



## KWESI JOHNSON “MY WHY”

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It does not matter where you are in the country, if you ask a clinical person why they got into healthcare they will mostly likely all have a similar response, “I wanted to help others.” My initial reason for getting into healthcare varies a little from that. I wanted to stay around sports and make money doing it and being in sports medicine would have afforded me that opportunity. I took all the proper steps to head down that path. I was a junior athletic trainer in high school and I took all of the medical terminology and medical prep courses I could take as electives. When I got to college I majored in Physical Therapy, but the requirements had changed to earn your Masters degree in order to practice. I was not interested in staying in school for any more time than necessary especially since I had aspirations to go on to medical school. The major that was of most interest to me was Respiratory Therapy. I applied for the program and got it on the first go round.

After starting my course work I went on a no-smoking crusade, as I had several family members that smoked and I was determined to make them stop. Up to that point in my clinical rotation I spent a great deal of time on the COPD floor giving breathing treatments and drawing arterial blood gases. Many of the patients I treated had a long history of smoking and were experiencing the horrible side effects of long term tobacco use. When I graduated, I entered into a full-time role at the hospital, giving me the opportunity to experience other units. It was then that three different patients changed my world and perspective on my role in the healing process.

The first patient was a 24-year old young man that came in for a routine mitral valve replacement. The second was a 21-year old young man that gambled with his life by playing Russian roulette with a 22 caliber handgun with a friend. The third patient was a 30-year old young lady that had stage four cervical cancer. These hit me so hard because I was a recent graduate and had just turned 23 , so they were not much older than me. Each patient had different complications, but their common thread was their need for compassionate caregivers who would take the time to communicate with them, involve them in the care plan, make them feel like a human (and not simply their diagnosis), and be understanding.

Although all three patients passed away, I earnestly believe that I was able to elevate each of their experiences because I was able to see myself as more than just my title: Respiratory Therapist. I sincerely strived to be a compassionate member of their care team. Now, with Integrated Loyalty Systems (ILS), I have the opportunity everyday to help clinical and non clinical healthcare employees better understand their role in elevating the human side of healthcare and making their transitions to becoming a compassionate member of the patients’ care team.

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