

Safety Responsibilities

FIELD PRODUCER/SEGMENT PRODUCER

Safety Program Information for Field Producer/Segment Producer

The following information is for your specific position and is provided to help you understand your part in your Production's **Injury & Illness Prevention Program (IIPP)/Safety Program**.

Responsibilities of the Field Producer/Segment Producer

The Field Producer/Segment Producer often can simultaneously fill several supervisory roles on production: **Director, Stage Manager, Location Manager, Production Manager**. It is important that the Field Producer be familiar with the Safety Responsibilities of all positions he/she will fill, bearing in mind the three basic duties of all Supervisors:

1. See that anyone hired to perform a task has been properly trained to do so safely.
2. Provide employees with the proper personal protective equipment (PPE) to safely do their jobs.
3. See that the stage/location/work area has been inspected and corrections made to any potential hazards found.

Employee Training

1. Productions are required to employ workers knowledgeable in the work they will be asked to do. Because there are many different ways proficiency can be documented, different Department Heads will submit varying evidence of training. All of it is important.
2. Check that Departments operating heavy equipment are turning in copies of Certification for each piece of equipment they will be asked to drive (e.g. Forklift Safety Card, Aerial Platform Training, powder-actuated tool operator's "Hilti Card," etc.) Keep them on file.
3. Some Department Heads will be sending copies of Tool Box Talks they conducted; others will send signed copies of Codes of Safe Practices (CSP's). Keep them on file.
4. Most importantly, make sure a signed **Acknowledgment Form** for receipt of **(Form 1) General Safety Guidelines for Production** is on file for all employees from all departments.
5. If you need help arranging training, call the **Production Safety Consultant**.

Production Start-Up

Implement the IIPP:

1. Obtain and read the **Production Safety Manual** from the **Production Manager, Production Safety Consultant** or **safetyontheset.com** the first week of employment. This manual is meant to provide guidance and clarification of possible questions. A copy should be available at all production locations.
2. Check and document the **Safety Pass Status** of all IATSE crew hired by the production. (Southern California.)

Coordinate the documentation of all safety program activities:

For any crew hired directly by the Field Producer, see to it that the following have been turned into the Production Office, and copies sent to the Production Safety Consultant at the beginning of the production:

1. Employee Acknowledgment of General Safety Guidelines for Production (Form 1)
2. Serious Incident Reporting Procedures (Form 4)

On Production

1. See to it that the following are turned into the Production Office and copies sent to the Production Safety Consultant on a regular basis:
 - a. On-Production Safety Report/Checklist (Form 5)
 - b. Stage/Location Construction Safety Checklist (Form 6)
 - c. Location Pre-Productions Safety Checklist (Form 7)
 - d. Asbestos/Lead/Mold Guidelines (Form 7A)
 - e. Location Prep/Strike Safety Information (Form 7B)

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- f. Location On-Production Safety Checklist (Form 8)
 - g. Safety Guidelines for Extras and Theatrical Day Hires (Form 15)
 - h. Assistant Stage Manager Safety Meeting (Form 15 A)
2. See to it that the following are turned into the Production Office and copies sent to the Production Safety Consultant as they are completed:
 - a. Accident Investigation Report (Form 9)
 - b. Hazard Notification (Form 10)
 - c. Notice of Unsafe Condition and Action Plan (Form 11)
 - d. Safety Warning Notice (Form 12)
 - e. Production Safety Meeting Report (Form 13)
 - f. Request for Employee Safety Training (Form 14)
 - g. Right of Refusal of Medical Aid (Form 16)
 - h. Any special permits, environmental surveys, location safety reports, etc. daily Production Reports listing safety meetings, including key department head and new arrival meetings, stunt and special effects meetings, etc.
3. If your duties include distributing Calls Sheets, always attach any AMPTP Safety Bulletins or other notices deemed appropriate by your Line Producer or Stage Manager.

Injuries and Illnesses

1. Please read the 2019 revised ***Injury & Illness Reporting Procedures***, which are attached to this document. They include ***Serious Incident Reporting Procedures***, which should be followed for incidents that result in transportation by ambulance, visitation to the hospital by one or more employees, any treatments other than general first aid, or any serious property/asset damage.
2. Instruct your Medics or Production Manager to fill out appropriate paperwork and make notification to the Production's Workers Comp Department. **Your Production Safety representative is NOT to receive Workers Comp forms or any employee's personal Health information.**

Serious Accidents, Injuries and Mishaps

Serious accidents, injuries and mishaps are incidents that require transportation by ambulance, visitation to the hospital by one or more employees, any treatments greater than general first aid or any serious property/asset damage.

