VITAL REGISTRATION IN BELIZE

MEMORANDUM OF UNDERSTANDING

AND

PROCEDURE MANUAL

JUNE 2006
MEMORANDUM OF UNDERSTANDING

ON

VITAL REGISTRATION PROCESS

BETWEEN THE MINISTRY OF HEALTH

AND

ATTORNEY GENERAL’S MINISTRY

JUNE 2007

This Memorandum of Understanding is entered into by the Ministry of Health, Transport and Communication and Local Government and the Attorney General’s Ministry for the purpose of improving and strengthening the vital registration system, in order to have an integrated vital registration system that will reduce data redundancy and improve the timeliness, reliability and accuracy of national indicators used for planning and decision making.

BACKGROUND

Registration of births and deaths has become a concern worldwide since data from this process are used to monitor key social, economic and political aspects of a country. Regionally, international organizations have sensitized countries on the importance of an effective and efficient vital registration system. It has been noted nationally, that our country under-registration rate is high, and there is need to review methods to strengthen and develop an integrated vital registration system for all users and producers of these information.

Vital registration in Belize is fundamental for the planning of resource allocation and services to be provided to the population, whether by the public system or by the private sector. Considering the importance of vital statistics, a committee was formed in 1999 to find ways to improve the vital registration system. Through this means, the vital registration system was reviewed and members agreed that an integrated system monitored by the Ministry of Health would contribute to reduce the under-registration and under-reporting of vital statistics. This will further enhance the quality of information produced by the country of Belize as it relates to vital statistics.
CONSIDERING:

1. The need to improve the provider based vital registration system,
2. The need to reduce the turn around time as it relates to vital registration process,
3. The need to reduce under-registration and improve the quality of vital statistics,
4. The social, political and economic impacts of vital registration in Belize,
5. The parties are stakeholders in the development of improved vital registration system,
6. The multi-sectoral approach is the most effective strategy in ensuring the effectiveness of this initiative.

THE PARTIES HEREBY AGREE THAT/TO:

1. The Ministry of Health will provide the technical support in ensuring the implementation of the vital registration system in all public and private health facilities according to the agreements in the attached manual,
2. The Ministry of Health will provide the office space, specifically in the District Health Information Unit, for such activity to take place,
3. The Statistical Clerk at each hospital or region will be responsible to coordinate and supervise all activities as it relates to vital registration system in their area according to the agreement in the attached manual,
4. The Attorney General’s Ministry will provide all necessary equipments and materials for the implementation of this initiative and will maintain continuous replacement of supplies and equipments where necessary,
5. Strengthen the vital registration system and provide necessary information to relevant stakeholders, users and producers of vital registration data,
6. Develop a national vital registration database system that will be available for use by key players and stakeholders,
7. Improve and increase awareness of the importance of vital registration,
8. Train and equip relevant staff assigned to conduct these responsibilities,
9. Strengthen institutional capabilities in order to continuously improve vital registration system in Belize,

10. Continue to review and enact additional legislation for the regulation and enforcement of vital registration in Belize.

Signed this ____ day of June, 2007 in Belmopan City.

Ms. Margaret Ventura  
Chief Executive Officer  
Ministry of Health, Transport,  
Communication and Local Government,

__________________________________________________________

Mr. Edwin Flowers  
Solicitor General  
Attorney General’s Ministry
VITAL REGISTRATION

PROCEDURE MANUAL

OF

BELIZE

JUNE 2006
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SECTION I: Births Policy

Policy Statement:

It will be the responsibility of the health care institutions or professionals (Medical Doctor, Nurse, Midwife, Traditional Birth Attendant) who attend a live birth, to ensure that the Registration of the Birth be completed before the child is discharged from the institution or within the first seven (7) days of life if the birth should occur outside a health institution. (Vital Registration of Births and Deaths Act, Chapter 157, Revised 2000.)

1- Protocol for Registration of Births - Health Care Institution

1. The public hospital will provide an office space (preferably in the District Health Information Unit) for the purpose of Registration of Births. The Vital Statistics Unit of the Attorney General Ministry will provide the necessary forms and other resources for this function and will exercise in collaboration with the Ministry of Health the due supervision of the process herein conducted.

2. The attending Physicians and the Nurse In-Charge under the supervision of the Hospital Administrator and the Medical Chief of Staff will collaborate in ensuring that all children born in the institution are duly registered before discharge.

