

Checklist Room-Outdoor-Sitting (R_{OSI})

Nr.	Measure	Checkbox	Control	Date
Addressee employees				
1.1	Are the workstations in the production rooms and workshops at least 1.5 meters apart? If not, are they separated by acrylic glass walls?	<input type="checkbox"/> Yes <input type="checkbox"/> No _____ <input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.2	Seats are at least 1.5 metres apart, indicated by markings and barriers.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.3	Is there permanent ventilation backstage and in the common areas during the event? Are the windows been opened at least every 20 minutes for 3 to 10 minutes, if there is no permanent ventilation?	<input type="checkbox"/> Yes <input type="checkbox"/> No _____ <input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.4	Are tickets checked by employees at the point of entry with a ticket scanner if possible?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.5	Has a hygiene officer been appointed and made known to employees and is he/she present at every rehearsal?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.6	Is the hygiene officer given instructions and the authority to issue directives?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.7	Is there a cleaning schedule for employees specifying the frequency of cleaning and type of cleaning products?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.8	Are any messes removed immediately by employees on duty?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.9	Are cleaning staff present and identifiable at all events?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.10	Is the entire building kept impeccably clean, particularly the sanitary facilities? Is this ensured by standard cleaning products containing surfactants?	<input type="checkbox"/> Yes <input type="checkbox"/> No _____ <input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.11	Have employees cleaned all contact surfaces prior to the event?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.12	Are rapid point-of-care antigen tests available for free to employees?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.13	Are employees divided into stable teams?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.14	Where there are no ventilation systems, are windows opened for 3 to 10 minutes every hour (office) or every 20 minutes (conference rooms)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.15	Are employees instructed in hygiene measures every 6 months or as needed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.16	Is it possible for employees and other parties to test themselves in the presence of a qualified person (such as a hygiene officer)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
1.17	Are the equipment, materials and computer workstations in the production rooms tied to specific employees? If not, are the contact surfaces disinfected? Are signs with recommendations and instructions posted backstage and in common areas?	<input type="checkbox"/> Yes <input type="checkbox"/> No _____ <input type="checkbox"/> Yes <input type="checkbox"/> No _____ <input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
Addressee other involved parties				
2.1	Are the artists' entrance and exit separate and are the different teams of those involved kept physically apart at the entrance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____
2.2	Are there sufficiently large areas with separate turnstiles for luggage and bag searches at the point of entry?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ____ / ____ / ____

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2.3	Is the artists' backstage area separated from other common areas by partitions, floor markings or signs?	<input type="checkbox"/> Yes <input type="checkbox"/> No _____ <input type="checkbox"/> Yes <input type="checkbox"/> No _____ <input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____ _____ _____	Date: _____ / _____ / _____
2.4	Is the access to the stage kept separate from that of artists and the stage team?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
2.5	Are minimum distances marked on the stage floor, depending on the kind of artistic performance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
2.6	Are there separate facilities for artists?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
2.7	Are other persons involved in admission and sales given in-person instruction in small teams on current hygiene measures?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
2.8	Do involved parties with a SARS-CoV-2 infection or positive test results that endanger the event inform event management?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
2.9	Is visitor data registered for contact tracing during ticket purchase, digitally or in list form? Visitors must consent to the storage and transmission of their data in accordance with the GDPR.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
2.10	Have all those involved furnished evidence of vaccination or recovery?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
2.11	During musical rehearsals, can performers keep 2 metres apart on stage? Is the floor marked and are there assigned seats?	<input type="checkbox"/> Yes <input type="checkbox"/> No _____ <input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
Addressee visitors				
3.1	Are visitors informed about the current conditions on site, especially about access regulations, via notices and announcements (e.g., distancing regulations or a mask mandate)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
3.2	Are there seats and bistro tables with appropriate distance between them available?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
3.3	Give the catering areas and the area for queuing ample space and cordoned off for one-way routing using tensors, barrier grids, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
3.4	Are the signs advertising what is on offer clearly legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
3.5	Can visitors use cards to make purchases?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
3.6	Are the food and beverage menus laminated?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
3.7	Are the meals pre-portioned and sealed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
3.8	Is it ensured that it is impossible for visitors to move or remove chairs in the event space?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
3.9	Is any seating that is not to be occupied by visitors blocked off by barrier tape?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
3.10	Are the entrances and exits in the event space and sanitary facilities marked and signposted?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____
3.11	Are there assigned seats with numbers?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: _____ / _____ / _____

