

**THE BASIS OF HEALTH AND SAFETY AT WORK
AND
FIRE PROTECTION**

(Basic Part)

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September, 2017



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1. REGULATION

1.1 Health and Safety at Work (OSH-1)

- The law on Health and Safety at Work – OSH-1 (Official Gazette of RS, no. 43/11)
- Regulation on the protection of workers from the risks related to injuries (Official Gazette of RS, no. 46/13)
- Regulation on the protection of workers from the risks related to exposure to artificial radiation (Official Gazette of RS, Nos. 34/10)
- Decree on the health and safety at work for temporary or mobile construction sites (Official Gazette of RS, Nos. 83/05)
- Regulation on the protection of workers from the risks related to exposure to electromagnetic fields (Official Gazette of RS, no. 49/16)
- Rules on continuing professional development and training in the field of health and safety at work (Official Gazette of RS, no. 109/11)
- Rules on the protection of workers from the risks related to exposure to chemical substances at work (Official Gazette of RS, no. 100/01, 39/05, 53/07, 102/10, 38/15)
- Rules on the organization, materials and equipment for first aid in the workplace (Official Gazette of RS, no. 136/06, 61/10 - ZRud-1)
- Rules on the protection of workers from the risks related to exposure to noise at work (Official Gazette of RS, Nos. 17/06, 18/06 - corr.)
- Rules on the protection of workers from the risks related to exposure to vibration at work (Official Gazette of RS, Nos. 94/05)
- Rules on the protection of workers from the risks related to exposure to carcinogens or mutagens (Official Gazette of RS, no. 101/05, 38/15)
- Rules on health and safety at MHL (Official Gazette of RS, Nos. 73/05)
- Rules on personal protective equipment (Official Gazette of RS, Nos. 29/05, 23/06, 17/11 - ZTZPUS-1 and 76/11)
- Rules on health and safety in the use of work equipment (Official Gazette of RS, Nos. 101/04)
- Rules on the protection of health at work for pregnant workers and workers who have recently given birth and are breastfeeding (Official Gazette of RS, no. 62/15)
- Rules on the protection of health at work for children, adolescents and young people (Official Gazette of RS, no. 62/15)
- Rules on the preventive medical examinations of workers (Official Gazette of RS, Nos. 87/02, 29/03 - corr., 124/06)
- Rules on the protection of workers from the risks related to exposure to biological agents at work (Official Gazette of RS, Nos. 4/02, 39/05)
- Rules on health and safety at work for a display screen (Official Gazette of RS, Nos. 30/00, 73/05)
- Rules on personal protective equipment used by workers in an work (Official Gazette of RS, Nos. 89/99, 39/05)
- Rules on requirements for ensuring the health and safety of workers in the workplace (Official Gazette of RS, Nos. 89/99, 39/05)
- Privacy protection at work against the dangers of electricity (Official Gazette of RS, Nos. 29/92, 56/99 -OSH)



1.2 Protection against fire (VPP)

- Law on Fire Protection (Official Gazette, Nos. 2/76, 21/78 - A-ZSlar, 15/84, Official Gazette of RS, no. 71/93 - Gas, 71/93 - ZVPoz and 83/12 - ZVPoz-D)
 - Rules on fire safety in buildings (Official Gazette of RS, Nos. 31/04 , 10/05 , 83/05 , 14/07 and 12/13)
 - Rules on minimum technical and other conditions for the maintenance of manual and extinguishers (Official Gazette of RS, Nos. 108/04 , 116/07 , 102/09 and 55/15)
 - Rules on the selection and installation of fire extinguishers (Official Gazette of RS, no. 67/05)
 - Rules on the examination and testing of embedded systems, active fire protection (Official Gazette of RS, Nos. 45/07 and 102/09)
 - Rules on fire order (Official Gazette of RS, Nos. 52/07, 34/11 and 101/11)
 - Rules on fire protection (Official Gazette of RS, Nos. 107/07 and 92/10)



2. HEALTH AND SAFETY AT WORK (extract from the Occupational Health and Safety Act and by-laws)

The employer is obliged to ensure the health and safety of workers in relation to work (the worker is a person who performs work on the basis of a contract of employment with the employer).

As a worker within the meaning of this Act, a worker is also considered a person who performs work for the employer on any other legal basis or a person who performs work for training with the employer. To this end, the employer must implement the measures necessary to ensure the health and safety of workers, including the prevention of workplace hazards, information and training of workers, with the appropriate organization and the necessary material resources.

The employer is obliged to implement such preventive measures and to choose such working and production methods that will ensure a higher level of occupational health and safety, and will be included in all the activities of the employer and at all organizational levels.

The obligations of workers in the field of health and safety at work do not affect the principle of the responsibility of the employer.

The employer implements the measures, taking into account the following basic principles:

- Avoiding hazards;
- Risk assessment;
- Risk management at source;
- Adapting the work to an individual by appropriately designing the workplace and working environment, working spaces, working and technological procedures, the selection of work and personal protective equipment, and working and production methods, in particular by removing monotonous work and conditions with the forced rhythm of work and other health hazards (humanization of work);
- Adapting to technical progress;
- Replacing hazardous with non-hazardous or less hazardous materials;
- Developing a comprehensive security policy that includes technology, organization of work, working conditions, human relations and working-environment factors;
- Giving priority to collective security measures against individual ones;
- Giving appropriate instructions and notices to workers.

All the duties of an employer under the law and regulations issued on its basis are at the same time the rights of the worker in terms of ensuring his/her health and safety at work.

The worker has the right to work in a work environment that guarantees health and safety at work. The worker must respect and implement measures to ensure this health and safety at work.

The worker must carry out work with such care, to protect his/her life and health and the life and health of others.



The worker must use the means of work, safety devices and personal protective equipment in accordance with their purpose and instructions from the employer, to handle them carefully and to ensure that they are in perfect condition.

A worker has the right to refuse work if he/she cannot perform it safely.

The work process must be adapted to the physical and mental abilities of the worker, and the work environment and the means of work must, in view of the nature of the work, provide the worker with safety and must not endanger his/her health.

Measures carried out by the employer and relating to health and safety at work must not cause any financial obligations to workers.

The employer's liability for occupational injuries and occupational diseases depends on the level of health and safety at work.

Education in relation to occupational health and safety is an integral part of education programs at universities and schools of all types and levels. Training for safe and healthy work is an integral part of the introduction into work.

Obligations of the employer under the Health and Safety at Work Act:

- Entrust the performance of tasks of safety at work to a professional worker, and the implementation of health measures to the occupational medical practitioner;
- Inform workers about the introduction of new technologies and means of work, and the risks of accidents, occupational diseases and work-related illnesses, and issue instructions for safe work;
- Training workers for safe and healthy work;
- Provide workers with personal protective equipment and its use, provided that, despite safety measures, the means of work and the working environment do not guarantee health and safety at work;
- Through periodic investigations of the harmfulness of the working environment, verify the appropriate working conditions;
- Through periodic inspections and tests of work equipment, verify their compliance with the health and safety rules at work;
- Provide a safe working environment and the use of safe work equipment.