In the event of a serious accident, injury or mishap, the Line Producer, or in his/her absence, the Stage Manager or Field Producer will follow the instructions on **Form 4 – Serious Incident Reporting Procedures**. It is the Production Manager's responsibility to see that correct reporting instructions are available.

Examine locations for safety concerns:

1. Check all locations for potential safety concerns and hazards:
 - a. Asbestos, chemicals, hazardous waste, paints with lead, blocked or unmarked exits, unprotected elevated areas, improper ventilation, etc.
 - b. This includes all location construction, holding, parking, catering, dressing areas, etc.
2. Fill out the ***Location Pre-Production Safety Checklist (Form 7)***, ***Asbestos/Lead/Mold Guidelines (Form 7A)***, and ***Location Prep/Strike Safety Information (Form 7B)*** for each new location.
 - a. Ask building owner or managers about potential environmental concerns, asbestos reports or prior testing of lead-based paints.
 - b. Obtain proper permits.
 - c. Obtain safety postings from **the Production Safety Consultant**.
 - d. Complete the ***Location Safety Poster*** by filling in nearest hospital and emergency numbers and post.

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3. Call the **Production Safety Consultant** with any questions about lead paint, asbestos, water testing, rooftop fall protection, weight restrictions, etc. (Testing can be lengthy and certified structural engineers are expensive, so a backup location is prudent.)
4. Fill out the **Location On-Production Safety Checklist (Form 8)** to document inspection of each location on the day the crew is scheduled to arrive for work.
5. If filming in the City of Los Angeles, fill out a **Los Angeles Fire Dept. Film Location Fire Safety Inspection Checklist (Spot-Check)**.
6. Turn in all forms to the Production Manager.

Notify the Line Producer and Safety Coordinators (Stage Manager, Construction Coordinator and Transportation Captain/Coordinator) of safety concerns and special hazards:

1. Determine if special hazards exist such as excessive traffic, location hazards associated with airports, marinas, and other water sites.
2. Assist other Department Heads to conduct safety meetings:
 - a. When cast and crews are exposed to a location hazard.
 - b. Anytime there is a change in location.

Monitor all locations:

1. Inspect, on an ongoing basis, for changes that could produce additional hazards (e.g. changing weather conditions, construction changes, etc.)
2. See to it all sets are inspected on a regular basis, so they are free from hazards and correct, or have corrected, any that are found.
3. Consult with the Line Producer and the Production Safety Consultant to resolve location safety concerns (e.g. confined spaces, warehouse adaptation for stage use, etc.)

Develop contacts for emergency services:

1. Assist on-set first aid with emergency information and contacts.
2. Identify the nearest hospital and provide maps and directions for all locations to the Line Producer, Stage Manager, Construction Coordinator, Transportation Coordinator, and First Aid Staff.

Document all safety activities:

In addition to any completed **Location Pre-Production Safety Checklist (Form 7)**, **Location On- Production Safety Checklist (Form 8)**, **Los Angeles Fire Department Film Location Fire Safety Inspection Checklist (Spot-Check Form)**, forward all related paperwork (e.g. safety inspection certificates, test results, environmental surveys, etc.) to the Production Manager.

Show Wrap

1. See to it that all IIPP documents have been collected and forwarded to the Production Manager.
2. See to it that all borrowed safety equipment (harnesses, lanyards, ropes, etc.) has been returned to the Production Safety Consultant.

Hazardous Waste Disposal

It is Company policy that all chemicals will be disposed of in accordance with the laws of the city, county and state in which they are used. If you need to arrange for the disposal of paint or other chemicals, contact the Production Safety Consultant.

PRODUCTION STAGE HAZARD ASSESSMENT CHECKLIST

For any items found to be deficient, follow up with appropriate Key or Department Head, or Production Safety Consultant

Production Name:		To Be Completed By:	<i>Stage Manager/1st AD Key Grip</i>
Copies Sent To:	<i>Production Safety Consultant</i>	To Be Stored By:	<i>Production Manager</i>
Production Location:		Today's Date:	
Special Instructions:	<i>Complete a Hazard Assessment Checklist every other week for every stage used by Production. **Mark "N/A" for any items not applicable to your stage.**</i>		

GENERAL

<input type="checkbox"/>	<input type="checkbox"/> N/A	Safety Poster completed and displayed in a location where all employees are likely to see it.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Entrances to stage are clear of trip hazards.
<input type="checkbox"/>	<input type="checkbox"/> N/A	General housekeeping in good order.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Fire extinguishers accessible and "FIRE EXTINGUISHER" signs visible.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Appropriate safety equipment available.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Four-foot perimeter, aisles and passageways free of hazards.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Flats appropriately secured and braced.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Pits and floor openings covered or otherwise guarded.
<input type="checkbox"/>	<input type="checkbox"/> N/A	All exits free of obstructions and "EXIT" signs visible.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Directions to exits, when not immediately apparent, marked with visible signs.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Standard stair rails or handrails on all stairways having four or more risers.
<input type="checkbox"/>	<input type="checkbox"/> N/A	No storage under occupied raised platforms.