3. The department of Vital Statistics will produce the forms for registration of births (Live Birth Registration, Certificate of Registration of Birth, and Live Birth Certificate\(^1\)) and the Ministry of Health will produce the live birth notification form. The Vital Statistics Department will provide these forms to all hospitals where an adequate stock will be kept at the District Health Information Unit within each public hospital.

4. The person attending the delivery has the responsibility to fill the Birth Notification form and submit form to the Statistical Clerk for birth registration.

5. On weekends and public holidays, the person attending the delivery is responsible for filling the Birth Notification and Registration of Live Birth forms, which should be submitted to the Statistical Clerk on the following working day for completion of registration process. The parents of the child should be informed to return on the following working day to obtain the Certificate of Registration of Birth at the District Health Information Unit.

6. It is the responsibility of the Statistical Clerk at each District Health Information Unit to ensure that these forms are filled out properly and data entered into the register and a designed database for births.

7. The registration form will be picked up from the Maternity Ward on a daily basis by the Statistical Clerk in each public hospital.

\(^1\) WHO Definition of Live Births: refers to the complete expulsion or extraction from its mother of a product of conception, irrespective of duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life. Example: beating of the heart, pulsation of the umbilical cord or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached. Each product of such a birth is considered live born. World Health Statistics. 2005. World Health Organization.
8. The Statistical Clerk will document every birth between regular working hours (8:00 am – 5:00 pm). All births occurring during the period 5:00 pm to 8:00 am, will be registered by the Clerk the following working day.

9. The Statistical Clerk should ensure that the statistics on live births are sent on a monthly basis to the Vital Statistics Headquarters in Belize City.

10. There will be no fee linked for the registration of births in any hospital. Hospital Administration will ensure that parents are not subject to any additional requirements related to this registration process.

11. Registering of births after one month after the delivery is considered late birth registration. There will be a fee levied for late registration of births ($5.00 BZ).

12. Private hospitals administration is responsible to ensure that items No. 4 and 5 are duly carried out. The administration is also responsible of ensuring that all copies of live birth notification and live birth registration forms are sent to the District Statistical Clerk on a weekly basis.

13. Parents of children born in private institutions must be informed to contact District Statistical Clerk for the completion of birth registration.

14. The Birth Registration form will be filled in duplicate. In private institutions the original is to be given to the child’s parent to be taken to the District Health Information Unit in order to complete registration of the birth and all copies are to be sent to the District Statistical Clerk, weekly.

15. In public hospitals, the copy will remain for hospital records. The original will be sent to the Vital Statistics Unit, Belize City.

16. Upon completion of the live birth registration form, the Statistical Clerk is to issue a certificate of registration of birth to the parent of the child.

17. Application for a birth certificate of any live birth can be done so at any of the District Health Information Unit.

2- Protocol for the Registration of Live Births - Home

In this case, the health care provider should assist the parents of the child in filling out the forms or ensure that the parent goes to the hospital and completes the process. Forms filled out by these providers should be delivered to the nearest Rural Health Nurse in the area. On a weekly basis or during mobiles, the Rural Health Nurse should ensure that all birth registration forms are sent to the Statistical Clerk. The Goal is to have these children registered within one month of birth.
3- Protocol for Registration of Live Births - Outside of Health Care Institutions

The Public Health Nurse, Traditional Birth Attendant and/or the Community Nursing Aide should encourage parents to register the newborn at the nearest public hospital as soon as possible.

4- Protocol for Registration of Still Births\(^2\) - Inside/Outside of Health Care Institutions

1. A still birth notification form should be issued to parents of the fetal death upon occurrence, if the fetal death has 22 or more completed weeks of gestation and/or birth weight greater than 500 grams.

2. The person attending the delivery is responsible for the complete filling of the still birth notification form in duplicate. The original is to be given to parents of the fetal death and the copy is to be submitted to the District Statistical Clerk, for record keeping and electronic data entering.

3. The Ministry of Health is responsible for producing and administration of still birth notification forms.

4. Private institutions are responsible for the complete filling of the stillbirth notification forms and should ensure to follow procedure number 2.

5. Private institutions are responsible for submitting copies of stillbirth notification forms to the District Statistical Clerk on a weekly basis.

