

Safety Responsibilities 1st ASSISTANT DIRECTOR

Safety Program Information for First Assistant Director

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 First Assistant Director (1st AD)

As the First Assistant Director, you are responsible for conveying current safety requirements to all production crew members, for providing guidance for meeting IIPP goals, and for ensuring that key department heads meet their IIPP responsibilities. The **1st AD** is the person responsible for implementing the Safety Program on the Production side when the cameras are rolling and the set is active and shooting.

Production Start-Up

1. Visit **www.safetyontheset.com** to familiarize yourself with the safety information available, (AMPTP Safety Bulletins, Tool Box Talks, etc.) and read the **Production Safety Manual**. (You will receive a copy of the Safety Manual at your Safety Orientation.)
2. Review the General Safety Guidelines for Production and sign the acknowledgment form.
3. Attend the DGA General Safety Awareness presentation (strongly recommended.)
4. Please allow about 30 minutes before the start of your first Production Meeting for **the Production Safety Representative** to give the **Safety Orientation** to Department Heads.

On-Production

Implement the IIPP:

1. Discuss all potential safety concerns with the Location Manager, UPM, Special Effects/ Stunt/ Transportation/Construction Coordinators, and key department heads during the script read through and/or Production Meeting.
2. Conduct a safety meeting on the first day of production for cast and crew:
 - a. Briefly explain the safety program.
 - b. Discuss the safety aspects of the week's/day's activities and any potential hazards of the location.
 - c. Discuss elements of the **Emergency Plan**, such as the location of emergency equipment, exits, and telephones on all stage or interior sets and off-lot locations, and explain emergency procedures such as evacuation plans in case of fire. (*The instructions for this meeting are on **Form 3 - Emergency Plan Meeting.***)
 - d. Discuss safety precautions to be followed around any specialized equipment that may present a potential hazard (e.g. insert car, process trailer, cranes, booms, helicopters, etc.)
3. Conduct additional meetings in the following situations:
 - a. When a stunt or special/mechanical effect is to occur (e.g. pyrotechnics, high-fall, car stunt, etc.). Document stunts and special effect rehearsals on the daily Production Report.
 - b. When there is a substantial change to the stunt or special effect, another rehearsal should be held and documented on the daily **Production Report**.
 - c. Anytime the cast and crew are exposed to potential hazards (e.g. helicopter, exotic animal, water, extreme heat or cold, etc.).
 - d. Anytime new cast or crew joins the production.
 - e. Anytime a new process, substance or procedure is introduced (e.g. firearms, vehicle, gimbals, FX smoke, crane, etc.)
4. See to it that safety literature is properly distributed:
 - a. Distribute the **AMPTP Safety Bulletin** (found at www.safetyontheset.com) covering the specific hazard to cast and crew or attach to the call sheet (e.g. helicopter, firearm, special f/x smoke, etc. special/mechanical effect is to occur (e.g. pyrotechnics, high-fall, car stunt, etc.).
 - b. With help from the Production Safety Representative, see to it that special literature, such as **Safety Data Sheets (SDS's)** or industrial hygiene test results are available if requested by any cast or crew

member (e.g. assessment of any exposure to products, such as special effects, smokes, fogs, paints, dust, etc.) Post SDS's at the worksite.

5. While on production, confirm that all sets have been inspected and are free from recognized hazards.
 - a. The **Production Stage Hazard Assessment Checklist (Form 5)** should be used to document this inspection while on the lot.
 - b. The **Location On-Production Hazard Assessment Checklist (Form 8)** should be used while on location.

Communicate and Troubleshoot:

1. See to it that appropriate safety equipment is available and is used when needed by cast and crew (e.g. earplugs, harnesses, safety belts, etc.).
2. Consult with the UPM to resolve script safety concerns (e.g. special effects, stunts or other special hazards).
3. Make sure cast and crew safety concerns have been addressed and resolved:
 - a) Correct hazards discovered on the set (e.g. blocked exits, blocked fire lanes, trip and fall hazards, faulty equipment, etc.)
 - b) Address cast member concerns until they are resolved.

Instruct your Set Medics to notify the Unit Production Manager immediately in the event of any serious injury or illness.

Coordinate Response to Serious Accidents and Emergencies:

1. Respond to all on-set emergencies and accidents that result in serious injury, death, major property damage, hospitalization or events that create imminent danger.
2. Summon emergency medical assistance immediately (e.g. paramedics, fire department, police, etc.)
3. Clear the area and protect cast and crew from further injury.
4. Preserve evidence for further investigation.

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, AFTER ALL NECESSARY EMERGENCY PERSONNEL ARE CALLED, IMMEDIATELY notify the UPM to begin *Serious Incident Reporting Procedures (Form 4)*.

If the incident occurred within the State of California and resulted in serious injury, death or illness to an employee, Cal-OSHA must be notified within eight (8) hours of the incident. Other Countries, States and Provinces have their own reporting requirements. Regardless of where you are filming, your **Production Safety Representative** will make these notification calls.

