**Self-Certification Medical Statement**

**Supporting Statement**

**OMB Clearance 0579‑0196**

**JUSTIFICATION October 2011**

**1. Explain the circumstances that make the collection of information necessary. Identify anylegal or administrative requirements that necessitate the collection. Attach a copy of the appropriate section of each statute and regulation mandating or authorizing the collection of information.**

The United States Department of Agriculture is responsible for ensuring consumers that food and farm products are moved from producer to consumer in the most efficient, dependable, economical, and equitable system possible.

5 CFR Part 339 authorizes an agency to obtain medical information about an applicant’s health status to assist management in making employment decisions concerning positions that have specific medical standards and/or physical requirements in order to determine medical/physical fitness. The Marketing and Regulatory Programs (MRP) of the U.S. Department of Agriculture (USDA) hires individuals each year in commodity grading and inspection positions. These positions involve arduous duties. The incumbents work under dusty conditions around moving machinery, slippery surfaces, and high noise level areas. A potential employee may have direct contact with meat, dairy, fresh or processed fruits and vegetables, and poultry products intended for human consumption; and/or cotton and tobacco products intended for human use. This information collection is necessary to make a preliminary determination regarding the candidate’s physical fitness and his/her ability to physically perform the duties of the position.

**2. Indicate how, by whom, and for what purpose the information is to be used. Except for a new collection, indicate the actual use the agency has made of the information received from the current collection.**

APHIS uses the following information activity to collect information from the prospective employees to assist MRP program officials, administrative personnel, and servicing Human Resources offices in determining an applicant’s physical fitness for employment in positions with approved medical standards and/or physical requirements for direct contact with meat, dairy, fresh or processed fruits and vegetables, and poultry intended for human consumption; and/or cotton and tobacco products intended for consumer use. These positions involve arduous duties, proximity to moving machinery, slippery surfaces, and exposure to high noise levels.

The following is the only form that MRP uses for this employment process.

**MRP-5, Self-Certification Medical Statement**

The MRP-5 form is required from applicants in order to determine their physical fitness for employment. This information will determine whether the applicants can physically perform the physical position duties for which they are applying.

**3. Describe whether, and to what extent, the collection of information involves the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses, and the basis for the decision for adopting this means of collection. Also describe any consideration of using information technology to reduce burden.**

The type of information to be collected and the manner in which the information is to be presented are not currently amenable to use on electronic information technology. There is no technology currently available which can eliminate or reduce the need for the information to be completed by the applicant.

MRP Form 5 was not a transaction determined by MRP to be practicable for automation under the eGovernment initiative.

**4. Describe efforts to identify duplication. Show specifically why any similar information already available cannot be used or modified for use for the purposesdescribed in Item 2 above.**

MRP is the only agency that collects the abovementioned MRP-5 information from its employees. The information collected by the MRP-5 is not available from or requested by any other source. Therefore, this information collection is not duplicative of any other information collection effort.

**5**. **If the collection of information impacts small businesses or other small entities (Item 5 of OMB‑83‑1), describe any methods used to minimize burden.**

MRP has no small entities, as identified under Item 5 of OMB-83-1, involved with this information collection.

**6. Describe the consequences to Federal program or policy activities if the collection is not conducted or is conducted less frequently, as well as any technical or legal obstacles to reducing burden.**

If this collection was not conducted, MRP would not be able to accurately determine the physical and/or mental fitness for the position which the applicant has applied and still meet the provisions of the Act. This information is collected only once.

**7. Explain any special circumstances that would cause an information collection to be conducted in a manner:**

* **requiring respondents to report information to the agency more often than quarterly;**
* **requiring respondents to prepare a written response to a collection of information in fewer than 30 days after receipt of it;**
* **requiring respondents to submit more than an original and two copies of any document;**
* **requiring respondents to retain records, other than health, medical, government contract, grant-in-aid, or tax records for more than three years;**
* **in connection with a statistical survey, that is not designed to produce valid and reliable results that can be generalized to the universe of study;**
* **requiring the use of a statistical data classification that has not been reviewed and approved by OMB;**
* **that includes a pledge of confidentiality that is not supported by authority established in statute or regulation, that is not supported by disclosure and data security policies that are consistent with the pledge, or which unnecessarily impedes sharing of data with other agencies for compatible confidential use; or**
* **requiring respondents to submit proprietary trade secret, or other confidential information unless the agency can demonstrate that it has instituted procedures to protect the information's confidentiality to the extent permitted by law.**

This information collection is consistent with the guidelines established in 5 CFR 1320.6.

