



PARTNERSHIP AGREEMENT BETWEEN UNITED STATES DEPARTMENT OF LABOR,  
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA),  
LAYTON CONSTRUCTION COMPANY, LLC, INTERMOUNTAIN HEALTHCARE,  
MONTANA DEPARTMENT OF LABOR AND INDUSTRY, CONSULTATION DIVISION

## **I. IDENTIFICATION OF PARTNERS**

The Billings Area Office of the Occupational Safety and Health Administration (“OSHA”), Layton Construction Company, LLC (“LCC”), Intermountain Healthcare, and Montana Department of Labor and Industry, Consultation Division (“MT-DLI”), recognize the importance of providing a safe and healthy work environment for workers engaged in the construction industry. This OSHA Strategic Partnership Agreement (hereafter referred to as “OSP” or “the Partnership”) at the

St. Vincent Hospital Project will facilitate OSHA and its partners mutual goal to reduce work-related fatalities, injuries, and illnesses within the construction industry.

All contractors and subcontractors working at this site will be required to participate in the partnership agreement.

## **II. PURPOSE/SCOPE**

This Partnership was developed jointly by OSHA, LCC, and MT-DLI to reduce occupational related fatalities and serious injuries within the construction industry, LCC is committed to preventing injuries, serious accidents, and fatalities during the construction of the St. Vincent Hospital Project in Billings, Montana, through training, implementation of best work practices, enhanced safety and health programs, and compliance with applicable OSHA standards and regulations.

By combining efforts, skills, knowledge and resources, OSHA, LCC, and MT-DLI expect to reduce exposure to hazards and thereby decrease the possibility of serious injuries and fatalities at the construction site. It also encourages more participation in the safety process from the construction community.

Site Address: 1201 N Broadway, Billings, Montana, 59101, USA

Duration: This agreement is scheduled to begin, November 2025, and end at the conclusion of St. Vincent Hospital Project, but no later than spring of 2029.

Scope: The St. Vincent Hospital Project consists of a 14-floor, 737,000 square foot facility that will expand the community’s access to advanced care. This replacement hospital will include 243 beds housed in universal rooms designed to convert up to ICU-level care. This will be limited to site preparation, construction, demolition, and parking garage construction.

## **III. GOALS/STRATEGIES/MEASURES**

The overall goal of this partnership is to make safety and health a core value in the workplace. The partnership will create a working relationship that focuses on preventing work-related fatalities, reducing serious workplace hazards, and establishing a foundation for the development of an effective safety and health program. This partnership will strive to achieve these goals by establishing a foundation of proactive measures that will include:

GOALS	STRATEGIES	MEASURES
1) All subcontractors who receive a contract for this project will have gone through a pre-qualification process. A trade partner is either approved OR subject to a corrective action plan (CAP).	<p>a. The following safety documents must be provided prior to review:</p> <ul style="list-style-type: none"> <li>• EMR Rate for the last 3 years.</li> <li>• OSHA 300A for the last 3 years.</li> <li>• Citation information for the last 3 years.</li> </ul> <p>b. Once all required documentation is received, the file is sent to the safety department for review. The following information is used to determine if a trade partner is approved or denied on the safety review.</p> <p>c. Denial thresholds are:</p> <ul style="list-style-type: none"> <li>- EMR Rate over 1.20 ^</li> <li>- Incident Rate (TRIR) over 5.0^</li> <li>- Thresholds are subject to change on a yearly evaluation depending on company-wide incident rates and safety strategies.</li> <li>- Any fatality in current or previous 3 years</li> <li>- No Serious, Willful, or Repeated Citations within the last year.</li> </ul>	<p>a. LCC will track all approved contractors and achieve all safety documentation digitally. LCC will track all subcontractors who will be under a corrective action plan with a spreadsheet.</p> <p>LCC will track corrective action plan compliance with an electronic checklist style form, to be completed weekly.</p>
2) Promote a cooperative relationship between labor and management and encourage employee participation to achieve a safe and healthful workplace.	<p>a. Keep an open-door safety policy and encourage hazard reporting.</p> <p>b. Conduct recognition programs for individual workers and subcontractors.</p>	<p>a. LCC will document all safety issues reported and follow up using the electronic management system "Construct PM."</p> <p>b. LCC will print safety award certificates and document photos.</p>

