bedside, able to touch, talk, and comfort their loved one, and, in turn be comforted by nurses and doctors.

But now, in the midst of a pandemic, that family comfort and professional guidance must come at a distance, with farewells said via FaceTime, and updates and developments delivered by phone or text message.

**Recharging for the future**

In recent weeks, the number of cases his team is seeing has fallen. “But it’s a certainty we will see another wave,” he says.

He believes the medical teams battling the virus are better prepared as new patients come in, thanks to a steep learning curve about which drugs work and help flatten the curve. His fellow professionals also have been sharing both formal research from noted journals, and the sort of anecdotal information grounded in daily experiences.

Like everyone else, his life beyond the hospital has changed. “Before Covid I would go to the gym three times a week,” he says, “and I played in a men’s baseball league on Sundays.” Now, he does the family grocery shopping in his scrubs and face mask as he heads home to his wife and one of two daughters who are sheltering in place. He and his wife are walking the family dog daily. Recharging his batteries in new ways.

Dealing with a pandemic has reinforced a fundamental truth he holds about his chosen profession. As he tells nursing students: “All nurses understand palliative care — that’s why they got into this.”