**8. Describe efforts to consult with persons outside the agency to obtain their views on the availability of data, frequency of collection, the clarity of instructions and recordkeeping, disclosure, or reporting form, and on the data elements to be recorded, disclosed, or reported. If applicable, provide a copy and identify the date and page number of publication in the Federal Register of the agency's notice, soliciting comments on the information collection prior to submission to OMB.**

APHIS held a productive consultation with the following individual in connection with the information collection activity associated with this program:

Dr. Oleh Jacykewycz

USDA Medical Officer

(202) 720-3893

On Friday, July 1, 2011, page 38601, APHIS published in the Federal Register, a 60-day notice seeking public comments on its plans to request a **3-year renewal** of this collection of information. No comments from the public were received.

**9**. **Explain any decision to provide any payment or gift to respondents, other than remuneration of contractors or grantees.**

This information collection activity involves no payments or gifts to respondents.

**10. Describe any assurance of confidentiality provided to respondents and the basis for the assurance in statute, regulation, or agency policy.**

“No additional assurance of confidentiality is provided with this information collection. Any and all information obtained in this collection shall not be disclosed except in accordance with 5 U.S.C. 552a.”

**11. Provide additional justification for any questions of a sensitive nature, such as sexual behavior or attitudes, religious beliefs, and other matters that are commonly considered private. This justification should include the reasons why the agency considers the questions necessary, the specific uses to be made of the information, the explanation to be given to persons from whom the information is requested, and any steps to be taken to obtain their consent.**

It is necessary to assess the physical fitness of an applicant by the responses obtained on the Self Certification Medical Statement in order to make a preliminary determination if a medical condition exists which impedes a physical or mental ability to efficiently perform the essential functions of the position without hazard to himself/herself or others.

**12. Provide estimates of the hour burden of the collection of information. Indicate the number of respondents, frequency of response, annual hour burden, and an explanation of how the burden was estimated.**

See APHIS Form 71 for hour burden estimates.

**● Provide estimates of annualized cost to respondents for the hour burdens for collections of information, identifying and using appropriate wage rate categories.**

The total cost to the respondents was estimated by multiplying their average hourly wage by the total number of hours needed to complete the work.

$20.99 x 88 hours = $1,847.

$20.99 is the hourly rate derived from the U.S. Department of Labor, Bureau of Labor Statistics, National Compensation Survey: Occupational Earnings in the United States, 2009. See <http://www.bls.gov/ncs/ncswage2009.pdf>.

**13. Provide estimates of the total annual cost burden to respondents or record keepers resulting from the collection of information (do not include the cost of any hour burden shown in Items 12 and 14).**

There are no capital/start-up or ongoing operation/maintenance costs associated with this information collection.

**14. Provide estimates of annualized cost to the Federal Government. Provide a description f the method used to estimate cost and any other expense that would not have been incurred without this collection of information.**

The estimated total cost for the Federal Government is $3,281. See APHIS Form 79.

**15. Explain the reasons for any program changes or adjustments reported in Items 13 or 14 of the 0MB Form 83‑I.**

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| --- |
| Annual IC Burden: (Select appropriate IC Burden Worksheet) |
| This ICR Requests Change in Net Burden | This ICR Requests No Change in Net Burden |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Requested** | **Program Change Due to New Statute** | **Program Change Due to Agency Discretion** | **Change Due to Adjustment in Agency Estimate** | **Change Due to Potential Violation of the PRA** | **Previously Approved** |
| Annual Number of Responses for this IC | 524 | 0 | 0 | -76 | 0 | 600 |
| Annual IC Time Burden (Hours) | 88 | 0 | 0 | -12 | 0 | 100 |
| Annual IC Cost Burden (Dollars) | 0 | 0 | 0 | 0 | 0 | 0 |

There is an adjustment decrease in the number of respondents from 600 to 524, decreasing the number by 76, this caused a reduction in number of responses from 600 to 524 decreasing the number of responses by 76, and then decreasing the number of burden hours from 100 hours to 88 decreasing the total burden hours by 12

The adjusted decrease is due to a decrease in the number of respondents who complete the Self-Certification Medical Statement annually.

**16. For collections of information whose results are planned to be published, outline plans for tabulation and publication.**

There are no plans to publish the data for statistical use.

**17. If seeking approval to not display the expiration date for 0MB approval of the information collection, explain the reasons that display would be inappropriate.**

Not applicable. APHIS will display the expiration date.

**18. Explain each exception to the certification statement identified in the Act.**

MRP is able to certify compliance with all provisions under the Certification for Paperwork Reduction Act.