Method for risk assessment:

Regardless of the selected risk-assessment method, it must include the following:

- A list of workers, their characteristics and tasks;
- The type and degree of potential hazards;
- A check list of hazards and harmfulness;
- An identification of hazards and their level of harmfulness;
- A series of measures to eliminate or reduce hazards and harmfulness;
- The measures in terms of content, deadlines and tasks for their implementation;
- Control of the feasibility and effectiveness of the implemented measures,



- A plan of further activities to increase the level of health and safety at work.

The risk assessment is a fundamental part of the safety statement.

The employer must declare the safety statement with the risk assessment in the normal way and, in the work that relates to them, to be sent to workers every time it is amended and supplemented, as well as to the newly employed and all others present at the workplace at the beginning of the work period. At the request of the worker, the employer must provide the worker with an insight into a valid statement of safety with a risk assessment.

The employer must take measures to provide first aid to workers and other people present and measures to cooperate with the emergency medical service.

The employer must provide health checks to workers who are exposed to risks associated with health and safety at work.

The employer must inform workers about safe and healthy work by issuing written notices and instructions. In exceptional cases, when threatened with an immediate danger to life and health, notices and instructions may also be oral.

The employer must inform workers about the types of workplace and workplace hazards, the safety measures necessary to prevent the risk and the reduction of harmful effects, the workers in charge of implementing the first-aid measures, and the workers or authorized persons under specific regulations in charge of the implementation measures of fire protection and evacuation.

The employer must ensure that pregnant workers, younger and older workers and workers with reduced work capacity are informed about the results of the risk assessment and of the employer's health and safety measures at work.

The employer must ensure that workers who have received special instructions for working in such a place have access to a place where there is a direct and unavoidable danger.

An employer may place hazardous chemical substances in use for workers only if they are equipped with a safety data sheet in which the manufacturer or supplier has provided all the safety data relevant to the risk assessment when working with these substances and provided that all precautions are taken, resulting from the safety data sheet.

The worker is obliged to immediately report any deficiencies, dangers, failures, etc. to the immediate manager of the process. Pursuant to Article 41 of the OSH-1, an immediate notification of an accident at work is required. The employer (carried out by the Department of Occupational Health and Safety at Work - SVZD) must immediately send a notification to the labour inspectorate of any accident at work that is worse or to report an accident at work, due to which a worker is incapable of work for more than 3 working days, a dangerous situation or an established occupational disease.



2.1 OBLIGATIONS OF THE EMPLOYER CONCERNING THE TRAINING OF WORKERS FOR SAFE WORK

The employer must enable the worker to work safely at the conclusion of the employment relationship, before allocating him/her to another job, before introducing new technology and new means of work, and in the event of a change in the work process, which may lead to a change in safety at work.

The training must be adapted to the specificities of the workplace and be carried out according to a program that the employer must, if necessary, update and whose contents must change according to new forms and types of danger.

The competence for safe work is checked by the employer at the workplace.

The employer shall introduce mandatory, occasional tests of theoretical and practical competence for safe work for workers working in the workplace where the risk assessment results in a greater risk of accidents and occupational diseases and for workers working in workplaces where accidents at work and occupational diseases are more frequent.

The period for occasional tests referred to in the previous paragraph shall not be longer than 2 years.

The labour inspector can penalize people who do not comply with safety regulations.

The worker has the right and duty to be acquainted with the security measures and healthcare measures and be trained in their implementation.

The worker has the right to medical examinations that correspond to the risks to the safety and health at work that workers encounter at work.

The worker must respond to and carry out a medical examination appropriate to the risks to occupational health and safety.

The worker has the right to submit proposals, remarks and notices on health and safety issues to workers in charge of health and safety at work under this Act.

Determining measures to prevent or reduce risk:

- Jobs that are unnecessarily exposed to harmful substances should be separated spatially from those where harmful substances are used
- First, by avoiding hazards and harm by choosing such a production and working process that there is no danger or harm at all or it is negligible
- Measures to prevent and minimize hazards and harm at the source of the danger or harm, e.g., by replacing harmful chemicals with less-harmful chemicals
- Limiting the area of the impact of danger or harm, e.g., with a safety net around the pulleys, a casing for spreading noise to the surroundings.
- Isolating a worker from an influential area of danger or harm, e.g., with process automation and remote control.



- In the latter case, as a last or only temporary measure: with personal protective equipment.
- Immediate suspension of work, immediate stop or immediate action; immediately identify those responsible for the action and implementation
- Smoking is prohibited in schools, hospitals and other institutions.

In workplaces where there is a greater risk of third-party violence, the employer must arrange for such a workplace arrangement and equipment that reduces the risk of violence and which allows access to help in the workplace at risk.

The employer must take measures to prevent, eliminate and manage cases of violence, maltreatment, harassment and other forms of psychosocial risk in workplaces that may endanger the health of workers.

The worker must in particular:

- According to the employer's instructions, properly use work equipment and other means of work, including safety devices;
- According to the instructions of the employer, use personal protective equipment in accordance with its purpose;
- Immediately inform the employer or workers responsible for health and safety at work in the statement of safety with a risk assessment of any deficiencies, damages, defects or other occurrences that could potentially endanger his/her health and safety, or the health and safety of others;
- Cooperate with an employer and workers who are in charge of health and safety at work in the safety-assessment report, until a safe working environment and working conditions are established, and they carry out labour inspection measures.

A worker must not work or be in the workplace under the influence of alcohol, drugs or other prohibited substances.

A worker must not work or be under the influence of medicinal products that can affect psycho-physical abilities in those workplaces that, as a result of the increased risk of accidents at work, are determined by a safety statement with a risk assessment.

The employer shall determine the situation referred to in the first paragraph of this Article in accordance with the procedure and in a manner determined by the employer's internal act.

The employer must remove from work, the workplace and from the working process of the worker who worked or was at work in violation of the provisions of the first and second paragraphs of this article. Workers are obliged to immediately report any deficiencies, dangers, failures, etc. to the direct process manager.

A worker has the right to refuse to work if he/she has not been previously informed of all the hazards or adverse effects at work and the safety measures taken, and is qualified for safe and healthy work or if the employer has not provided the prescribed medical examination.

A worker has the right to refuse to work if he is in direct danger to life or health because the prescribed precautionary measures have not been taken and to require that the danger be eliminated.



If the employer does not eliminate the danger, the worker can request the intervention of the labour inspectorate and inform the worker's council or worker's trustee for health and safety at work.