NOTE: Any employer, officer, management official or supervisor who knowingly fails to report a death to Cal-OSHA or knowingly induces another to do so is guilty of a misdemeanor and will face a penalty of up to one year in jail, a fine of up to \$15,000, or both. If the violator is a corporation or a limited liability company, the corporation or company could be fined up to \$150,000.00.

1. For serious accidents as defined above, the Production Safety Representative will direct you to complete an **Accident Investigation Report (Form 9)**. The completed report should be sent to the **Production Safety Representative** and **Risk Management**.
2. Any accident should be noted on the back of the Production Report on the date the accident occurred by identifying only the name of injured employee and classification.
3. Under the guidance of the Studio Legal Department, the Production Safety Representative will conduct any additional accident investigations necessary.

CAUTION: Written and/or verbal statements should not be taken unless authorized by the Production Attorney or Studio Legal Department. Speculation regarding the cause(s) of accident(s) are not to be included as part of any Accident Investigation Report (Form 9). Speak with your Production Safety Representative for direction.

OSHA/Government Inspector/Investigation activities:

If you are ever visited or contacted by **OSHA**, or any government agency, contact the **UPM** and the **Production Safety Representative** immediately. Also contact the **Production Executive** and **Production Attorney**.

1. Immediately notify the UPM. If not available contact the **1st AD** and the **Production Safety Representative**.
2. Request the official's credentials and determine their validity.
3. Tell the inspector it is company policy to have the **Production Safety Representative** present for any inspection. Ask them politely to wait, and call the Production Safety Representative immediately.
4. Determine the nature of the visit. Be courteous, quiet, and cautious.
5. If the inspector refuses to wait, accompany the official directly to the site in question. Go straight to the site and try not to let the official wander into other areas.
6. Do not sign anything or provide written documentation. Ask that their request for documentation be placed in writing so it may be responded to in writing.
7. Ask for explanations of the problem and welcome any suggestions for corrective action. If possible, make corrections immediately.
8. If the inspector/investigator wants to take photographs, they may. You should however take your own pictures of any area that they photograph.
9. Answer questions directly; however, do not volunteer information.
10. Make detailed notes immediately after the official has departed. Copies are to be sent to the **Production Attorney** and to the Production Safety Representative.
11. Refer to "OSHA Inspection Guidelines" and "Regulatory Agency Inspection Guidelines" in the **Production Safety Manual** for more information.

Document IIPP activities:

Forward copies of all IIPP documentation on a regular basis to the **Production Office Coordinator** and the **Safety Department**:

1. All completed Safety Forms
2. Any training given to cast or crew
3. Accident and injury reports
4. Correspondence with OSHA or other governmental agencies.

Show Wrap

1. Return the Safety Manual to the Production Coordinator for return to the Production Safety Representative.
2. If necessary, review the Safety Program with the UPM and the Production Safety Representative for possible improvements and adjustments.

""EMERGENCY PLAN MEETING

At the beginning of production, on your first stage or location, an Emergency Plan meeting should be held for the entire cast and crew. This meeting can be a part of the general safety meeting. The information below should be included in this meeting. On every subsequent new stage and location, an Emergency Plan Meeting should be held. Please note "Emergency Plan Meeting" in your daily Production Report.

EMERGENCY PLAN MEETING:

1. Point out all, emergency exits, escape routes, and fire alarm pull stations.
2. Point out location of fire extinguishers, for use on small fires.
3. Inform your crew of the local emergency response telephone number.
4. Tell cast and crew members to be aware of who is working with them, in case they need to notify emergency personnel of missing persons.
5. Designate a post-evacuation assembly area, where your crew should gather by department, and Department Heads should count their employees and note anyone missing.
6. Tell your crew never to re-enter an evacuated building until emergency personnel say it is safe to do so.
7. Report any safety concerns to the Anonymous Safety Hotline at (818) 954-2800"qt : 99/788/: 2230'
8. **ON LOCATION:**
 - a) See to it that pertinent Emergency Plan information is attached to the call sheet.
 - b) Address any egress or evacuation issues in the daily safety meeting and note them in the daily Production Report
 - c) See to it that employees are informed of emergency escape routes and any location-specific hazards, such as lead paint, asbestos, traffic, etc.

SERIOUS INCIDENT REPORTING PROCEDURES

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, must be reported as follows:

Unit Production Manager Responsibilities:

1. In the event of a serious accident, injury or mishap, AFTER ALL NECESSARY EMERGENCY PERSONNEL ARE CALLED, the UPM should notify ALL of the following personnel immediately WITHOUT EXCEPTION:

- **Production Safety Representative:** _____
Cell: _____; Office: _____;
- **Risk Management Representative:** _____
Office: _____; Cell: _____
- **Labor Relations Executive:*** _____
Office: _____; Cell: _____
- **Corporate Communications Executive**
Office: _____ Cell: _____
- **Your Production Executive. Name:** _____;
Office: _____; Cell: _____

**Under the union collective bargaining agreements, union notification is required of any injury, regardless of the severity.*

If the incident occurred within the State of California and resulted in serious injury, death or illness to an employee, Cal-OSHA must be notified within eight (8) hours of the incident. Other Countries, States and Provinces have their own reporting requirements. Regardless of where you are filming, the Production Safety Representative will make these notification calls.