GOALS	STRATEGIES	MEASURES
3) Maintain a project-wide injury and illness rate that is 10% below the 2024 BLS Total Recordable Case (TCIR) rate 2.4 and Days Away from Work, Restricted or Transfer (DART) rate of 1.5 for the construction industry (NAICS 23).	<p>Establish proactive measures for the common hazards found at construction sites.</p> <ul style="list-style-type: none"> <li>a. Implement a comprehensive site-specific safety program.</li> <li>b. Provide a comprehensive Site-Specific Safety Orientation for all workers prior to allowing them to work on site.</li> <li>c. Employers will provide all necessary engineering controls, administrative controls, and personal protective equipment.</li> <li>d. Implement a site-wide project hazard and risk analysis to ensure all anticipated hazards that can be eliminated or controlled via engineering are addressed, create administrative controls &amp; procedures to cover those hazards that cannot be controlled or eliminated via engineering, and complete a personal protective equipment assessment.</li> <li>e. One hundred percent of employees on site will participate in a daily "stretch and strengthen program."</li> </ul>	<ul style="list-style-type: none"> <li>a. LCC will collect, calculate and submit to OSHA the following injury and illness data on an annual basis in comparison to the national average: <ul style="list-style-type: none"> <li>- 10% below the Total Recordable Case rate (2.4)</li> <li>- 10% below the Days Away, Restricted or Transfer rate (1.5)</li> </ul> </li> <li>b. LCC will compare the site's TCIR and DART with the 2024 BLS data published TCIR rate of 2.4 and a DART rate of 1.5 for (Construction) NAICS Code 23.</li> <li>c. LCC will track participation in all training and daily activities with electronic forms process.</li> <li>d. Participation in daily "stretch and strengthen program" led by the LCC project team, subcontractor partners suggestion forms, and complaints and their resolution. 100% participation will be completed by subcontractors and the LCC project team.</li> <li>e. LCC will collect, review, and maintain site-specific safety plans from contractors.</li> </ul>

GOALS	STRATEGIES	MEASURES
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	<p>f. Ensure worker participation (all trades represented) in the onsite safety and health program.</p> <p>g. A Safety Council will be created by the safety representatives of each subcontractor. Monthly project Safety Council meetings will be held to discuss training and site. observations, and discussions on project safety items.</p> <p>LCC will track participation, meeting minutes, observations, and resolutions.</p>	<p>f. LCC will track participation in on-site training, stand-downs, etc.</p>
<p>4) Increase the number of workers who are trained with an effective safety and health trainings, such as the OSHA 10- hour course. Course will be offered both in English and Spanish.</p>	<p>a. Offer 10-hour OSHA trainings at least twice a year or as resources allow. Courses will be free of charged with reasonable accommodations.</p>	<p>a. LCC will track all participants who enroll and complete the course. Keep copy of cards and agenda.</p>