\(^2\) Still births is defined as a death prior to complete expulsions or extraction from its mother of a product of human conception, equal or greater to 22 weeks of gestation (WHO and ICD 10 Code cut off point), and which is not an induced termination of pregnancy. The death is indicated by the fact that after such expulsion or extraction, the fetus does not breathe or show any other evidence of life, such as beating of the heart, pulsation of umbilical cord, definite movement of voluntary muscles. Heart beats are to be distinguished from transient cardiac contractions; respiration is to be distinguished from fleeting respiratory efforts or gasps.
SECTION II: Deaths

Policy Statement:

It will be the responsibility of the health care institution or professional (Medical Practitioners) who certifies a death, to ensure that for each death, a death certificate is filled out completely in order to facilitate the Registration process of each Death before releasing the body. If a death occurs in a remote area, it is the responsibility of the Village leader (Alcalde, Chairperson, Police, Community Health Worker or Rural Health Nurses) to ensure that the family or friend of the deceased reports the death to the nearest Police Station or the Public Hospital for examination. (Vital Registration of Births and Deaths Act, Chapter 157, Revised 2000.)

1- Protocol for Registration of Deaths - Public/Private Health Care Institutions

1. The Government Hospital will provide an office space (preferably in the District Health Information Unit) for the purpose of Registration of Deaths. The Vital Statistics Unit of the Attorney General Ministry will provide the burial form for this function and will exercise in collaboration with the Ministry of Health the due supervision of the process herein conducted.

2. The attending Medical Practitioners under the supervision of the Public and Private Hospital Administrator will collaborate with the Statistical Clerk in ensuring that all deaths occurring in their institutions are duly recorded and registered before the release of body to the relative or friend of the deceased.

3. The Private Medical Institutions should refer relatives of any deceased to take the death certificate to the Statistical Clerk at the nearest Public Hospital for the registration of the death.

4. The Ministry of Health will produce the Death Certificates and the Vital Statistics Unit will produce the other death registration forms (Uncertified Death Registration and Burial) to be given to the District Health Information Unit (DHIU). The District Health Information Unit will keep an adequate stock in order to facilitate the ongoing registration process.

5. The certifying medical practitioner of the death is responsible of filling the death certificate completely. The Statistical Clerk is responsible for the registration and recording of each death into a register book and an electronic data system.

6. In cases where a Medical Officer is not present (remote rural areas) and a death occur, an uncertified death notification form should be filled out for that death by either an Alcalde, Police Officer, Justice of Peace, Rural Public Health Nurse or a Certify Nursing Aide.

7. The uncertified death notification form should be filled in duplicate. The original and its copy is to be submitted to the District Statistical Clerk to ensure the registration of the death, data entry and filing. The form will be kept by all Rural Public Health Nurse to be distributed accordingly.

8. The Rural Public Health Nurse is to ensure that for each death that occurs in their area, under the circumstances indicated in 6 above, a form is to be filled out and the original and its copy is to be sent to the District Statistical Clerk, monthly.
9. The Statistical Clerk will register every death that occurs in their respective District between regular working hours (8:00 am – 5:00 pm). All Deaths occurring during the period 5:00 pm to 8:00 am, will be registered by the Clerk the following working day.

10. During the weekends and public holidays, death certificates will be available for the Medical Practitioners in the respective health institutions, under the care of the Nurse In-Charge, to be filled out in case of any death occurring and will be duly registered on the first workday by the Statistical Clerk.

11. The Statistical Clerk is responsible for the administration of death certificates, including the availability at all times in all wards, and ensure that they are properly used for this purpose.

12. The Statistical Clerk should ensure that the statistics on deaths are sent on a monthly basis to the Vital Statistics Headquarters in Belize City.

13. There will be no fee for the registration of deaths in all hospitals if it is done within one month of death. Hospital Administration will ensure that the family of the deceased is not subject to any additional requirements related to this registration process. Any delay in death registration beyond the one month period will incur a $5.00 fee.

14. The private institutions are responsible for the filling of death certificates and should ensure that copies are submitted to the District Statistical Clerk on a weekly basis.

15. The Statistical Clerk is to check and ensure that the DHIU receives on a daily basis all copies of death certificates that occur in public hospitals and on a monthly basis all uncertified death notification form from Rural Public Health Nurses.

16. All death certificates issued will be filled in triplicate. In private institutions the original form of the death certificate should be issued to the respective relative or friend of the deceased in order to register the death, the first and second copy must be submitted to the District Statistical Clerk on a weekly basis.