2. Information which is required to be reported:

- Time and date of accident.
- Employer's name, address and telephone number.
- Name and job title of person reporting the accident.
- Address of site of accident or event.
- Name of person to contact at accident site.
- Name and address of injured employee(s).
- Nature of injury.
- Location where injured employee(s) was (were) moved to.
- List and identities of other law enforcement agencies present at the accident site.
- Description of accident and whether the accident scene has been altered.

NOTE: Any employer, officer, management official or supervisor who knowingly fails to report a death to Cal-OSHA or knowingly induces another to do so is guilty of a misdemeanor and will face a penalty of up to one year in jail, a fine of up to \$15,000, or both. If the violator is a corporation or a limited liability company, the corporation or company could be fined up to \$150,000.00.

3. For serious accidents as defined above, Labor Relations or your Production Attorney will direct you to complete an **Accident Investigation Report (Form 9)**. The completed report should be sent to the Production Safety Representative, Risk Management and Labor Relations.
4. Any accident should be noted on the back of the Production Report on the date the accident occurred by identifying only the name of injured employee and classification.

CAUTION: Written and/or verbal statements should not be taken unless authorized by the Production Attorney or Studio Legal Department. Speculation regarding the cause(s) of accident(s) are not to be included as part of any Accident/Incident Investigation Report (Form 9). Refer to Serious Incident Reporting Procedures (Form 4) in your IIPP manual and your Production Attorney for direction.

Set Medic/First Aid Attendant Responsibilities:

1. **Notify the UPM of the injury.**
2. Provide the patient with **Workers' Compensation Form** or local equivalent. (The patient must sign and date a receipt. If the patient refuses the form, be sure to document this in your notes.)
3. FAX completed forms to the appropriate **Workers' Compensation Department**:
 - a. Warner Bros.: (818) 977-6787
 - b. Cast & Crew: (818) 848-4614
 - c. Entertainment Partners: (818) 559-3283
 - d. Production Safety Representative: (818) 954-2805
4. SEND a completed copy of the form to your **Production Executive** with that day's production report.
5. Fill out **Employer's Report of Occupational Injury or Illness (Form 5020)** or local equivalent. Record the patient's recounting of events in quotes. **DO NOT SPECULATE.**
6. FAX completed Form 5020 (or local equivalent) to the **Production Safety Representative** at (818) 954-2805.
7. Complete a **Refusal of First Aid (Form 16)** if the employee refuses to be treated at the scene of the incident or transported to the hospital.

Under the guidance and direction of the Production Attorney, the Production Safety Representative will conduct any additional accident investigations necessary.

ACCIDENT INVESTIGATION REPORT

(Turn in to Production Office Coordinator)

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

PRODUCTION TITLE: _____ DATE: _____

INJURED'S NAME: _____ CAST CREW OTHER

DATE OF ACCIDENT: _____ TIME OF ACCIDENT: _____ am pm

LOCATION OF ACCIDENT: _____

Type of Injury/Illness

(Check all that apply)

- | | | | | | |
|--------------------------------------|-------------------------------------|--|--|--|-------------------------------------|
| <input type="checkbox"/> Fracture | <input type="checkbox"/> Amputation | <input type="checkbox"/> Head Injury | <input type="checkbox"/> 1 st Degree Burn | <input type="checkbox"/> Foreign Body in Eye | <input type="checkbox"/> Bite/Sting |
| <input type="checkbox"/> Strain | <input type="checkbox"/> Laceration | <input type="checkbox"/> Neck Injury | <input type="checkbox"/> 2 nd Degree Burn | <input type="checkbox"/> Contact Dermatitis | <input type="checkbox"/> Splinter |
| <input type="checkbox"/> Sprain | <input type="checkbox"/> Avulsion | <input type="checkbox"/> Back Injury | <input type="checkbox"/> 3 rd Degree Burn | <input type="checkbox"/> Allergic Reaction | <input type="checkbox"/> Nausea |
| <input type="checkbox"/> Dislocation | <input type="checkbox"/> Abrasion | <input type="checkbox"/> Abdomen Injury | <input type="checkbox"/> Tooth Injury | <input type="checkbox"/> Rash | <input type="checkbox"/> Illness* |
| <input type="checkbox"/> Contusion | <input type="checkbox"/> Puncture | <input type="checkbox"/> Crushing Injury | <input type="checkbox"/> Hearing Loss | <input type="checkbox"/> Infection | <input type="checkbox"/> 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: _____