GOALS	STRATEGIES	MEASURES
5) Identify and prevent the most common causes of workplace injuries and illnesses in the construction industry, included but not limited to falls, electrical safety, struck-by, caught in/between, trenching/excavations, cranes, crystalline silica, carbon monoxide, heat stress, and noise.	<p>a. Provide weekly toolbox safety meetings.</p> <p>b. Implement a six-foot fall protection rule and prohibit the use of shock absorbing lanyards.</p> <p>c. Conduct daily observations and record both compliant and non-compliant observations. All cutting of bricks, concrete block and, where feasible, all other cutting of concrete will be done per Table 1 outlined in 1926.1153(c) (1). Participate in emphasis programs like Safety Week, Fall Protection Stand- down, Heat Illness Prevention Campaign, etc. to address the common causes of workplace injuries.</p>	<p>b. LCC site safety personnel will conduct daily, weekly, and monthly observations to ensure that the most common hazards are addressed.</p> <p>c. When available and at OSHA's discretion, OSHA representatives will be present for annual safety observations and to meet with the site safety and health council.</p> <p>d. OSHA 300 and 300A logs will be used to track the number of work-related injuries and illnesses. TCIR and DART Rates for previous years will be used for comparison purposes.</p> <p>Incident Investigation and Root Cause Analysis (RCA) forms will be utilized to track unsafe behaviors and trends.</p> <p>e. Track participation in on-site training, stand downs, etc.</p>

GOALS	STRATEGIES	MEASURES
6) Increase identification of hazards and abatement using the Construct PM Application or other similar electronic field management system	a. Incorporate Construct PM system into daily and monthly site audits and other safety checklists. b. Conduct a jobsite stand down on heat hazards which incorporates the use of OSHA's heat app. and other relevant apps.	a. Track the number of hazards identified, track training and identify trends using Construct PM or other system. b. Identify participation numbers who are present for stand down on heat and other hazards which incorporate the use of applicable OSHA apps.
7) Maintain 80% compliance with daily engagement efforts between the Layton project team and subcontractors with daily Pre-Task Planning.	a. Create a guidance document for all project team members to suggest ideas during the pre-task planning.	a. Generating a checklist to be filled out daily by the LCC project team to ensure they are engaging with at least one subcontractor daily. b. Generate compliance reports for this checklist utilizing the Construct PM application.
8) One hundred percent (100%) of subcontractors to have site- specific, comprehensive written safety job hazard analysis for their entire scope of work.	a. Written safety job hazard analysis will be required for subcontractors and tier- subcontractors. To be submitted during pre-mobilization meetings.	a. LCC will review and maintain copies of all contractors, and tier-subcontractors safety job hazard analysis.
9) One hundred percent (100%) of contractors and subcontractors to have a competent person who has completed, at a minimum, the OSHA 30-hour Outreach Training Program for Construction.	a. OSHA 30-hour certifications required for on-site competent person for all subcontractors and tier-subcontractors Ayton will review and maintain copies of said certifications.	a. Track certifications and training submissions.

#### IV. SAFETY AND HEALTH MANAGEMENT SYSTEMS

The Safety and Health Management System (“SHMS”) is a critical part of this partnership agreement in that it is an important aspect of collaboration between the project management team, supervisors, and the workers on site. This SHMS will include, but not be limited to, the following core elements:

##### *Management Leadership Roles*

LCC in association with OSHA, Intermountain Healthcare, and MT-DLI will form a partnership committee to monitor the implementation of this agreement. It will consist of a representative from each of the designated partners meeting quarterly. The committee will review contractor



compliance and involvement in the partnership; analyze jobsite audits; initiate improvements; and evaluate modifications, achievements, and success of the partnership.

### *Worker Participation*

- Pre-Mobilization Meetings: prior to mobilization, each Subcontractor's project management personnel and field supervisors will attend a pre-mobilization meeting led by the LCC project team.

The subcontractor's field supervisors will discuss detailed project-specific safety hazards and describe how they and their lower-tier subcontractors intend to implement and conform to the LCC Project Safety Management Plan ("PSMP").