For the collection, processing and transmission of personal data contained in the records referred to in Article 41 of this Act, the provisions of the Act governing the protection of personal data shall apply.

In the event of a serious and immediate danger to life or health, the worker has the right to take appropriate action, in accordance with his/her knowledge and the technical means at his/her disposal and in the case of unavoidable danger leave a dangerous workplace, working process or working environment.

A worker is not liable for any damage resulting from his/her work, unless he/she caused it intentionally or through gross negligence.

The records that the employer must have under the occupational health and safety act should be kept by the employer:

- Records of education,
- Records of injuries at work,
- Records of medical examinations,
- Records of the inspection of work equipment, mechanization and installation,
- Records of microclimate and other working conditions, etc.

2.2 HAND MOVEMENTS WITH LOADS

Hand movement means any physical work, which include lifting, transporting, dropping, pushing, pulling, carrying or moving loads as a human force and other similar operations (e.g., a support, holding), because of their nature or due to adverse ergonomic conditions, involves no security, particularly with respect to back injury to workers.

The employer must, where possible, have hand-movements burden replaced by a suitable work equipment, devices and suitable mechanical help.

Where it is not possible to avoid such manual movements with a burden, the employer shall take appropriate organizational and technical measures, to use the proper equipment and the proper way of working in order to reduce the absence of security associated with hand movements with loads.

Where it is not possible to avoid manual movements with a burden, the employer shall organize the work so that the handling is as safe and healthy as possible:

- If possible, the pre-assessment of safety and health conditions in this work and in particular an examination of the characteristics of loads,
- Ensure that the adoption of appropriate measures to avoid the risk particularly of back injury to workers or to reduce the risk, taking into account the characteristics of the work environment and the worker's tasks.

When the employer gives the worker tasks associated with hand movements with burdens the employer must take into account his/her health capability, in particular:

- That the worker has physical properties suitable for the task,
- That the worker is wearing suitable clothing, footwear or other personal effects,
- That the worker has appropriate knowledge and training.



The worker who performs the tasks referred to in the previous paragraph must provide health surveillance in accordance with the law governing occupational health and safety, taking into account the specific risks to which the risk groups of workers are exposed.

Workers can manually move loads on the basis of a professional assessment by an authorized physician.

In determining work orders for the manual handling of loads, the employer must take into account physical capacity, age and gender. Body capacity is assessed by an authorized physician.

In total, a worker can carry only 1000 kg of the heaviest loads within a period of 2 hours and, on the same day, may not be burdened by lifting any other loads.

The employer must educate employees about the characteristics of loads and other factors that influence safe work, especially the weight of the load and the centre of gravity of the most difficult side when the package is loaded eccentrically. They must be trained for the manual shifting of loads to avoid damage to the back.

The employer must inform workers about the risks that they might be exposed to and teach and train them to safely manually move loads.

The employer is obliged to discuss all issues regarding the health and safety at work according to the regulations, to consult with the employees and/or their representatives and to keep them informed about the adopted measures in a manner and according to the procedure laid down in the law regulating health and safety at work.

REFERENCE FACTORS

1. Characteristics of the load

Manual handling of loads can pose a risk of injury to the back if the burden:

- Is too heavy or too big,
- Is awkward or difficult to hold,
- Is unstable or has content that is likely to overturn,
- Is positioned in such a way that requires it to be held or moved at a distance from the body or with a bent or curved body,
- It is likely that due to its contours and/or firmness, it will cause injury to workers, especially in the event of a collision.

2. Needed physical effort

Physical effort can pose a risk primarily for back injury if:

- It is permanent,
- It is achieved only by the rotation of the upper body,
- It causes a sudden displacement of the load,
- It is in an unstable position of the body.

3. Characteristics of the working environment

The characteristics of the working environment might increase the risk of injury to the back if:

- There is not enough room available for the worker, especially in the vertical direction, to carry out the work,
- The floor is uneven, which means that he/she is in danger of tripping or it is slippery in relation to the worker's footwear,
- The workplace or work environment prevents the worker from manually removing loads at a safe height or position,



- There are differences in the height of the floor or the work surface, which requires the load to be moved at different heights,
- The floor or foot is unstable,
- The temperature, humidity or ventilation is inappropriate.

4. Work requirements

Work may pose a risk of injury to the back if it requires:

- Too much or too long a physical effort, especially for the spine,
- Insufficient rest or recovery period,
- Too long, lifting, lowering or moving,
- The speed of work required by the process and the worker cannot change.

Maximum permissible mass of the load (in kg) by sex and age of the worker

Age	Male	Female
15 to 19 years old	35	13
over 19 to 45 years old	55	30
over 45 years	45	25
pregnant women		5

2.3 FIRST AID

First aid consists of initial, temporary, rapid and correct measures that are performed with respect to an injured or suddenly diseased person at the place of the accident or in its immediate vicinity. Simple equipment should be used. This saves lives at risk and prevents the deterioration of the health status until a doctor arrives.

2.3.1 The purpose of providing first aid

The purpose of providing first aid is to ensure that the injured person or the patient can receive professional medical assistance or treatment as soon as possible and in the best possible condition.

Often, only quickly and correctly provided first aid can save the life for the injured or suddenly ill, especially in the event of electrical shock, suffocation, drowning, poisoning, major wounds with severe bleeding, severe burns and the like. In the case of injuries that do not pose a threat to lives, the correct first aid prevents many consequences, reduces the possible disability and shortens the time of treatment.

When providing assistance, it is recommended to use protective equipment - gloves for single use only, if available. In the case of an injured person, we must first pay attention to the immediate danger to life, for example, (in the order of) unconsciousness, cessation of breathing and beating of the heart, severe bleeding, shock or sudden poisoning. When trying to determine the type and extent of the injury to the injured person, it is necessary to determine whether the injured person is conscious, by rubbing slightly and speaking loudly. If he/she is not conscious, check whether the injured person is breathing - you watch whether the injured person's chest rises or you feel his/her breathe through the nose while listening to the injured victim's intakes and exhaling of breath. If the injured person is breathing, then he or she should be put into a stable lateral position:

1. We must kneel at the side that is healthy or less damaged;
2. Put the closest hand in the crook of the arm, with its palm facing upwards;



3. Grab the other hand over the chest and place the palm on the face;
4. Raise the opposite leg at the knee and position it so that the foot remains on the floor;
5. While holding his/her hand against his/her face, we pull the other hand above his/her knee unconscious person towards our self and turn him/her to the side;
6. Push the head back slightly.

If the unconscious person lies on his/her back, his/her tongue can slip into the throat and block the respiratory tract or suffocate with what he/she coughs up.

If the injured person does not breathe, we must call 112 immediately, then identify the cause and start with artificial respiration. Then we have to examine whether the injured person is severely bleeding. In this case, bleeding must be stopped immediately.

