

# Safety Responsibilities

## LINE PRODUCER

### Safety Program information for the Line Producer (LP)

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 Line Producer

The Line Producer has the authority and is responsible for overall management and administration of the Injury & Illness Prevention Program. The LP is responsible for seeing that the Safety Program is in effect, responsibilities are delegated to the appropriate department heads, and the program is properly documented. All staff are responsible for carrying out the IIPP/Safety Program.

As Line Producer, you are to see that your employees are provided with:

1. A safe work environment;
2. Equipment that has been inspected and is in safe working condition;
3. All training and/or personal protective equipment required by the tasks they are asked to perform.

### Production Start-Up

1. Instruct your department heads that they may only hire employees who have the proper safety training for, and who understand how to safely perform, any task they are asked to do. *(For IATSE crews in Southern California, this includes completion of all Safety Pass training required by their job classification. See [www.csatf.org](http://www.csatf.org) for more information.)* If you need help arranging training, **call the Production Safety Representative**.
2. Make sure everyone you hire receives a copy of **Form 1 – General Safety Guidelines for Production** and signs an **Acknowledgment Form**. This is most easily accomplished by attaching it to the deal memo.
3. Organize and conduct an IIPP meeting with the **Stage Managers, Construction Coordinator, Transportation Coordinator, Special Effect Coordinator, Stunt Coordinator, Field Producers and Segment Producers**. The above Department Heads are responsible for coordinating the Safety Program within their departments.
  - a Direct everyone to **Section 3: Position Safety Responsibilities**. See that they read them, understand them and follow them.
  - b Empower the appropriate person on your show - **Stage Manager, Segment Producer, Field Producer, etc.** -to be responsible for implementing the Safety Program on the Production side when the cameras are rolling, and the set is active and shooting.
  - c Empower the appropriate person - **Construction Coordinator, Segment Producer, Researcher, etc.** – to be responsible for implementing the Safety Program on the Development/Prep-Production/Construction side.
4. Before you begin set construction, have your **Construction Coordinator** call **the Production Safety Representative** to discuss safety training, fall protection, and other safety issues.
5. Instruct the people choosing filming locations – **Location Manager, Researcher, Field Producer, Segment Producer, etc.** – to inspect for potential hazards such as asbestos, lead paint, visible mold, structural issues, fall protection requirements, etc., and to consult with the **Production Safety Representative** for appropriate remedies before bringing any production employees to a location.
6. As early as possible, you or your **Production Manager** should call the Production Safety Representative to schedule your production's **Safety Orientation**. (This usually takes place immediately before your first production meeting and lasts about 30 minutes.)
7. Visit **[www.safetyontheset.com](http://www.safetyontheset.com)** to familiarize yourself with the safety information available, (AMPTP Safety Bulletins, Tool Box Talks, etc.) and to read the **Production Safety Manual**. Your Production Office Coordinator has been instructed to print out the Safety Manual. *Always keep a copy on set and in the production office.*
8. Hire only **Stunt Coordinators** knowledgeable in the action they will be supervising. Hire stunt players who have the proper training and who understand or have previously demonstrated the similar work they will be asked to do. Stunt Coordinators performing their own stunts need a second stunt person to act as Stunt Coordinator during the sequence.

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9. Instruct **your Stunt and Special Effects Coordinators** to contact the Production Safety Representative well in advance of any large stunt or special effect.
10. Your **Production Manager** will keep a file of all completed Safety Forms.

### On Production

#### **Implement the IIPP:**

1. To help keep the safety program consistent, the **Stage Managers, Construction Coordinator, Transportation Coordinator, Special Effect Coordinator, Stunt Coordinator, Field Producers and Segment Producers** are to consult with the LINE PRODUCER/LP on all safety matters.
2. Advise **the Production Safety Representative** (in writing or verbally) of safety concerns and IIPP compliance activities on a regular basis.
3. Communicate with the **Production Safety Representative**, your **Director**, and your **Department Heads** regarding specific script and shooting concerns.
4. Request laboratory testing, engineering services, and/or additional information from **the Production Safety Representative** on potentially unsafe substances or processes. For example:
  - a. Possible asbestos at a location
  - b. Environmental concerns, such as shooting near water, which may pose potential hazards to crew or the environment.
  - c. Use of smokes, fogs and pyrotechnics, etc.
  - d. Unusual applications of equipment manufactured for another purpose.
5. See to it that **Department Heads** are conducting training and performing their IIPP duties. Additional training of these crewmembers may be necessary.
6. Review IIPP documentation regularly for completion and compliance.
7. See to it that the IIPP remains in effect for all second units, re-shoots, and opticals.
8. To avoid fines when shooting on location in the City of Los Angeles, be sure to complete the **Los Angeles Fire Department Film Location Fire Inspection Safety Checklist** daily.

#### Coordinate Response to Accidents and Emergencies:

1. See to it that emergency procedures are in place for all locations and that the nearest hospital has been identified. This information should be recorded on the **Location Safety Poster** or **Stage Safety Poster**, which are available from the Production Safety Representative. (*The Safety Poster should be posted at the worksite. Emergency numbers are to be posted by all set telephones.*)
2. Maps and directions to the nearest hospital are to be provided by the Location Manager to:
  - a. Field Producer/Segment Producer
  - b. 1<sup>st</sup> AD/Stage Manager
  - c. Construction Coordinator
  - d. Transportation Coordinator
  - e. Special Effects Coordinator
  - f. Stunt Coordinator
  - g. Production Manager
  - h. Prep/Strike Crews
  - i. First Aid Staff
3. If anyone is injured on the job, immediately send them to First Aid, the Medic or the nearest urgent care clinic for evaluation.