- Daily All-Hands Production/Safety Huddle led by the LCC project team at the beginning of each shift, all Subcontractor's employees and lower-tier Subcontractor's employees will participate in warm-up/stretching exercises, a meaningful discussion of planned work activities, and a critical review of each Subcontractor's pre-task plan.
- Subcontractor's Supervision and Safety Inspection and Oversight Requirements.
  - Each Subcontractor and lower-tier subcontractor supervisor should have OSHA 30-hour training. Each Subcontractor will provide an on-site, full-time safety professional when the Subcontractor and its lower-tier trade partners collectively have 50 or more employees on site, unless the trade partner is working under a Layton Corrective Action Plan, where a full-time safety professional may be required for fewer on-site employees. Subcontractor's supervisors will complete documented weekly safety audits in the Construct PM mobile app. These audits will describe the corrective actions taken for hazardous or non-compliant issues found.
  - Establish a 30-foot Layton Personal Safety Zone ("LaPSZ"). The LaPSZ is the 30-foot bubble surrounding an individual. It is that individual's duty to watch for people, equipment, traffic, and other hazards and at-risk behaviors appearing within the 30-foot LaPSZ. All individuals on the LCC project are obligated to stop at-risk work and behavior within their 30-foot LaPSZ and to commend safe work and behavior.
  - No lift shall exceed 75 pounds unless a lift plan is approved by the LCC project team.
  - Personal Protective Equipment will be used, at a minimum clear eye protection conforming to ANSI/ISEA Z87.1, hard hats conforming to ANSI/ISEA Z89.1, high-visibility apparel conforming to ANSI/ISEA 107 Class 2, and a progressive implementation with gloves conforming to ANSI/ISEA 105 Cut Level A4 will always be worn on the site outside of an office setting or an enclosed cab. Protective footwear conforming to ASTM F2413 will be always worn on the site.
  - Incident Reporting: All incidents (injuries, illnesses, property damage, close calls) will be reported immediately to the LCC project team, regardless of the actual or potential consequences. On a case-by-case basis, as determined by the LCC project team, post-incident drug testing may be required for anyone involved in an incident involving injury or property damage.
  - Fall Protection: Each subcontractor will abide strictly by LCC's safe work practices when working from heights. When exposed to a fall of six feet or more, fall protection must be used. When engineering controls do not eliminate the fall hazard, 100% tie-off is required using a full-body harness fully compliant with 29 CFR 1926.502 Subpart M. Shock absorbing lanyards are prohibited; self-retracting deceleration devices (yoyos) are recommended. When using ladders, each subcontractor will follow the Layton Ladder Tag Inspection process.



- Ensure compliance with NFPA 70E when working on live electrical equipment, including training and the availability and use of personal protective equipment. A system of control procedures will be implemented to oversee the implementation of appropriate protective measures prior to exposure.
- Cranes
  - All crane operators are competent and certified to operate the specific crane in use. Crane Operators are certified through the National Commission for the Certification of Crane Operators (NCCCO).
  - Lifts over 75% are considered critical and require additional documentation, such as an Engineered Lift Plan.

#### *Hazard Identification and Assessment*

This project hazard identifications and assessments will be continuous throughout the entirety of the project. LCC will implement jobsite safety compliance with OSHA standards including, but not limited to, the following:

- All subcontractors will utilize the Construct PM system to complete all the required safety checklist and to document safety hazards. Construct PM will track all safety hazards created, who is the responsible party to make the corrections, severity levels and when the corrections are made.
- LCC will implement a weekly site-wide safety meeting for all employees on-site to participate.
- LCC will hold a Job Site Safety Orientation with each worker, including all subcontractors and temporary staffing agency employees prior to work on site. Each employee who has attended the orientation will receive a serial-numbered sticker confirming their participation in the orientation.
- Employees will have the opportunity to participate in a weekly site-wide safety meeting hosted by LCC.
- LCC will participate in frequent safety observations and provide all subcontractors on site with a copy of the safety audit reports for use in discussion and making corrections.

#### *Hazard Identification and Control*

LCC considers Hazard Prevention and Control a process requiring continuous enforcement of all safety policies and procedures. Taking immediate corrective actions to maintain a safe and healthy job site.

- Disciplinary Actions where subcontractor workers who fail to abide by the requirements of the Layton Project Safety Management Plan may be suspended or removed from the site. This is intended to preserve safety-conscious working conditions for all workers and encourage each employee to be responsible and conscientious.
- LCC will develop an emergency action plan and share it with everyone onsite when going through the site-specific orientation.
- LCC will ensure that all designated competent people from all contractors evaluate work activities prior to starting them.