If necessary, we begin with resuscitation (see section on revitalization). A victim who is conscious, we calm down, encourage and ask how the injury occurred. If he/she is unconscious, then we collect data from witnesses. Finally, we identify potential shock or poisoning.

In the recovery of an adult, we begin with an external heart massage. Only in this way can we save human life. In the case of the injured person, we must first release the airway by rubbing his/her head with one hand on the forehead, by lifting the chin on the forehead (the so-called triple grip). Then we remove obstacles in the mouth, nose or throat. This is followed by an external massage of the heart:

- Turn the victim on the back on a firm surface, if he/she is not already in this position.
- Place the palm of one hand in the middle of the chest, place the other hand over the shoulder and twist your fingers.
- Squeeze the chest 30 times; for any distress, the chest should be 4 to 5 cm tall. The speed of massage is also important - about 100 rpm.

The external massage is followed by artificial respiration. Inflammation of the lungs of the patient:

- Release the breathing path, push the head back slightly and seal the nostrils.
- Blow twice, so much air that the injured chest is noticeably raised. In this regard we observe the lesions of the injured person.
- Then we continue with 30 thoracic distresses.

Pressure of the chest and thumbs in the ratio of 30:2 is carried out continuously until the victim starts to breathe normally or until rescue workers arrive.

REPLACEMENT: 30 MASSAGES - 2 INSIGHTS - ... (repeat)! - **See Annex 1 (page 21)**

2.3.2 Types of bleeding

The body of an adult man circulates 5 litres of blood. Bleeding is the flow of blood directly from the veins or heart, or from the circulatory system. The cause is damage to the vessels or heart and disease changes without damaged blood vessels. If large veins are affected by the disease or injuries, severe bleeding occurs, which directly threaten human life due to bleeding. We separate capillary, venous and arterial bleeding.

Capillary bleeding: blood drops from the damaged surface of the skin or mucous membranes. This bleeding is not life-threatening and is present for every wound. It is enough to sterilise it.

Venous bleeding: blood flows from the cut vein and is darker. We use a compression bandage early. This blood has less oxygen than venous bleeding; therefore, it is dark red in colour.



Arterial haemorrhage: Blood in the syringe and in the arc blood - this bleeding can be life-threatening. Because the blood has a lot of oxygen, it is bright red. Therefore, we must stop it as soon as possible with an Esmarch bandage, sterile gauze or at least with a digital press (with a finger press). It is necessary to transport the injured person to hospital immediately, where the arteries can be treated surgically.

Depending on the location of the bleeding, it can be visible (external) and invisible (internal). If the injured person loses a large amount of blood, there is a lot of pale skin, visible mucous membranes, ears, nose, lips and eye conjunctivitis, the skin is cold and often moist with sweat, the injured person soon becomes thirsty, quick and breaths shallowly, in severe cases gasping for breath, and often also yawning, has a very fast and faint pulse, and the temperature sometimes falls below normal.

Internal bleeding is much more difficult to determine. The patient must be monitored continuously – his/her health condition, how he/she responds, and his/her excrement, for example, is observed. spit, urine, etc. to see if there are some blood traces in it. Severe bleeding is accompanied by drowsiness, nausea, tiredness, fog and darkness in the eyes, noise in the ears, restlessness and fear. In very severe bleeding, the affected person will faint and death follows quickly, if there is no immediate help, and if the blood is not replaced by transfusion.

2.3.2.1 *Methods of stopping bleeding*

When giving first aid, we can successfully stop any external bleeding with temporary modes, which is extremely important in severe bleeding. Minor bleeding will stop on its own or when a bandage is applied. We can also stop bleeding in several ways. First of all, are the following:

- By pressing the bleeding vein (on the groin with the fist, and other places with the fingers),
- By pressing or with a compression bandage,
- By pressing the wound from the fingers through the gauze (in very severe bleeding),
- By supporting the limb (Esmarch's bandage).

By pressing the blood vessel, we stop the severe external bleeding from the head and limbs until it is replaced by another method. With the fingers of one arm or both, press the main blood vessel through the clothes, which supplies the blood to the wound, at the nearest bone that lies beneath it. Pressing will stop the bleeding that cannot be stopped by the first bandage. The process is as follows. First, stop the bleeding by pressing the artery and lifting the limb, then cover the bleeding wound with the first wax pad or with several layers of sterile gauze. Then, put on the pad the first bandage or on a gauze over the wound firmly compressed wadding or gauze, or even a tightly curled pocket handkerchief or scarf. If the wound is larger, a curly bandage is also appropriate. For a cylindrical object, with a few turns, we are so tightly attached to the bleeding place that the bleeding is stopped. We should never bind so strongly that we could stop the blood's circulation. After placing this commitment, we must always control the skin colour and the pulse of the heart in the limbs. Then we immobilize the limb.

We also stop the bleeding by pressing the cushion of the first worm or the gauze with the fingers on the bleeding wound. This method is very suitable and successful for stopping bleeding from the neck, arteries, and groin on the body, where bleeding is often very severe and the victim could bleed within a few minutes. In the past, bleeding also stopped with a bandage with a belt, tape, or something similar, the so-called Esmarch



bandage, which is harmful and dangerous. We use it only in the case of lumps or crumpling, and when using it, we must necessarily mark the day and hour of installation. The maximum is up to 2 hours!

Exceptionally, we can only tie a torn or cut limb over the wound, but even in this case, it is usually sufficient to use compression. A victim who has lost a lot of blood is placed on a bed or a stretcher, lifting the base. In any case, he/she must be transferred to the hospital as soon as possible. The injured person should not eat or drink! We also know the auto-transfusion position for very severe bleeding in which the head of the injured person is lowered and the two arms are vertically and tightly connected to the body. In this way we achieve a better circulation of the vital functions.

2.3.2.2 *First aid and wounds*

First, we find the wounded part of the body. We must not undress around the wound, it should be ripped off the body. We must not touch any wounds with any other wounds, so that they do not get infected. If the wound is bleeding seriously, we must first stop the bleeding, taking into account the first-aid guidelines for bleeding. During first aid, the wound should not be flushed with water or any other liquid, or washed by rubbing. Exceptions are bites, dirty wound swabs or bruised abrasions, because they can be infected and a sepsis occurs (bacteria overflow in the bloodstream).

Nor should we remove anything from the wounds, no pieces of clothing, sand, mud, dense blood, and so on. These should be attended to by the doctor! This must be provided early in the first 6 hours!

Before starting any kind of wound treatment, we should, whenever possible, wash our hands with soap and running water or use gloves. We need to provide, early in the morning, several layers of sterile gauze. The most appropriate is the first sterilized bandage. When we put the bandage on the wound, we cannot move anymore so that we cannot rely on the outside of the surrounding area. The first part of the bandage should cover the wound, leaving at least two centimetres. The wound dressing can be fixed with an elastic grid, with a bandage, with a triangular wrap, with self-adhesive tape, etc.

