



Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
<u>0</u>	<u>3</u>	<u>0</u>	<u>1</u>
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
<u>9</u>	<u>0</u>
(K)	(L)

Injury and Illness Types

Total number of . . . (M)			
(1) Injuries	<u>4</u>	(4) Poisonings	<u>0</u>
(2) Skin disorders	<u>0</u>	(5) Hearing loss	<u>0</u>
(3) Respiratory conditions	<u>0</u>	(6) All other illnesses	<u>0</u>

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information

Your establishment name Brighton Hospice Michigan

Street 26075 Woodward Ave, Ste 300

City Huntington Woods State MI Zip 48070

Industry description (e.g., *Manufacture of motor truck trailers*)

621610 Home Health Care Services

North American Industrial Classification (NAICS), if known (e.g., 336212)

621610

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees 52

Total hours worked by all employees last year 87253

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Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Ayrica Stoneman VPHR

Company executive Title

Phone (801) 996-3217 Date 02/01/2024



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Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
<u>0</u>	<u>1</u>	<u>0</u>	<u>2</u>
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
<u>1</u>	<u>0</u>
(K)	(L)

Injury and Illness Types

Total number of . . . (M)	
(1) Injuries	<u>2</u>
(2) Skin disorders	<u>0</u>
(3) Respiratory conditions	<u>0</u>
(4) Poisonings	<u>0</u>
(5) Hearing loss	<u>0</u>
(6) All other illnesses	<u>1</u>

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Establishment information

Your establishment name Brighton Hospice Kansas

Street 1061 Mission Rd. Suite 220

City Leawood State KS Zip 66206

Industry description (e.g., *Manufacture of motor truck trailers*)

621610 Home Health Care Services

North American Industrial Classification (NAICS), if known (e.g., 336212)

621610

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees 18

Total hours worked by all employees last year 27810

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Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
<u>0</u>	<u>1</u>	<u>0</u>	<u>1</u>
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
<u>90</u>	<u>4</u>
(K)	(L)

Injury and Illness Types

Total number of . . . (M)	
(1) Injuries	<u>2</u>
(2) Skin disorders	<u>0</u>
(3) Respiratory conditions	<u>0</u>
(4) Poisonings	<u>0</u>
(5) Hearing loss	<u>0</u>
(6) All other illnesses	<u>0</u>

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Establishment information

Your establishment name Brighton Hospice Massachusetts

Street 1234 Chestnut St. | Suite 101

City Newton State MA Zip 02464

Industry description (e.g., *Manufacture of motor truck trailers*)

621610 Home Health Care Services

North American Industrial Classification (NAICS), if known (e.g., 336212)

621610

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees 35

Total hours worked by all employees last year 53708

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Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
<u>0</u>	<u>0</u>	<u>0</u>	<u>2</u>
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
<u>1</u>	<u>0</u>
(K)	(L)

Injury and Illness Types

Total number of . . . (M)	
(1) Injuries	<u>0</u>
(2) Skin disorders	<u>0</u>
(3) Respiratory conditions	<u>0</u>
(4) Poisonings	<u>0</u>
(5) Hearing loss	<u>0</u>
(6) All other illnesses	<u>2</u>

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Establishment information

Your establishment name Brighton Hospice Missouri

Street 4200 Little Blue Parkway Suite 570

City Independance State MO Zip 64057

Industry description (e.g., *Manufacture of motor truck trailers*)

621610 Home Health Care Services

North American Industrial Classification (NAICS), if known (e.g., 336212)

621610

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees 8

Total hours worked by all employees last year 12042

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Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	0	0	0
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
0	0
(K)	(L)

Injury and Illness Types

Total number of . . . (M)			
(1) Injuries	0	(4) Poisonings	0
(2) Skin disorders	0	(5) Hearing loss	0
(3) Respiratory conditions	0	(6) All other illnesses	0

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Establishment information

Your establishment name Brighton Hospice Connecticut

Street 30 Waterside Drive, Suite 101

City Farmington State CT Zip 06032

Industry description (e.g., *Manufacture of motor truck trailers*)

621610 Home Health Care Services

North American Industrial Classification (NAICS), if known (e.g., 336212)

621610

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees 7

Total hours worked by all employees last year 9004

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Company executive Title

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Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
<u>0</u>	<u>2</u>	<u>1</u>	<u>1</u>
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
<u>16</u>	<u>24</u>
(K)	(L)

Injury and Illness Types

Total number of . . . (M)	
(1) Injuries	<u>4</u>
(2) Skin disorders	<u>0</u>
(3) Respiratory conditions	<u>0</u>
(4) Poisonings	<u>0</u>
(5) Hearing loss	<u>0</u>
(6) All other illnesses	<u>0</u>

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Establishment information

Your establishment name Brighton Hospice Madison

Street 1350 Deming Way | Suite 400

City Middleton State WI Zip 53562

Industry description (e.g., *Manufacture of motor truck trailers*)

621610 Home Health Care Services

North American Industrial Classification (NAICS), if known (e.g., 336212)

621610

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees 16

Total hours worked by all employees last year 25331

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Amya Stenman VPHR

Company executive Title

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Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	0	0	0
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
0	0
(K)	(L)

Injury and Illness Types

Total number of . . . (M)	
(1) Injuries	0
(2) Skin disorders	0
(3) Respiratory conditions	0
(4) Poisonings	0
(5) Hearing loss	0
(6) All other illnesses	0

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Establishment information

Your establishment name Brighton Hospice Colorado Springs

Street 6005 North Delmonico Dr. | Suite 225

City Colorado Springs State UT Zip 80919

Industry description (e.g., *Manufacture of motor truck trailers*)

621610 Home Health Care Services

North American Industrial Classification (NAICS), if known (e.g., 336212)

6 2 1 6 1 0

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees 0

Total hours worked by all employees last year 0

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<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
<u>0</u>	<u>0</u>
(K)	(L)

Injury and Illness Types

Total number of . . . (M)	
(1) Injuries	<u>0</u>
(2) Skin disorders	<u>0</u>
(3) Respiratory conditions	<u>0</u>
(4) Poisonings	<u>0</u>
(5) Hearing loss	<u>0</u>
(6) All other illnesses	<u>0</u>

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Establishment information

Your establishment name Brighton Hospice Georgia

Street 2790 Clairmont Rd. NE|Suite 500

City Atlanta State GA Zip 30329

Industry description (e.g., *Manufacture of motor truck trailers*)

621610 Home Health Care Services

North American Industrial Classification (NAICS), if known (e.g., 336212)

6 2 1 6 1 0

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees 2

Total hours worked by all employees last year 2165

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