PAINT AND CHEMICAL PRODUCTS

<input type="checkbox"/>	<input type="checkbox"/> N/A	Covered metal cans used for paint and paint-soaked waste.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Portable eye wash station present and "EYE WASH" sign is visible.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Paints, adhesives, solvents and chemicals kept in closed containers when not in use.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Each container (vat, bottle, storage tank, etc.) for a hazardous substance labeled with product identity and hazard warning.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Pressure vehicles/cylinders properly stored.
<input type="checkbox"/>	<input type="checkbox"/> N/A	All propane has been removed from the stage.
<input type="checkbox"/>	<input type="checkbox"/> N/A	All paint and chemical-containing products disposed of properly using certified hazardous waste company.
<input type="checkbox"/>	<input type="checkbox"/> N/A	No paint or chemical products allowed in storm drains, sinks, or toilets.

AERIAL PLATFORMS AND LADDERS

<input type="checkbox"/>	<input type="checkbox"/> N/A	Only trained and authorized personnel allowed to operate aerial platforms.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Approved safety harnesses and lanyards worn when using aerial platforms.
<input type="checkbox"/>	<input type="checkbox"/> N/A	All ladders maintained in good condition and safety labels visible. (Take note of joints between steps and side rails, all hardware and fittings, and movable parts.)
<input type="checkbox"/>	<input type="checkbox"/> N/A	Ladders kept clear of doorways, exits, and passageways.
<input type="checkbox"/>	<input type="checkbox"/> N/A	When a ladder is used to gain access to an elevated work area, the ladder extends at least 3 feet above the elevated surface.

PERMANENTS - Catwalks

<input type="checkbox"/>	<input type="checkbox"/> N/A	Guard rails (top and middle) and toe boards present and properly secured on all sides of the catwalks (except at the entrance to stairways or ladders.)
<input type="checkbox"/>	<input type="checkbox"/> N/A	Catwalks free of trip hazards (rope, bracing, electrical cables, protruding nails, etc.)
<input type="checkbox"/>	<input type="checkbox"/> N/A	All floating slats in place and spaced correctly.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Sufficient access and working space provided and maintained about all electrical equipment to permit ready and safe operations and maintenance.
<input type="checkbox"/>	<input type="checkbox"/> N/A	House lighting in good working order.

(Form continues on back of page.)

PERMANENTS - "O" Zones		
<input type="checkbox"/>	<input type="checkbox"/> N/A	Fall protection systems being used.
<input type="checkbox"/>	<input type="checkbox"/> N/A	"O" Zones free of trip hazards (rope, protruding nails or bracing, etc.)
<input type="checkbox"/>	<input type="checkbox"/> N/A	Hoisting areas designated and appropriate for the task.
<input type="checkbox"/>	<input type="checkbox"/> N/A	When hoisting material or equipment, provisions made to assure no one will be passing under the suspended loads.
PERMANENTS - Electrical		
<input type="checkbox"/>	<input type="checkbox"/> N/A	All wires and/or cords free of fraying and deteriorating insulation.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Electrical cords or cables routed neatly to one side of the catwalk to prevent tripping.
<input type="checkbox"/>	<input type="checkbox"/> N/A	The bull cans have "WARNING" signs.
<input type="checkbox"/>	<input type="checkbox"/> N/A	The bull cans are closed.
<input type="checkbox"/>	<input type="checkbox"/> N/A	All set lights and/or overhead lighting fixtures (e.g. chandeliers) have a safety tie.
<input type="checkbox"/>	<input type="checkbox"/> N/A	DC or AC cable runs and over current protection devices clearly identified and marked.
GREEN BEDS		
<input type="checkbox"/>	<input type="checkbox"/> N/A	Green beds properly hung.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Green beds properly braced.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Hand and mid rails in place.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Cables properly stored or run neatly down one side of green bed.
<input type="checkbox"/>	<input type="checkbox"/> N/A	Floor boards in good condition, not broken or holes outstanding.
<input type="checkbox"/>	NOTES: <i>Please contact the Production Safety Consultant if any unsafe conditions exist.</i>	
<input type="checkbox"/> Surveyed By:		<input type="checkbox"/> Title:
<input type="checkbox"/> Signature:		

The following information is presented as a general safety checklist to help identify potential production location safety issues.