In the case of bone injuries and large wounds in the soft parts of the limbs, the damaged limb should be immobilized when attached. When we have done all the necessary for first aid, we immediately contact the injured person or take him/her to the doctor. Particularly dangerous are deep wounds on the head, on the chest and abdomen that open the body cavities. In the case of a hit, we treat with the abbreviation RIBL, which means rest, ice-cooling, bandage and lift limbs. When the limbs are compressed and scars of pain are dampened with cold compresses and the limbs carefully immobilized.

2.3.3 **Burns**

Burn wounds are caused by the action of thermal, chemical and electrical energy on the tissues. Burning wounds cause heat energy in the form of dry heat (flame, flammable metal, hot air, sun) or friction. Burn injuries occur when the skin is touched with hot liquids (steam, boiling water, oil, etc.). Due to prolonged contact with the skin, hot-fat liquids containing fat are more severe than with boiling water.

Electrical burns occur when the electric current passes through individual tissues and organs. In addition to burn wounds, there is further damage to deeper and more distant tissues. Chemical burns are caused by solids: acids



and alkalis. Changes to the skin are very similar to normal burns, although the mechanism of action is different from thermal burn wounds.

According to the out break, the burns are very different, but for us these are all open wounds. In first aid we pay attention primarily to their dimension and not so much to the depth. Burns are seriously painful, they can be quickly infected, and through the burned surface the injured person loses a lot of body fluid (blood plasma). That is why it is often a special condition that is called shock.

2.3.3.1 *First aid in burns*

Evaluation of the risk of burns and scalds, or what affects the consequences and first aid:

- Burn area,
- Depth of burns,
- The age of the injured person,
- General health of the injured person (accompanying diseases and injuries),
- The burnt body part.

Providing first aid

1. Examine the scene of the accident
2. Fire flames

First aid also includes helping the injured. If the injured person is burned with hair or clothes, we first extinguish the fire. The injured person should be wrapped on the floor, covered with a blanket, a carpet or a coat to put out the fire. If someone is scalded with a boiling liquid, the clothing should be removed as soon as possible.

3. Carry the injured person to a safe place and pour with cold water to ease the pain.

As a first recommendation for first aid in burns, immediate cooling with cold running water. Cool as long as it hurts (up to 30 minutes, in children for a maximum of 10 minutes), if there is no running water, irrigate or cool with wet towels. It has been shown to suppress further tissue damage and reduce the depth of the burned site.

If it is scalded with a boiling liquid and cannot be cooled by cold water, the affected limb must be immediately removed. It is same with chemical burns involving acids and alkalis! We should not in any way cool the burns with ointments or ice, but we must go to the doctor as soon as possible.

4. Complete the initial examination of the injured person.

We should talk to the injured person. The respiratory tract must be excluded. After which we review other possible injuries.

5. Attend to accidents under the rules of first aid
6. Attend to the burns and immobilize the damaged parts

Burns are treated like an open wound, the remnants of burnt clothing are not removed, and we do not put clothes on burnt skin because they could infect the burns and only increase the pain. Exceptions are burns with acids and alkalis. All the burned part of the body are covered with a sterile bandage for burns. If we do not have this, we cover the burned surface with several layers of sterile gauze or a clean, just-twisted fabric, and we undertake a little commitment. Burned limbs are immobilized and the rest will be carried out in a hospital.

We do not bandage a burnt face! We bandage only if eye also injured. If the injured person is burned in several places, we first bind his eyes, then the fingers and hands (each finger separately), then the joints, because these are the most sensitive parts of the body, and only then the rest of the body. We must not puncture the burn blister.

7. Provide for immediate transport to plastic surgery in the burns unit.



2.3.4 FIRST AID FOR CERTAIN SUDDEN ILLNESSES

2.3.4.1 *Foreigner in the breathing path*

Usually this happens with children, but adults are not excluded from it. The patient begins to cough heavily and suffocate. First try with a strong cough. If the object is not removed, you hit the victim on the shoulders, between the shoulder blades (5x). If the object is not completely removed, we continue with Heimlich's approach - we step up to the victim and hold from behind, so we have arms on the upper part of the abdomen, with one hand pressed into the fist and placed between the bud and the lower part of the sternum, the other we take the fist first hand - finally we lift up and then down.

In infants, this is done a little differently. If the foreign object cannot be removed with the fingers, place the baby on the forearm with a head down. With the fingers open the baby's mouth and hit him/her 5x with the lower part of his palm on the shoulders between the shoulderblades.

2.3.4.2 *Heart attack*

A burning, squeezing pain occurs in the heart area. This can spread to the neck, arms, shoulders, and upper abdomen. Do not give up after rest. It is accompanied by weakness, difficulty breathing and sweating, and the patient can even lose consciousness. In this case, we need to call urgent medical assistance immediately, and the patient must rest in a comfortable position. Under the tongue we place an Aspirin and we constantly monitor it.

2.3.4.3 *Stroke*

A brain stroke is a condition when the blood vessel clogs or bleeds from the brain. This is characterized by rapid unconsciousness; the patient is sore, sometimes pale and has eyes looking up and down. The person is often numb on one side. Carefully place such a patient on a horizontal bed, loosen the clothes (belt or collar), remove any dental prosthesis, place the person in a stable lateral position and immediately call for urgent medical attention.

2.3.4.4 *Epileptic seizure*

For epileptic seizures it is characteristic that the patient eyes look upward, stinging with his teeth and his fingers appear on his mouth. The person often drops on the floor. With such a patient, care must be taken not to damage, especially the head area. The person always needs to loosen his/her belt and collar and make sure that he/she does not bite the tongue or that he/she does not suffocate with his own tongue or the foam that he/she avoids. After the attack, it is necessary to check that the patient has not been injured.

2.3.4.5 *Chest pain*

This condition is characterized by a burning stomach pain, which can radiate into the left shoulder, neck or even the lower jaw. It is necessary for such a patient to loosen the clothes first, get on the floor, lie quietly or sit (depending on what is easier). If the patient has been prescribed pills, they should be placed under the tongue. In the event of a loss of vital signs, we begin to revive the person immediately and call for urgent medical help.



2.3.4.6 *Fever*

The patient must rest and drink a lot. If the medicine does not reduce the temperature, the patient is also cooled.

2.3.4.7 *Heat stroke*

A heat stroke is a dangerous condition caused by an excessive accumulation of heat in the body. In the event of this, thermo-regulation occurs. Most often, this happens on some trips or on military campaigns. The patient becomes red in the face, breathes quickly and shallowly, his/her pulse is quick and tangible, his/her tongue is dry, he has ringing in his ears, his vision is blurred, and he has an increased temperature. This often leads to a disturbance of consciousness or even unconsciousness. Such a patient needs to be cooled as quickly as possible. When conscious, the patient may also drink cold drinks.

