**Location Risk Assessment Sheet**

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| **Production Title** | **Wi-Fi** | **Location for Scene No(s).** | **Jamie’s Flashback** |

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| **Location** | Bedroom | **Activity** | Filming Jamie’s flashback |

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| **PART A - Hazard list –** *select your hazards from the list below and use these to complete Part B* | | | | | | | |
| **Hazards** | **Tick** | **Hazard** | **Tick** | **Hazard** | **Tick** | **Hazard** | **Tick** |
| Assault by person | ❑ | Hot environment | ❑ | Sharp object / material | ❑ | Fire | ❑ |
| Attack by animal | ❑ | Intimidation | ❑ | Slippery surface | ❑ | Explosive Materials | ❑ |
| Cold environment | ❑ | Lifting Equipment | ❑ | Trip hazard | ❑ | Hazardous substance | ❑ |
| Crush by load | ❑ | Manual handling | ❑ | Vehicle impact / collision | ❑ | Physical damage to Kit | ❑ |
| Contact with cold surface | ❑ | Object falling, moving or flying | ❑ | Working at height | ❑ | Working Alone | ❑ |
| Contact With Hot Surface | ❑ | Obstruction / exposed feature | ❑ | Electric shock | ❑ | Other (please specify in Part B) | ❑ |

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| **PART B – Risk Assessment** | | | | | | | | |
| **Hazards**  List what could cause harm from this activity *e.g. working at height, trip hazard, fire, etc.* | **Who exposed**  List who might be harmed from this activity *e.g. staff, contractors, contributors, public, etc.* | | **Risk**  *Decide the level of risk as if you were to do the activity without your controls* | | **Control measures**  For each hazard, list the measures you will be taking to minimise the risk identified  *e.g. appointing competent persons, training received, planning, use of personal protective equipment, provision of first aid, etc.* | | **Risk**  *Now decide level of risk once all your controls are in place* | |
| Lifting Equipment | All crew | | **VERY LOW** | I | Equipment will be moved around on set.  Make sure all equipment moved is moved sensibly and no one is carry to much equipment. | | **VERY LOW** | I |
| **LOW** |  | **LOW** |  |
| **MEDIUM** |  | **MEDIUM** |  |
| **HIGH** |  | **HIGH** |  |
| **EXTREMELY HIGH** |  | **EXTREMELY HIGH** |  |
|  |  | | **VERY LOW** |  |  | | **VERY LOW** |  |
| **LOW** |  | **LOW** |  |
| **MEDIUM** |  | **MEDIUM** |  |
| **HIGH** |  | **HIGH** |  |
| **EXTREMELY HIGH** |  | **EXTREMELY HIGH** |  |
|  |  | | **VERY LOW** |  |  | | **VERY LOW** |  |
| **LOW** |  | **LOW** |  |
| **MEDIUM** |  | **MEDIUM** |  |
| **HIGH** |  | **HIGH** |  |
| **EXTREMELY HIGH** |  | **EXTREMELY HIGH** |  |
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| **HIGH** |  | **HIGH** |  |
| **EXTREMELY HIGH** |  | **EXTREMELY HIGH** |  |
|  |  | | **VERY LOW** |  |  | | **VERY LOW** |  |
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| **HIGH** |  | **HIGH** |  |
| **EXTREMELY HIGH** |  | **EXTREMELY HIGH** |  |
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| **Director/Production Manager Signature** | |  | | | **Date of Location Recce** |  | | |