

LOCATION HAZARD IDENTIFICATION WORKSHEET

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This Hazard Identification Worksheet is designed to help locations personnel in identifying hazards at potential filming locations. Once completed, it should then be forwarded to the appropriate production personnel so that a full risk assessment can be performed prior to filming at this location.

| PRODUCTION TITLE | EPISODE / SCENE # | SCENE HEADING <small>(e.g. Int. Restaurant)</small> | LOCATION NAME / ADDRESS |
|------------------|-------------------|--|-------------------------|
| | | | |

| SCHEDULED DATES | | DATE(S) | TIME (if known) | |
|-----------------|-------|---------|-----------------|--|
| | PREP | | | |
| | SHOOT | | | |
| | WRAP | | | |

| | | | |
|---------------------|--|---|-------------------------------|
| LOCATION: | <input type="checkbox"/> INTERIOR | <input type="checkbox"/> EXTERIOR | <input type="checkbox"/> BOTH |
| TIME OF DAY: | <input type="checkbox"/> DAYLIGHT SHOOTING | <input type="checkbox"/> NIGHT SHOOTING | <input type="checkbox"/> BOTH |

SECTION 1 - QUESTIONS FOR THE PROPERTY MANGER/OWNER

As outlined in section 25 of the Workers Compensation Act:

Every owner of a workplace must

- 1. provide and maintain the owner's land and premises that are being used as a workplace in a manner that ensures the health and safety of persons at or near the workplace,*
- 2. give to the employer or prime contractor at the workplace the information known to the owner that is necessary to identify and eliminate or control hazards to the health or safety of persons at the workplace*

| ITEM | THINGS TO CONSIDER | YES | NO | DETAILS |
|------|--|-----|----|---------|
| 1 | Did you inform the managers/owners of the location as to what activity the production company will perform? | | | |
| 2 | Are the managers/owners aware of any existing hazards associated with the location? | | | |
| 3 | Has a hazard assessment been performed in the past? | | | |
| 3.1 | If yes: When was this assessment completed? | | | |
| 3.2 | Is it available for this production's use? | | | |
| 4 | Are there engineering reports and floor plans which outline pick points, weight loads and structural issues available? | | | |
| 4.1 | If yes: Are they available for this production's use? | | | |
| 5 | If the location is an operational facility, are there specific emergency or evacuation procedures production must adhere to? | | | |

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|-----|--|--|--|--|
| 5.1 | If yes: When will these be made available to production? | | | |
| 6 | Is there any hazardous material such as lead-based paints, asbestos or mould? | | | |
| 6.1 | If yes: Are all existing hazardous materials properly stored and/or secured? | | | |
| 7 | Does the location contain PCB materials (i.e. electric transformers) | | | |
| 8 | Has this location been used for a purpose that would have resulted in excessive dust or particulate creation? | | | |
| 9 | If the location is an operational facility, are there copies of Safety Data Sheets (SDS) on file at the location for all hazardous material being used/stored on site? | | | |
| 10 | Is the A.C. properly grounded? | | | |
| 11 | Are there any potential live electrical hazards (exposed wiring, electrical boxes etc.) at the location? | | | |
| 12 | Is there enough electrical output for the demand needed? | | | |
| 13 | Is there sanitary potable water on site and enough running water for departments such as paint, construction etc.? | | | |
| 14 | Are there any water hazards, such as leaks in roofs or plumbing? | | | |
| 15 | Is there security at the site, especially for those working alone at night? | | | |

SECTION 2 – VISUAL INSPECTIONS

The following sections are intended to provide guidance to locations department personnel on what to consider and look for when identifying hazards at potential filming locations.

VISUAL INSPECTION - FACILITIES

| ITEM | THINGS TO CONSIDER | YES | NO | DETAILS |
|------|--|-----|----|---------|
| 16 | Does the location contain a visible amount of dust or particulate? | | | |
| 17 | Can you see anything, such as mould or mildew, that might lead to potentially dangerous levels of exposure to microbial contaminants, such as bacteria, yeast, mould, fungi, virus, prions, protozoa, or toxins? | | | |
| 18 | If yes: Ensure air quality and other applicable testing is performed. | | | |

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|----|--|--|--|--|
| 19 | Is there a risk for exposure to biological contaminants, such as blood, urine, feces, animal remains? | | | |
| 20 | Are exits, corridors, and stairways illuminated? | | | |
| 21 | Are fire exits clearly marked and unobstructed? | | | |
| 22 | <p>Are stairs slip resistant and are handrails present if required?</p> <p>WorkSafeBC's Occupational Health & Safety Regulation 4.62 (Handrails on stairways) states:</p> <p>Stairs with more than 4 risers must have continuous handrails on</p> <ul style="list-style-type: none"> a) any open side of the stairway b) one side of enclosed stairways 112 cm (44 in) or less in width, and c) both sides of enclosed stairways over 112 cm (44 in) wide | | | |
| 23 | Are there appropriate means of emergency egress and communications such as lights, fire exits, operational telephone lines and signs | | | |
| 24 | Are there adequate areas for storage of equipment that will not obstruct emergency exits etc.? | | | |