### *Education and Training*

LCC understands that providing workers with an explanation of hazard recognition, control, and actively involving them in the process can help to eliminate hazards before an incident occurs.

- LCC will ensure employees receive training as follows:
  - Supervisory personnel shall possess an OSHA 30-hour card or its equivalent. LCC's project team will work with all subcontractors to provide each subcontractor's safety designer with an OSHA 10-hour training, or its equivalent through available on-site training options.
  - All employees will receive a site-specific construction safety orientation covering jobsite safety and health issues, procedures related to the work being performed, as well as the requirements outlined in the Partnership Agreement. In addition, employees shall receive training on the content of the risk assessment for operations they will encounter. This may require periodic retraining of employees on the content of the risk assessment as they become relevant due to entering new phases of construction. LCC's project team will provide this material to each subcontractor designated safety representative for completion.
  - Safety and health training will be provided to all workers in a language they understand. Bilingual instructors will perform this training. LCC's project team will provide a list of instructors to all subcontractors to ensure that all workers are effectively trained.
- LCC and the contractors responsible will ensure workers' work tasks are assigned to workers who are trained and authorized.
- All subcontractor field management representatives will possess minimum required training such as OSHA 30-hour, First Aid, and CPR.
- All workers will go through a project specific orientation before performing any work activity onsite.
- All subcontractors will conduct weekly toolbox meetings and work area safety inspections.

### *Program Evaluation and Improvement*

Program evaluations and improvements will be periodically, and at least annually evaluated for effectiveness in achieving its goals.

- Control measures and strategies are periodically evaluated for effectiveness.
- Processes are established to monitor program performance, verify program implementation, and identify program shortcomings and opportunities for improvement.
- Feedback from the safety council and workers will be part of the annual and quarterly meetings.
- Third-party audits with OSHA Area Offices and St. Vincent Hospital Project to ensure program operating as intended.

## **V. WORKER INVOLVEMENT**

- LCC's project safety manager will establish an employee Safety Council consisting of one safety professional per subcontractor that will meet monthly to share the results of

jobsite inspections, help evaluate upcoming high-risk activities, conduct risk assessments, share best practices, and help with suggestions for improvement and recommendations for training the general workforce.

- LCC's project team or the contractor responsible will ensure workers are involved with daily huddle meetings to discuss the activities for the day, potential exposures, and performing stretches before starting work.
- LCC's project team and the responsible contractor will ensure workers participate in weekly safety toolbox talk meetings.
- LCC's project team and the contractor responsible require reporting of any near miss, unsafe conditions, injuries, or incident.
- LCC's project team will enforce a discipline plan established by the project specific safety plan.
- LCC's project team will hold monthly recognitions for individuals and subcontractors who are performing above expectations.

## **VI. PERFORMANCE MEASURES**

The OSHA Regional and/or Area Offices will conduct an initial, and an annual non-enforcement site verification visit.

Performance measures as outlined in Section III will be used to assess the effectiveness of the partnership. LCC will gather and track data for the performance measures and share the information with OSHA, as specified in Appendix B of the Strategic Partnership Program for Worker Safety and Health, OSHA Directive CSP 03-02-003.

## **VII. ANNUAL EVALUATION**

The partnership will be evaluated by the Billings Area Office on an annual basis by using the OSHA Strategic Partnership Program Annual Partnership Activities Report and Evaluation format, as specified in Appendix C of the Strategic Partnership Program for Worker Safety and Health, OSHA Directive CSP 03-02-003. The annual evaluation data will be provided to OSHA no later than 30 days after the anniversary date of the partnership signing. It will be the responsibility of LCC to collect the required data to evaluate and track the overall results and successes of the partnership. This data will also be shared with the Intermountain Healthcare team.