17. The death certificates and stillbirth notification forms should be filed by the Statistical Clerk or Records Clerk in a folder in alphabetical order and by month of death specifying the year.
# ANNEX

## VITAL REGISTRATION FORMS

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<td>Form 7</td>
<td>Uncertified death notification form</td>
</tr>
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</table>
Maternity Ward
Live Birth Notification Form

Date: ____ / ______/ ____

This is to certify that Mrs. / Miss __________________________ gave birth to a
live Male / Female child on the ____ / ______/ _____ at the _______________
_______________________________ hospital, ________________ town, district
of ________________________.

_____________________________          ________________________
Name of Person Delivering (Print)                     Signature

Maternity Ward
Live Birth Notification Form

Date: ____ / ______/ ____

This is to certify that Mrs. / Miss __________________________ gave birth to a
live Male / Female child on the ____ / ______/ _____ at the _______________
_______________________________ hospital, ________________ town, district
of ________________________.

_____________________________          ________________________
Name of Person Delivering (Print)                     Signature
MINISTRY OF HEALTH/VITAL STATISTICS UNIT
CERTIFICATE OF REGISTRATION OF BIRTH

I, .............................................................., Registrar of Births and Deaths in District of ............................., Belize, do hereby certify that I have this day registered the birth of ............................................................ born at .................................................. on the ........ day of .................., ........... the child of ........................................................

and .........................................................

Witness my hand this ........ day of .............., 20....

__________________________________
District Statistical Clerk
For Assistant Registrar General
Births, Deaths, Marriages
# Form 5: Death Certificate Registration Form

Please press firmly -- asking three copies

## 1.0 Particulars of Deceased

1.1 Last Name (Surname)  
1.2 First Name  
1.3 Other Names  
1.4 Race/Ethnicity  
1.5 Usual Residence (Number, street, village, district)  
1.6 Age  
1.7 Date of Birth  
1.8 Sex  
1.9 Marital Status  
1.10 Occupation

## 2.0 Particulars of Death (Please print CLEARLY)

2.1 Date of Death  
2.2 Approximate Time of Death  
2.3 Disease, Injury or Complication Leading Directly to Death  
2.4 Approx Time Between Onset and Death (a) - (d)↑  
2.5 Antecedent Causes Giving Rise to Death  
2.6 Other Significant Conditions Contributing to Death  
2.7 External Causes (How Injury Occurred)  
2.8 Date of Injury  
2.9 Place of Injury  
2.10 Place of Death  

HOSPITAL  
NAME OF HOSPITAL OR INSTITUTION  
LOCATION  
DISTRICT  
OTHER  
NUMBER, STREET  
LOCATION  
DISTRICT

* This does not mean the mode of dying, e.g., heart failure, asthenia, etc. It means the disease, injury or complication which caused the death.

2.11 Post Mortem Performed  

### 3.0 Particulars of Practitioner Certifying Death

3.1 Name (Block Letters)  
3.2 Qualifications  
3.3 Address  
3.4 Date This Certificate Was Prepared  
3.5 Signature

I certify that the particulars and causes of death shown above are true to the best of my knowledge and belief, and that no relevant information has been omitted.

(The person receiving this certificate should register the death (or cause it to be registered) at the General Registry four days from the date of death. A penalty is imposed for neglecting to give information of a death.)

Original (white) copy: Deliver to General Registry  
Yellow copy: District Health Information Unit or Hospital Records  
Pink copy: Send to Epidemiology Unit

MC1 7/94
I, .................................................. Registrar of Births and Deaths in the District of ......................... in Belize, do hereby certify that I have this day registered the Death of ................................................................. Who died on ........ day of ............ 20...... and grants permission for Burial.

Witness my hand this ........ day of ............ 20...........

___________________________
District Statistical Clerk
For Assistant Registrar
Births, Deaths, Marriages

Ministry of Health/Vital Statistics Unit

Form 6:
Ministry of Health/Vital Statistics Unit

BURIAL FORM

I, .................................................. Registrar of Births and Deaths in the District of ......................... in Belize, do hereby certify that I have this day registered the Death of ................................................................. Who died on ........ day of ............ 20...... and grants permission for Burial.

Witness my hand this ........ day of ............ 20...........

___________________________
District Statistical Clerk
For Assistant Registrar
Births, Deaths, Marriages