2.3.4.8 *Sunstroke*

Sunstroke is a dangerous brain state that results from the action of the sun's rays on the bare head and the neck, which causes inflammation of the brain envelopes and swelling of the brain. The sun can be recognized only after a few hours - after headache, rigid neck, dizziness, facial features, disturbances of consciousness and seizures occur. Transfer the patient to the shade and cool the neck and face. If conscious the victim should have cold drinks.

2.3.4.9 *Abdominal diseases*

The first symptoms of abdominal disorders are pain, vomiting, irritation, bowel disorders (constipation, diarrhoea) and general discomfort. The patient should then lie with a raised head. His/her legs are rubbed and the knees bent. In doing so, he/she should not consume any food, fluid, or even give him medication. It should be taken as soon as possible by a doctor or call for urgent medical attention.

2.3.4.10 *Poisoning*

Poisoning is a disease caused by the introduction of a poison or substance that causes damage to the body. We must distinguish between:

- ACUTE OR CHRONIC POISONING,
- INTENTIONALLY OR UNINTENTIONALLY POISONS,
- LOCAL OR SYSTEMIC POISONING.

Poisons or substances can be introduced through the skin, through the gastrointestinal tract or through the respiratory tract. A diagnosis of poisoning is very difficult. It is important what the patient tells us or determines from the event itself. Above all, on sudden poisoning, there are cramps, vomiting, diarrhoea, disturbances of consciousness, paralysis, changes in the skin that are visible, relaxation of the blood circulation, shallow breathing, and others.

First aid must be taken care of for its own safety. If it is safe, we must get out of the danger zone. Then it is necessary to monitor and maintain the vital functions and to remove the poison, as far as possible. This can be done by dilution, by cleaning the skin, by provoking vomiting. Urgent medical assistance must be called up as soon as possible. If possible, a sample of the poison should be kept.



Gas poisoning

The most common is carbon monoxide poisoning (CO); however, there are other poisonous gases. CO poisoning is dangerous mainly because the gas is *uncoloured*, odourless and tasteless, resulting from incomplete combustion, because it binds to the red blood cells more strongly than oxygen, and therefore a small amount of poisoning is required. Signs of CO poisoning are headache, weakness, drowsiness, vomiting and even unconsciousness. The poisoning results in a pink red skin colour. *The poison* must be removed as soon as possible from the poisoned area and the victim given oxygen, if possible.

Alcohol poisoning

The most frequent type is poisoning with ethanol. Signs of poisoning are disorders of balance, vision, nausea and vomiting. In the case of alcohol poisoning, we must control the vital functions. If unconscious, put the victim on his/her side, if there is no breathing, it must be revived. We also check to see if there are any other injuries. Immediately call a doctor.

Food poisoning

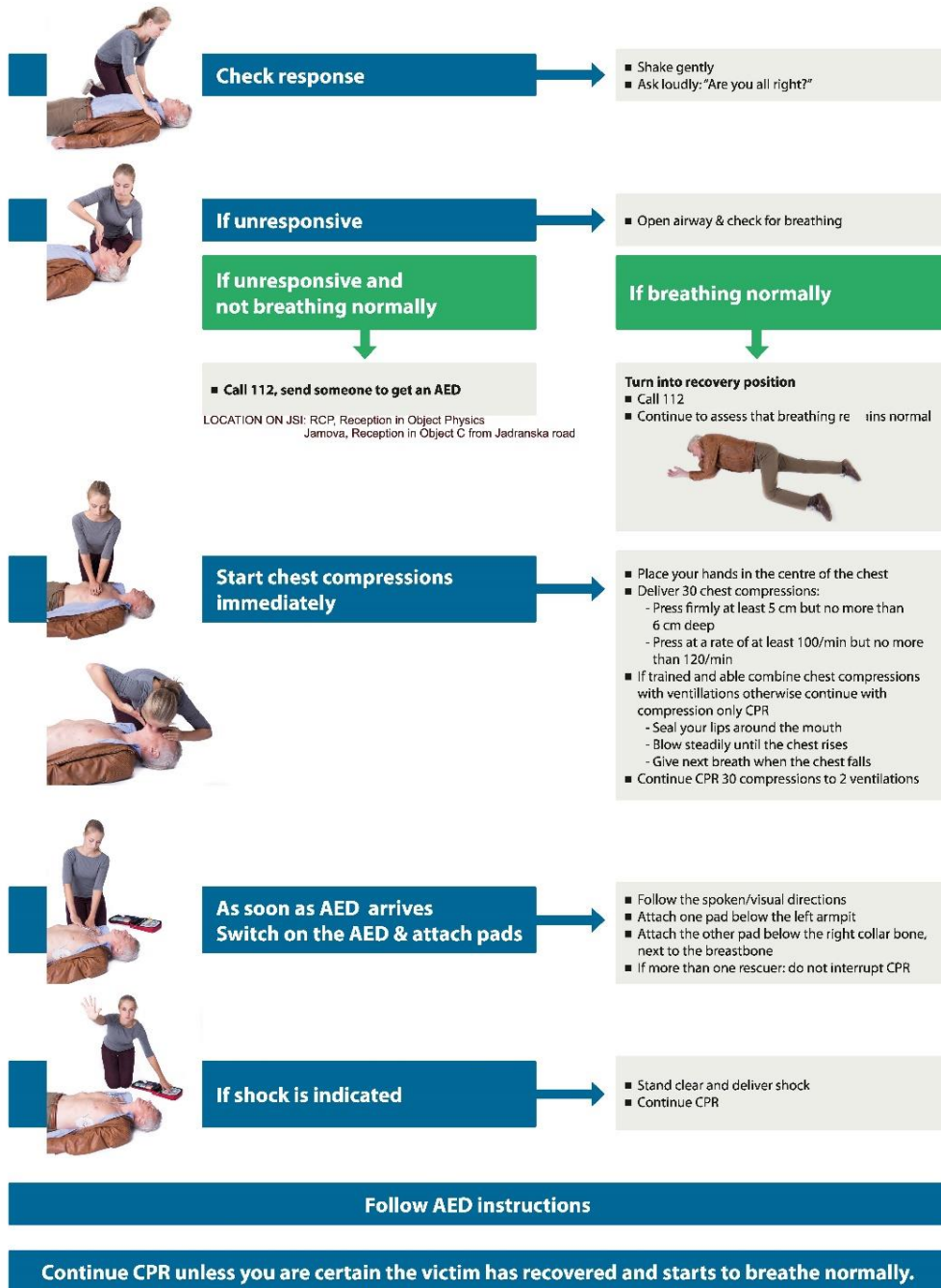
Poisoning occurs after the ingestion of diseased or toxic foods, which are caused by pests or bacteria. Signs include nausea, vomiting, diarrhoea, and fever. It is necessary to prevent dehydration and induce vomiting (if only 6 hours have passed since the poisoning). We provoke the vomiting by putting our fingers down our throat. Similarly, mushroom poisoning can occur through consuming too much (mainly diarrhoea and abdominal cramps) or through poisonous mushrooms.