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### 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.**

***CAUTION: Written and/or verbal statements should not be taken unless authorized by the Production Attorney or Studio Legal Department. Speculation regarding the causes(s) of an accident 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 Production Safety Representative** immediately. Also contact the **Production Executive and Production Attorney**.

1. Request the official's credentials and determine their validity.
2. 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.
3. Determine the nature of the visit. Be courteous, quiet, and cautious.
4. 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.
5. 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.
6. Ask for explanations of the problem and welcome any suggestions for corrective action. If possible, make corrections immediately.
7. If the inspector/investigator wants to take photographs, they may. You should however take your own pictures of any area that they photograph.
8. Answer questions directly; however, do not volunteer information.
9. Make detailed notes immediately after the official has departed. Copies are to be sent to the **Production Attorney** and to the Production Safety Representative.
10. Refer to "OSHA Inspection Guidelines" and "Regulatory Agency Inspection Guidelines" in the **Production Safety Manual** for more information.

### Document IIPP Activities:

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:

If necessary, review the Safety Program with the Production Safety Representative for possible improvements and adjustments.

## **INJURY AND ILLNESS REPORTING PROCEDURES**

*ALL INJURIES TO CREW OR CAST MEMBERS MUST BE REPORTED TO THE PRODUCTION SAFETY REPRESENTATIVE.*

**Form 9: Accident Investigation Report** should be completed for every injury or illness, no matter the severity.

### **Serious Incident Reporting Procedures:**

A Serious Incident is an injury or illness that results in transportation by ambulance, visitation to the hospital by one or more employees, any treatments other than general first aid\*, any near miss during stunts or special effects, any injury – even minor – to cast members or stunt performers, or any serious property/asset damage.

*\*An OSHA chart of treatment that is considered First Aid is attached.*

**Please note:** *These are SAFETY PROGRAM procedures. Workers Comp requires different documentation. Because sensitive personal medial information is often included, please DO NOT send Workers Comp forms or reports to the Production Safety Representative unless specifically requested.*

### **UPM:**

- If the injury or illness meets the criteria for a serious incident, IMMEDIATELY notify your **Production Safety Representative**, who will make all necessary notifications.
- **Accident Investigation Report – Form 9.**
  - Every section of this form needs to be completed, including “Steps taken to prevent recurrence.”
  - This form can be completed by the person having the most knowledge of the incident: Medic, Department Head, Production Office Coordinator, UPM. The Production Safety Representative will assist if requested.
- Some injuries and illnesses require timely **OSHA notification**. The Production Safety Representative will make this notification, based upon information from you.
- **Forward completed Form 9 to POC.**

### **MEDIC:**

- **IMMEDIATELY notify the UPM of the injury or illness.**
- Fill out ***Employer’s Report of Occupational Injury or Illness (Form 5020)*** or local equivalent.
- If employee refuses recommended treatment or transportation to the hospital, have employee complete and sign ***Right of Refusal of Medical Aid – Form 16.***
- **Forward completed Form 5020 and Form 16 to Production Office Coordinator.**

### **POC:**

- **Forward completed Form 9 and Form 16 to Production Safety Representative.**
- Forward Form 5020 if requested by Production Safety Representative.
- If patient is hospitalized, keep Production Safety Representative updated on status.

### **PRODUCTION SAFETY REPRESENTATIVE:**

- Will notify OSHA if required.
- Will conduct additional investigation if needed.
- Will assist with any OSHA or other agency investigations.

## First Aid List

1904.7 (b)(5)(ii) What is “first aid”?

For the purposes of Part 1904, "first aid" means the following:

(A)	Using a nonprescription medication at nonprescription strength (for medications available in both prescription and non-prescription form, a recommendation by a physician or other licensed health care professional to use a non-prescription medication at prescription strength is considered medical treatment for recordkeeping purposes);
(B)	Administering tetanus immunizations (other immunizations, such as Hepatitis B vaccine or rabies vaccine, are considered medical treatment);
(C)	Cleaning, flushing or soaking wounds on the surface of the skin;
(D)	Using wound coverings such as bandages, Band-Aids™, gauze pads, etc.; or using butterfly bandages or Steri-Strips™ (other wound closing devices such as sutures, staples, etc. are considered medical treatment);
(E)	Using hot or cold therapy;
(F)	Using any non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc. (devices with rigid stays or other systems designed to immobilize parts of the body are considered medical treatment for recordkeeping purposes);
(G)	Using temporary immobilization devices while transporting an accident victim (e.g., splints, slings, neck collars, back boards, etc.).
(H)	Drilling of a fingernail or toenail to relieve pressure, or draining fluid from a blister;
(I)	Using eye patches;
(J)	Removing foreign bodies from the eye using only irrigation or a cotton swab;
(K)	Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means;
(L)	Using finger guards;
(M)	Using massages (physical therapy or chiropractic treatment are considered medical treatment for recordkeeping purposes); or
(N)	Drinking fluids for relief of heat stress.

(iii) Are any other procedures included in first aid?

No, this is a complete list of all treatments considered first aid for Part 1904 purposes.

# ACCIDENT INVESTIGATION REPORT

(Send to Production Office Coordinator 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 REPRESENTATIVE 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 <sup>st</sup> Degree Burn	Foreign Body in Eye	Bite/Sting
Strain	Laceration	Neck Injury	2 <sup>nd</sup> Degree Burn	Contact Dermatitis	Splinter
Sprain	Avulsion	Back Injury	3 <sup>rd</sup> 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:**