

## Elder Conservatorium of Music Noise Incident Report

Ensemble/Course:		
Building:		Room/s: <input type="text"/>
Item/Activity:		
Reported by:		
Date:		

Report to be completed by the affected individual and the ensemble/activity coordinator, and then submitted to the Elder Music Office. The Conservatorium Director will provide responses. Copies of the completed report will be provided to the ensemble/activity coordinator and affected individual.

An answer of 'Yes' to questions 1 and 2 may require hearing assessment of the affected individual.

An answer of 'Yes' to *any* question requires a written response from the ensemble/activity coordinator and Conservatorium Director regarding appropriate actions to be taken.

Hazard identification questions		Yes	No	N/A
1.	Sound levels during rehearsal/performance/activity were uncomfortably loud and/or caused pain?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Sound levels during rehearsal/performance/activity resulted in temporary 'ringing in the ear'?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Were sound levels so high that you were unable to clearly hear your own instrument while playing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Has there been a significant change in the set-up of the orchestra or in the rehearsal/performance venue that has impacted on the acoustic and/or sound exposure levels?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Was an acoustic screen, riser, ear plug, or other control measure required but not available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Were there any exceptional extraneous noises to the musical content (such as cannon blasts, gun shots, or very loud machine noise) involved in the rehearsal/ performance/activity?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Has the program/rehearsal/activity duration exceeded 3 hours in a 24-hour period?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Additional Comment (from person submitting report)
	Response/Actions to be taken (Ensemble/Activity Coordinator)

	Response/Actions to be taken (Conservatorium Director)
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**Internal use only**  
Copy to be forwarded to the Faculty HSW Coordinator

Elder Conservatorium of Music	Noise Incident Form	Effective Date:	17 March 2016	Version2
Authorised by	G Koehne, Director	Review Date:	January 2017	Page 3 of 2
Warning	This process is uncontrolled when printed. The current version of this document is available on the Faculty HSW Website.			