Project Name:		To Be Completed By:	
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(Form 7) Location Pre-Production Hazard Assessment Checklist

Asbestos/Lead/Mold Guidelines

YES	NO	
		<p>Are there any damaged building materials or debris at the location? Examples of damaged materials include the following:</p> <ul style="list-style-type: none"> Flakey Paint Chips Loose Plaster/Drywall Broken Floor Tiles Exposed Pipe Insulation VISIBLE Mold (See additional measures below)
		<p>Will any additional building materials be disturbed by production during prep, filming and/or strike? Disturbance includes the following:</p> <div style="display: flex; justify-content: space-around;"> <ul style="list-style-type: none"> Drilling/Nailing Demo/Removal <ul style="list-style-type: none"> Sanding Rigging </div> <p>If the answer to either of the above questions is “YES”, then these materials should be sampled by an environmental consultant to determine whether asbestos or lead is present.</p>
		<p>Did any of the materials tested come back positive for asbestos or lead?</p> <p>If this answer to the above question is YES, a licensed abatement contractor should be contracted to mitigate the hazard. This may include the following:</p> <ul style="list-style-type: none"> Complete or Partial Abatement/Removal Sealing/Encapsulating the Damaged Surface/Material Isolating the Area <p>Following the cleanup, a third-party environmental consultant should provide clearance sampling to verify that the work area is safe for re-entry.</p> <p>Please note that clearance sampling for lead abatement should only consist of air sampling unless minors will be present. If minors will be present, then wipe sampling should be performed.</p>
VISIBLE MOLD		
<p>During the building materials survey by the environmental consultant, a notation should be made in the report as to whether there’s visible mold in the building. Air samples for mold should not be collected. If visible mold is present, any water leaks should be repaired, and the visible mold should be removed by an abatement company. The confirmation of abatement shall consist of a subsequent visual inspection.</p>		
<p>If testing and/or mitigation is performed, all reports should be forwarded to your production safety representative and posted on location.</p>		

LOCATION PREP/STRIKE SAFETY

This form contains important location safety information for Prep and Strike crews. The Location Manager should complete for every location and distribute to Prep and Strike crews for posting. Copies should be sent to the Production Manager and the Production Safety Consultant.

Production Name:

Date:

Location Name:

Number & Street:

City & Zip:

Phone:

EMERGENCY PLAN

Medical, Fire or Police Emergency: 911 Unless facility has on-site response number:

Emergency Exit Locations:

Evacuation Assembly Area Location: (Attach map if necessary)

Nearest Hospital Name:

Number & Street:

City & Zip

Phone:

Additional Safety Information: (i.e. Environmental Reports – separate posting if necessary)

SAFETY PROGRAM CONTACTS

Production Safety Consultant:

Phone:

Location Manager:

Phone:

Line Producer:

Phone:

Anonymous Safety Hotline: 877-566-8001

Safety Data Sheets: Verisk 3E 800-451-8346

LOCATION ON-PRODUCTION HAZARD ASSESSMENT CHECKLIST <i>The following information is presented as a general safety checklist to help identify potential production location safety issues.</i>				
Production Name:			To Be Completed By:	<i>Location Manager</i>
Copies Sent To:	<i>Line Producer</i>	<i>Production Safety Consultant</i>	To Be Stored By:	<i>Production Manager</i>
Today's Date:		Location Name: Location Address:		
Special Instructions:	When: <i>During location production.</i> Frequency: <i>At each new location.</i> **Mark "N.A." for any items not applicable to your production**			
<input type="checkbox"/>	<input type="checkbox"/> N/A	<i>Location Safety Poster</i> is completed with appropriate emergency information and posted.		
<input type="checkbox"/>	<input type="checkbox"/> N/A	<i>Los Angeles City Fire Department Location Inspection Report</i> completed daily and kept at location in case of LAFD spot inspection. Send accumulated forms to Safety Representative after location is wrapped.		
<input type="checkbox"/>	<input type="checkbox"/> N/A	Exits are functional and properly marked.		
<input type="checkbox"/>	<input type="checkbox"/> N/A	Building is equipped with emergency lighting .		
<input type="checkbox"/>	<input type="checkbox"/> N/A	Building is equipped with a functional fire sprinkler system .		
<input type="checkbox"/>	<input type="checkbox"/> N/A	Fire extinguishers are available and tagged with the date of the last inspection.		
<input type="checkbox"/>	<input type="checkbox"/> N/A	Fire lanes are kept clear (20 feet wide), and fire hydrants are not blocked.		
<input type="checkbox"/>	<input type="checkbox"/> N/A	Elevator Permits re available and capacity limits discussed.		
<input type="checkbox"/>	<input type="checkbox"/> N/A	Determine where electrical generators will be placed so that generator exhaust gases will not blow into the crew area, office buildings or sound stages.		
<input type="checkbox"/>	<input type="checkbox"/> N/A	Designate locations for generator trucks, refueling trucks and water tenders.		
<input type="checkbox"/>	<input type="checkbox"/> N/A	No vehicles are parked within a minimum of 20 feet from tents.		
<input type="checkbox"/>	<input type="checkbox"/> N/A	Handrails, guardrails and/or lifelines are available if needed for roofs, platforms, cliffs, etc.		
<input type="checkbox"/>	<input type="checkbox"/> N/A	Hazard signs such as Danger, Warning, Caution, Keep Out, etc. posted if needed (including No Smoking signs)		
<input type="checkbox"/>	<input type="checkbox"/> N/A	Employees are not exposed to any asbestos, lead paint, chemicals, unidentified trash/debris, or excessive animal feces. If these are present, contact Safety Representative at (818) 954-2890.		
<input type="checkbox"/>	<input type="checkbox"/> N/A	<i>At the conclusion of filming, all production-produced directional signs to the location are removed and properly disposed.</i>		
Notes: (Use this space or reverse to indicate any other conditions that may require special attention.) 				
Completed By:			Signature:	

ACCIDENT INVESTIGATION REPORT

(Send to Production Manager when completed.)

*To be completed for EVERY injury or illness, regardless of severity.
For serious injuries or illnesses, see Form 4: Serious Incident Reporting Procedures.*

EMAIL OR FAX (818-954-2805) TO PRODUCTION SAFETY CONSULTANT WITHIN 24 HOURS OF ACCIDENT

PRODUCTION NAME: _____

DATE: _____

INJURED'S NAME: _____

TITLE: _____

DATE OF ACCIDENT: _____

TIME OF ACCIDENT: _____ AM ____ PM ____

LOCATION OF ACCIDENT: _____

Type of Injury/Illness

(Check all that apply)

Fracture	Amputation	Head Injury	1 st Degree Burn	Foreign Body in Eye	Bite/Sting
Strain	Laceration	Neck Injury	2 nd Degree Burn	Contact Dermatitis	Splinter
Sprain	Avulsion	Back Injury	3 rd Degree Burn	Allergic Reaction	Nausea
Dislocation	Abrasion	Abdomen Injury	Tooth Injury	Rash	Illness*
Contusion	Puncture	Crushing Injury	Hearing Loss	Infection	Other*

- Describe Illness or Other:

Injured Part of Body

(Check all that apply)

	Head	Chest	Shoulder	Wrist	Upper Leg	Foot	Eye	Mouth
Right	Neck	Ribs	Upper Arm	Back of Hand	Knee	Toe	Nose	Tooth
Left	Back	Abdomen	Elbow	Palm of Hand	Lower Leg	Forehead	Cheek	Throat
	Buttocks	Pelvis Area	Lower Arm	Finger (Digit_____)	Ankle	Ear	Chin	Other*

- Describe Other:

Explain Cause of Accident and Nature of Injury: (DO NOT SPECULATE)

Corrective Action Taken to Prevent Recurrence:

Witnesses, If Any:

Form Completed By (Print):

Title:

Signature: _____ Date: _____

RIGHT OF REFUSAL OF MEDICAL AID

Show Name: _____

I hereby refuse the first aid treatment recommended to me by the First Aid Person employed by my production for the illness or injury incurred by me on this date.

In signing this waiver, I release the First Aid Person, the Production and its personnel from any liability resulting from this refusal to accept such first aid treatment.

Injured's or Guardian's Signature

Date

Injured's Name (print)

/_____
Injured's Cell #

Job Title or Position

Guardian's Name in case of minor

Relationship to Injured

First Aid Person Signature

First Aid Person Name (print)

Witness Signature

Witness Name (print)

/_____
Witness Cell #

This form should be signed, dated and returned to the Production Safety Representative.

NOTES: _____