OSHA will conduct, write, and submit the annual evaluation report with input received from the partners.

OSHA may ask that the following information provided by the company during the on-site non-enforcement verification visit, for review or collection by OSHA:

1. OSHA 300/300A and 301 Logs of Injuries and Illnesses.
2. Number of employee training sessions held, number of employees and supervisors/managers trained. Number of and results of safety /health audits and inspections, which may include hazards identified and corrected.

3. Any documentation relating to employee involvement or participation, including minutes of safety meeting.
4. Any documentation of communication between management and employees (may include computer memos, feedback on each suggestion, or other appropriate documentation).
5. Any documentation relating to any partners participation in health or safety seminars (10 and 30-Hour Construction Safety and Health Courses, Safety and Health Fair, Trade Shows, etc.).

## **VIII. OSHA VERIFICATION PROCEDURES**

The OSHA Billings Area Office will conduct one announced non-enforcement verification inspection each year for the tenure of the project. OSPP verifications must be performed in accordance with the OSPP Directive, CSP 03-02-003. OSHA will report the hazards identified and recommendations will be made to each exposing contractor and LCC. Abatement will be made by each exposing contractor and documentation thereof sent to LCC and OSHA. Onsite non-enforcement verification consisting of a worksite review will be conducted as part of the quarterly partnership meeting or remotely as resources allow.

LCC and its subcontractors will remain subject to OSHA inspections and investigations in accordance with agency policies. OSHA will continue to investigate fatalities and catastrophes that occur at member companies as well as formal complaints and severe injury reports received.

## **IX. INCENTIVES**

OSHA's Field Operations Manual details opportunities available during citation/case settlement for all employers who undergo onsite enforcement inspections. These opportunities are also available for partnering companies to participate in the Partnership. OSHA will also offer, as sources permit, the following incentives: Being available for offsite activities such as participating in audits and evaluations, workshops, speaking events, and providing informational materials.

## **X. PARTNERSHIP MANAGEMENT AND OPERATION**

*LCC will:*

- Implement comprehensive safety and health programs as outlined in Section IV.
- Executive and senior leadership will conduct monthly walks to evaluate site safety conductions.
- Create a safety council and proactively conduct risk assessments on upcoming activities and share resources.
- Develop a recognition program to implement throughout the entire project. Recognitions will be for individuals and subcontractors.
- Ensure compliance with the NFPA 70E when working on live electrical equipment, including training and the availability and use of personal protective equipment. A permit system will be implemented whenever working near or on live electrical systems

to ensure the implementation of appropriate protective measures prior to exposure. The permit form includes requirements for pre-task review and lockout/tagout procedures to be followed.

- Mentor subcontractors with planning daily work activities through pre-task plans and share best practices to increase effectiveness.
- Implement a six-foot fall protection requirement throughout the Project.
- Participating in the National Safety Stand-Down to Prevent Falls in Construction.
- Share the responsibility for overseeing site safety, serving as a point of contact, and overseeing the partnership goals.
- Train workers in Layton Construction Safety Systems, Construct PM, which provide workers with information on recognizing and avoiding construction safety and health hazards, as well as the authority to stop work.
- Make Safety Data Sheets (SDS) available to any requesting worker.
- Ensure that all subcontractors are invited and encouraged to participate in jobsite safety meetings/toolbox talks on a weekly basis and document all attendance and topics.
- Review monthly incident summaries, including first aid, injury, and near-miss reports, with management and the safety council.
- Agree to allow OSHA representatives site access during inspection activities (monitoring and un-programmed activities such as fatalities and employee complaints).
- Audit the Partnership and make recommendations for improvement.
- Share and make available to all workers at the site jobsite observations and near-miss incident report summaries.