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3.12	Is the waiting area set up in such a way as to prevent the obstruction of access routes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.13	Are signs with recommendations and instructions posted backstage and in the common areas?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.14	Is the artists' backstage area separated from other common areas by partitions, floor markings and signs?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.15	Is the event space cordoned off by means of construction fences or similar? Is visitor access controlled by staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.16	Are general hygiene rules posted in the sanitary facilities?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.17	Was the testing of the visitors carried out by a recognized testing entity? (Required documentation: date, time, name of the test and of the manufacturer, name of the person tested and of the entity that carried out the test).	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.19	Are there turnstiles for visitors as well as contact-free registration and ticket inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.18	Are online tickets incentivized with discounts?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.20	Are staggered admission times made possible for visitors in the form of tickets with varying admission times?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.21	Is visitor data registered for contact tracing during ticket purchase, digitally or in list form?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
	Visitors must consent to the storage and transmission of their data in accordance with the GDPR.	<input type="checkbox"/> Yes <input type="checkbox"/> No		
3.22	Is visitor data kept for four weeks for documentation purposes? Is the subsequent irrevocable deletion of the data ensured?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.23	Do the attendance lists include the following data: visitors' first and last names, full postal addresses, e-mail addresses and phone numbers?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.24	At the point of entry, are visitors recommended the use of Corona-Warn-App to document their attendance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.25	Is there a predetermined maximum number of visitors in the event space?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.26	Do visitor services staff assist with the seating of guests and instruct them to observe distancing rules until they reach their seats?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.27	Are families, cohabiting couples, etc. given the opportunity to sit next to each other?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.28	Are visitors with a face mask exemption certificate advised not to attend the event?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
3.29	Are unvaccinated visitors tested according to the 3G model (with a rapid antigen test, not older than 24 h or a PCR test, not older than 48 h)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
Addressee employees and other involved parties				
4.1	Are employees and other involved parties in sales, in the cloakroom and at the checkout protected by a sneeze guard viz. acrylic glass?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
4.2	Are employees and other involved parties in sales instructed to use a dish washer if possible to wash dishes at at least 60 degrees Celsius?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __
4.3	Are signs with recommendations and instructions posted backstage and in the common areas?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: __ / __ / __

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4.4	Is there permanent ventilation backstage and in the common areas during the event? Otherwise, windows should be opened at least every 20 minutes for 3 to 10 minutes.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.5	Is a policy concerning required measures (distancing, mask mandate, crowd dispersal, checking test documentation, vaccination and recovery status) been developed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.6	Are employees and other persons involved in admission, sales, cloakroom, backstage and in the common areas given in-person instruction in small teams on current behavioural and hygiene measures?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.7	Are employees and other involved parties in sales and in the cloakroom afforded the opportunity to regularly wash and disinfect their hands?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.8	Are the shifts of sales and cloakroom employees staggered?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.9	Are employees and other involved parties in sales instructed to use appropriate packaging for transport and storage of materials to prevent contamination?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.10	Is access to production rooms restricted to persons whose workplace is located there and who have registered?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.11	Are work passes issued in a physically separate area?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.12	Is set-up and strike in the production rooms staggered wherever possible?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.13	Are work schedules conforming to the Infection Protection Act posted in the production rooms for employees and other concerned parties?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.14	Are the employees and other parties in the workshops and backstage or in the common areas divided into fixed teams that are as small as possible and as large as necessary? The individual teams should have no contact with each other if at all possible.	<input type="checkbox"/> Yes <input type="checkbox"/> No _____ <input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.15	Are door handles, shelves and floors backstage and in the common areas cleaned once a day, without using spray disinfection?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.16	Are the shifts in backstage and common rooms staggered wherever possible?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.17	Is catering for the crew backstage staggered?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.18	Have employees and other parties completed a rapid point-of-care antigen test prior to beginning work? (The results should be no more than 24 hours old; for regular testing, tests may be a maximum of 48 hours apart). Recommended also for boosted and recovered employees and other parties.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.19	Do employees and other parties comply with the requirement to wear a face mask in the spectator areas during the event, except for artists during their performances?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
4.20	Do employees and other involved parties at the checkout and in sales wear and regularly change disposable gloves?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
Addressee employees, visitors and other parties				
5.1	Are hand sanitiser dispensers in place at all locations (entrances and exits) for all employees, visitors and other parties ?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
5.2	Are entrances and exits separated by barriers, tensors or tape?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___

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5.3	Is there easy access between all locations, marked out on the floor (on stage during set-up and strike), with paths intersecting as little as possible?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
5.4	Is compliance with minimum distancing of 1.5 metres, except for families, married/cohabiting couples, etc. ensured at all locations?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
5.5	Do sanitary facility employees refill containers for paper towels, soap and hand sanitiser as needed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
5.6	Is cough and sneeze etiquette observed by all employees, visitors and other parties?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
5.7	Are signs to wear a medical face mask (surgical mask) or a FFP-2 filter mask in closed rooms are posted?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
5.8	Are employees and other parties given the opportunity to disinfect their hands upon entering the premises?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___
5.9	In case of employees and other parties with a suspected SARS-CoV-2 infection or positive test results, are superiors, team leaders and/or tour and production managers informed immediately? Do the concerned parties stay away from the event?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: _____	Date: ___ / ___ / ___