3. Annex 1: BASIC LIFE SUPPORT WITH THE USE OF AN AUTOMATIC EXTERNAL DEFIBRILLATOR (AED)



Basic Life Support with the use of an Automated External Defibrillator (AED)





4. FIRE PROTECTION (abstract from the Fire Protection Act and by-laws)

The employer must, in accordance with special regulations, take measures to ensure protection against fire and evacuation and, where necessary, measures to cooperate with external fire-protection services.

4.1 What is contained in a fire-risk assessment

- organization of fire protection, in particular the duties and responsibilities of employees, visitors, guests or residents in the investigation of the occurrence of a fire,
- fire protection measures required by working or living conditions, and the manner and control of the implementation of these measures,
- instructions for handling in case of fire, in particular tasks, responsibilities and procedures for the action of employees, visitors or guests or residents during the occurrence of a fire, as well as the tasks and responsibilities of employees, residents in a fire,
- types and methods of employee training, etc.

It is the duty of workers to learn about fire extinguishers in their working environment. This means getting acquainted with the instructions on these resources, the location of the resources, the abstract from fire order, **See Annex 2 (page 29)**, the fire and evacuation plan, the transmission of information, etc.

4.2 Organizational measures

Preventive measures for fire protection include organizational measures. These measures are extremely important and their implementation depends on organization in the field of fire protection in the company. The company's fire-protection organization must be recorded in the company's firewall. The fire order is an internal act of the company and it meets the requirements set out in the Rules on fire order (Official Gazette of RS, Nos. 52/07, 34/11 and 101/11).

In the fire order to be made by owners or users of residential buildings, with the exception of one and two-floor buildings, and owners or users of commercial and industrial buildings, the following must be recorded:

- organization of fire protection, in particular the tasks and responsibilities of employees in preventing the occurrence of fire;
- fire-protection measures required by working conditions such as a smoking ban, use of open fires or spark tools, where prohibited;
- removing all combustible materials that are not necessary for the smooth running of work from fire-endangered spaces;
- data on the predicted number of users according to the purpose of the building or premises;
- measures due to the danger of explosion, combustible waste, electrical, gas and other sources of ignition;
- Measures for safe evacuation and rapid intervention;
- other preventive and active fire-protection measures, the manner and control of the implementation of these measures;
- instructions for handling in the event of fire, in particular tasks and procedures for the action of employees, visitors or guests during the occurrence of a fire, information on the services to



be informed of the fire and the duties and responsibilities of employees or occupants after a fire;

- types and methods of employee training.

High-quality and work-oriented training in fire protection is, therefore, an important part of the fire order.

On the basis of the provisions of the Fire Protection Act, the owner or user of business and industrial facilities is responsible for fire protection. The owner or user may authorize a suitably qualified natural or legal person who is responsible for the implementation of fire-safety measures and fulfils the conditions for carrying out fire-protection tasks. A person who is not employed by the owner or user may also be authorized as a responsible person.

In the organization of fire protection in connection with the implementation of the evacuation, **the person responsible for extinguishing** initial fires and carrying out the evacuation is of particular importance. This is the responsible person, selected person or employed worker, who at the company, department level, takes care of extinguishing initial fires and carrying out evacuation. **The tasks of these persons should be:**

- understand and know the origin and development of expected fires in the part of the building for which the person is responsible,
- advise employees how to work safely and thus prevent the occurrence of fires,
- know the operation and method of using the devices for initial fire extinguishers (fire extinguishers, internal hydrants, fire blankets, etc.),
- know the evacuation routes, take care of the transitability of these and inform and warn the responsible person, authorized person and employees,
- direct employees to the evacuation exercise and actual evacuation on evacuation routes,
- keep a record of persons who stayed in the facility during the evacuation, other tasks depending on the type and designation of the building.

General requirements and organizational measures, including some general preventive measures:

- It is necessary to maintain order and cleanliness in buildings.
- Smoking should be prohibited in production facilities and warehouses.
- Evacuation exits must always be free and open.
- All employees must be trained to extinguish initial fires.
- Only the materials needed for the day-to-day production should be located in the production premises, other materials should be located in a specially arranged warehouse.
- If reconstructions and maintenance works are carried out in buildings, for example, welding, brazing or cutting of metals, they must only be carried out in the presence of a fire guard, who must take the necessary preventative measures.
- Access routes for fire extinguishing with vehicles must always be free.
- Access to cable cabinets, hydrant connections, and fire extinguishers must always be free.



General technical and organizational measures include measures such as:

- implementation of siren activation in several places by facility/factory;
- aligning the actual intrusion alert plan within the company with the fire order, its extracts, and employee instructions;
- elaboration of an alert plan for objects for different time periods (fire in an industrial building - morning work, afternoon hours, night time and free days);
- adequate teaching and presentation to the persons involved and the inclusion of an alert plan in the program of training employees for fire protection;
- settlement notification within the fire order;
- conservation and continuous updating and training of fire-brigade personnel (professional and voluntary firefighters);
- to check the tasks and responsibilities of the persons responsible for fire safety and to take appropriate measures for more active operation;
- regular compliance with the control and record sheets and the communication of responsible people in the departments with detected deficiencies;
- examination of the distribution of fire extinguishers by facilities, analysis of functionality and needs, and the execution of possible relocations, completion or removal (firefighter in the immediate vicinity of a potentially threatened object or device does not constitute an appropriate installation);
- the implementation of the transmission of signals of all fire alerts to a permanently occupied site (for example, in the doorstep of the factory, which must therefore be taken 24 hours a day by a trained person who, while performing the control of reporting and the provision of the reception service, may not have any other duties outside the concierge building);
- conducting regular fire-extinguishing exercises in cooperation with fire-fighting units envisaged as additional forces for fire intervention in the municipal fire-alarm unit in the municipal plan for the alarming of fire-fighting units; training these firefighters to extinguish the most threatened facilities (e.g., paint shops, filters, silos, flammable liquids stores, rack warehouses);
- the production of an operational tactical plan for the appearance of fire-fighting units for fire- hazardous buildings;
- defining the work and rights of outsourcers of works with a special contract, the specific addition of which is also the specific characteristics of the facility, its danger, and a list of necessary measures in the execution of works in order to avoid a fire, to verify their actual qualifications for carrying out the fire watch and only the implementation of the agreed measures;
- fire protection with fire trucks and necessary fire protection equipment, since the fire can be extremely rapid in certain areas and in some facilities;
- elaboration of threat assessment and adoption and implementation of necessary measures, in the case of performing especially dangerous work in the most endangered facilities (maintenance manager, responsible person for fire protection, fire-fighter leader);
- regular and on-the-theoretical and practical training of all employees, including seasonal workers and occasional employees, on fire safety;
- regular theoretical and practical training of responsible people in the departments on the functioning of active and passive fire protection installed in their department;
- appropriate sanctioning of violators of the provisions of the fire order.