*OSHA will:*

- Conduct a quarterly partnership evaluation and include data used to monitor the success of the partnership efforts. On a quarterly basis, the Project Safety Manager, Project Construction Manager, Senior Project Manager, and Senior Superintendent for Layton Construction, Intermountain Healthcare's representatives, an OSHA representative shall meet and discuss the program and make modifications as required for continual improvement to the partnership.
- OSHA will designate a Billings Area Office CAS to be used as a resource for technical issues and assist the partnership with off-site safety and health training.
- OSHA will give priority to LCC and Subcontractors when the employer(s) requests technical advice, publications, national statistics covering all standards and training material to the employer(s) upon request. Such requests will not cause an OSHA inspection.

*MTDLI will:*

- Meet with LCC following signing of the agreement to develop an I.H. monitoring plan that will evolve with the life of the project.
- Periodically, as part of the quarterly Partnership meeting, provide an MTDLI representative at site safety committee meetings and/or activities as resources permit.
- Participate in the quarterly partnership meetings.
- Upon request, provide onsite consultations for MCI and subcontractors.
- Provide/assist in training topics such as silica, noise, and heat.
- Give priority consideration to requests for services to small contractors who are engaged in work on the project.
- Appoint a representative to participate in Safety Committee meetings to the extent resources allow.

- To the extent feasible, conduct quarterly safety and health surveys of the project, which may include performing personal sampling to assess employee exposure levels such as but not limited to noise, silica, carbon monoxide, heavy metals, isocyanates, hexavalent chromium, and other noted chemical hazards.

#### *Intermountain Health Team*

- Participate in the quarterly partnership meetings and site reviews, as resources allow.
- Designated contact Daniel Harris, Lindsey Meek, and Jason Carder, Construction Compliance to be used as a resource for hospital compliance questions and overall partnership communicator and technical issues.
- Assist with safety and health training by providing training facility accommodations.

## **XI. WORKER AND EMPLOYER RIGHTS**

This partnership does not preclude workers and/or employers from exercising any rights provided under the OSH Act (or, for federal workers, 29 CFR 1960), nor does it abrogate any responsibility to comply with rules and regulations adopted pursuant to the Act.

## **XII. PARTNERSHIP TERMS**



It is understood that this Agreement shall be in effect until completion of construction activities at the Project, but in no case longer than three years. Should any “signatory” stakeholder choose to withdraw prior to project completion, a written notice shall be given stating the reason(s) and providing 30 days’ notice to the other party(s).

If OSHA chooses to withdraw its participation in the Partnership, the entire Partnership is terminated. Any party may also propose modification or amendment of the Agreement. Changes may be implemented if all parties agree that such changes are in the best interest of the Partnership.

## **XIII. SIGNATORIES**

**Based upon a mutual interest to protect construction workers, the parties below agree to the above terms on the Layton Construction Co., LLC / Intermountain Healthcare OSHA Partnering Agreement for the St. Vincent Hospital Project in Billings, Montana.**

Signed the 9 day of December 2025.

 <p><b>OSHA</b> Occupational Safety and Health Administration</p>	<p><b>OSHA, Billings Area Office</b></p> <p>Signature: _____</p> <p>Printed Name: <b>Arthur A. Hazen, Area Director</b></p>
 <p><b>Safety &amp; Health</b> CONSULTATION PROGRAM</p>	<p><b>Montana Onsite Consultation Program</b></p> <p>Signature: _____</p>

	Printed Name: <b>Tiffany Ott, Program Manager</b>
	<b>Layton Construction, LLC</b> Signature: _____ Printed Name: <b>Jeremy Hobbs, Vice President</b>
	<b>Layton Construction, LLC</b> Signature: _____ Printed Name: <b>Luke Halpin, Construction Manager</b>
	<b>Layton Construction, LLC</b> Signature: _____ Printed Name: <b>Shawn Slater, Sr Project Manager</b>
	<b>Layton Construction, LLC</b> Signature: _____ Printed Name: <b>Brandon Bergener, Sr Superintendent</b>
	<b>Layton Construction, LLC</b> Signature: _____ Printed Name: <b>Austin Nottke, Safety Manager</b>