VISUAL INSPECTION - VENTILATION

| ITEM | THINGS TO CONSIDER | YES | NO | DETAILS |
|------|--|-----|----|---------|
| 25 | Will the production be using chemicals, paints, or smoke and fog that will require ventilation controls and/or spray booths? | | | |
| 26 | Does the building have a general ventilation system that is operating? | | | |
| 27 | Are there enclosed areas (e.g. tunnels) that may require supplementary ventilation? | | | |
| 28 | Is there adequate heating/cooling installed? | | | |
| 29 | Can heaters and fans be brought in without compromising air quality and fire safety? | | | |

VISUAL INSPECTION - WASHROOM/LIGHTS

| ITEM | THINGS TO CONSIDER | YES | NO | DETAILS |
|------|---|-----|----|---------|
| 30 | Are there hygienic and functional washrooms for the intended number of workers? | | | |
| 31 | Is the outdoor lighting adequate? | | | |

VISUAL INSPECTION - TRAFFIC CONTROL

| ITEM | THINGS TO CONSIDER | YES | NO | DETAILS |
|------|--|-----|----|---------|
| 32 | Does traffic control need to be arranged? | | | |
| 32.1 | If YES , ensure additional assessments of proper level of traffic control needed (PAs with traffic control ticket, traffic control company or Police) | | | |
| 32.2 | Is a traffic management plan required? | | | |
| 33 | Do cars or pedestrians need to be safely routed around the shooting area? | | | |
| 34 | Are there special circumstances (stunts or special effects) that will require additional lock-up positions? | | | |

VISUAL INSPECTION – WORKING AT HEIGHTS/FALL PROTECTION

WorkSafeBC's Occupational Health & Safety Regulation 11.2 (Obligation to use fall protection) states:

"an employer must ensure that a fall protection system is used when work is being done at a place

(a) from which a fall of 3 m (10 ft) or more may occur, or

(b) where a fall from a height of less than 3 m involves a risk of injury greater than the risk of injury from the impact on a flat surface.

(2) The employer must ensure that guardrails meeting the requirements of Part 4 (General Conditions) or other similar means of fall restraint are used when practicable."

Additionally, WorkSafeBC's Occupational Health & Safety Regulation 4.55 (Guardrail locations) states:

An area accessible to workers must have guards or guardrails installed in any of the following circumstances:

(a) if a raised floor, open-sided floor, mezzanine, gallery, balcony, work platform, ramp, walkway, or runway is 122 cm (4 ft) or more above the adjacent floor or grade level;

| ITEM | THINGS TO CONSIDER | YES | NO | DETAILS |
|------|---|-----|----|---------|
| 35 | Are there any unprotected edges (higher than 10 feet with a lack of railings and toe boards) that may pose a risk to falling or items being dropped from height? | | | |
| 36 | Are there issues potential slips, trips, falls at the location, such as housekeeping, electrical cords, holes on the floor? | | | |
| 37 | Is signage required to identify hazardous fall areas (potential fall hazards such as unmarked edges, covered or structurally compromised areas) to others on production? If unsure, consider engaging a structural engineer for guidance. | | | |

VISUAL INSPECTION - CONFINED SPACE

| | | | | |
|----|--|--|--|--|
| 38 | Are there any confined spaces associated with or at the location? Confined spaces could include sewers, manholes, culverts, storage tanks, silos, underground chambers, and vaults. | | | |
|----|--|--|--|--|

WEATHER CONSIDERATIONS

| ITEM | THINGS TO CONSIDER | YES | NO | DETAILS |
|------|---|-----|----|---------|
| 39 | Could weather conditions, such as rain or wind, increase the risks? | | | |
| 39.1 | <p>If YES, identify which hazards are of concern due to weather factors.</p> <p><i>For example, could windy conditions increase the risk of trees or branches falling?</i></p> | | | |

SAFETY NOTICES

| | | | | |
|----|---|--|--|--|
| 40 | Are there any safety notices, bulletins or safe work practices specific to this location that PRODUCTION will need to provide to be posted or attached to the call sheet? | | | |
|----|---|--|--|--|

Emergency Response Available:

Check all boxes that are on or near the location

| | | |
|--|---|--|
| <input type="checkbox"/> Hydrants | <input type="checkbox"/> EMT/Ambulance | <input type="checkbox"/> First Aid Room |
| <input type="checkbox"/> Fire Protection Specialists | <input type="checkbox"/> Fire Extinguishers | <input type="checkbox"/> First Aid Attendant |
| <input type="checkbox"/> Sprinklers | <input type="checkbox"/> Closest Hospital: | |

Note: All worksites are required to have a first aid attendant. Please see <https://www.actsafe.ca/topic/first-aid/> for more information. Use Actsafe's First Aid Assessment Tool (firstaid.actsafe.ca) to ensure the proper level of first aid is on site.

What additional hazards, if any, have you identified?

List in point form

Considerations:

List information that those performing the Risk Assessment should consider when determining controls to protect cast, crew and public at large. Discuss with others on implementation.

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|---|---|

Please use separate page if necessary

| | |
|----------------------|--|
| Completed By: | Date Completed: DD/MMM/YYYY (e.g 01/JAN/2021) |
|----------------------|--|

This document will be distributed to (check all that apply):

| | | | |
|---------------------------|---------------------------|---------------------------|------------------------------------|
| Producer | Production Manager | Production Safety | 1 st Assistant Director |
| Position (indicate below) | Position (indicate below) | Position (indicate below) | Position (indicate below) |
| Position (indicate below) | Position (indicate below) | Position (indicate below) | Position (indicate below) |