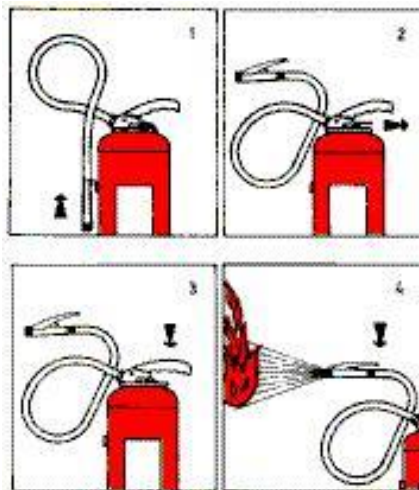
4.3 INSTRUCTIONS FOR FIRE FIGHTING

4.3.1 Hand-held fire extinguishers with powder

Most often you will encounter powder extinguishers. They can extinguish fires of the type ABC, which means that the fires of solid substances (A), flammable liquids (B) and combustible gases (C) can be extinguished. As far as possible, fires of electrical equipment are extinguished with a CO₂ extinguisher, as this reduces the damage caused by extinguishing.

Preparation of a manual fire extinguisher with powder for extinguishing:

1. Release the rubber tube.
2. We pull out the fuse.
3. We push the handle of the trigger mechanism.
4. Press on the lever handle and point the powder onto the burning surface and move the handle to the left and to the right.



The newer fire extinguishers are under constant pressure and without a hand piece, so that after removing the fuse, only squeeze the lever and they are already activated. We know them according to the manometer, which is placed by the handle.

4.3.2 Manual carbon dioxide fire extinguishers - CO₂

Manual carbon dioxide fire extinguishers are designed for extinguishing low- and high-voltage electrical devices, electrical installations, electronic devices, telephone, radio and television devices, valuables, food products, small quantities of flammable liquids and gases, as well as initial fires of solids. These fire extinguishers are not the most suitable for extinguishing fires outdoors.



Preparation of a manual fire extinguisher with carbon dioxide - CO₂ for extinguishing:

1. Release the rubber tube.
2. Pull out the fuse.
3. Turn the valve on the fire extinguisher to the left to the end, and press the appliance with the lever downwards.
4. Point the turbine straight into the bottom of the flame. If possible, use several fire extinguishers at one time.

Do not empty the fire extinguishers completely so that you will have a reserve in the event of a sudden new outbreak!

Fire extinguishers in sufficient numbers should always be in a clearly visible and easily accessible place. Every year they must be inspected by a service technician. After use, the fire extinguishers must be recharged, even if they are only partially discharged. And do not forget - a fire extinguisher worth only a few euros can save you a few millions worth of property or even a human life.

4.3.3 How to correctly put out the fire



4.4 Safe evacuation and rapid intervention

At the location JSI Jamova and Reactor Centre Podgorica (RCP new/updated warning signs "Collection point" and "Intervention route") are installed.



Collection place



Intervention route
















On the basis of the Rules on the Fire Order, the collection points specified in the evacuation plan should be marked with an emblem mark in the open air. The purpose is to collect all people from the endangered facility at the point of evacuation to this point in order to check whether everyone has come safely to the outside. At the location JSI – Jamova there is a collection point at the Main Gatekeeper - parking place (picture: Collection point 1) and is provided for employees from the building A - Main building, B - extension of the main building and C - building. The collection site in the park (picture: Collection point 2) is intended for the evacuation of employees from the remaining facilities. The intervention path (red line in the picture - situation) indicates the passage of intervention vehicles (fire and rescue). For the provision of fire safety and uninterrupted access to the fire-fighting vehicle, a 3.5-m-wide path must be free of obstacles.





5. Appendix 2: Abstract from the JSI fire order

SUMMARY OF FIRE INSTRUCTIONS		
Jožef Stefan Institute		
<u>ORGANIZATION OF FIRE PROTECTION</u>		
The Director is responsible for fire protection at the JSI. He/she is also responsible for the security measures prior to a fire, involving a security engineer. Everyone who is at the JSI must take into account the contents of the SUMMARY OF THE FIRE INSTRUCTIONS.		
PREDICTED NUMBER OF USERS IN THE FACILITY		
PREDICTED NUMBER OF USERS OF THE FLOOR		
<u>FIRE PROTECTION MEASURES</u>		
Get acquainted with the location of fire extinguishers, wall hydrants, manual fire detectors and how to use this equipment. Using the evacuation plans, familiarize yourself with the evacuation routes and your location in the facility.		
	Smoking in the facility is prohibited.	
	Use of an open flame in the building is prohibited. The use of a tool that sparks and high-temperature work without the permission is prohibited.	
	It is forbidden to dispose of materials and to provide electrical boxes and switches, fire extinguishers, wall hydrants and gas valves. Evacuation routes must always be kept free.	
	Keep all areas of the building tidy. Do not bring hazardous chemicals and other flammable and/or explosive substances / preparations into the building without the knowledge of the fire safety officer.	
<u>HANDLING IN CASE OF FIRE</u>		
	Stay calm and gather at the Collection Point. Remove the risk of fire or extinguish the fire, if this can be done without risk to yourself and others. Use fire extinguishers with powder - S or CO ₂ .	
	Shout fire in a loud voice: ' FIRE! ' Where possible, immediately activate a manual fire alarm.	
	If the fire cannot be extinguished, leave the room immediately. Warn other users in the facility and help evacuate people from the facility.	
	The disconnection of electric switches, the closing of gas pipes and other activities must only be carried out an authorized person and / or professionally qualified person with the authorization of the Director.	
	Use regular and emergency exits to retreat from the facility, following the evacuation signs. Leave the premises quickly and with care.	
	Go to the Collection point located in front of the building.	
	Consider the fire safety instructions and instructions for action. Immediately contact an authorized person for fire protection if there is immediate danger of fire.	
	<p>CALL 112.</p> <p>By arrival of intervention, please follow instructions from head of intervention.</p>	<p>Tell: WHO is calling WHERE is the fire WHAT is on fire</p> <p>AUTHORIZED PERSON: mag. Bojan Huzjan Phone: 01 / 588 52 27 Mob: 041 / 596 045</p>



Source:

- Legislation RS
- Summary: <http://www.shrani.si/f/37/co/2rmS3qNd/310.pdf>
- Default: <https://cprguidelines.eu/>

References and other useful (educational) information can be found here:

<https://www.ijs.si/ijsw/Varnost%20in%20zdravje%20pri%20delu>

