Live Birth Registration in Ontario

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Epidemiologist, Better Outcomes Registry & Network (BORN) Ontario
Outline

1. Background information on measurement of the infant mortality rate in Ontario and Canada

2. Legal requirements for and process to complete live birth registration in Ontario

3. Strategies to facilitate completion of live birth registration regardless of birth outcome

4. Recommended Birth Registration Policy Template for Organizations
Birth registration is a human right according to the United Nations Convention on the Rights of the Child (CRC)
Birth registration

- **Purposes:**
  - **Individual:** administrative and legal (e.g., proof of identity, nationality, proof of age, eligibility for social benefits)
  - **Regional/provincial/national:** demographic (e.g., calculating population projections); epidemiologic (e.g., measuring population health indicators such as fertility and mortality, establishing priorities for health services)
  - **International:** health comparisons (e.g., measuring a country’s progress and commitment to fighting specific diseases and improve the health status of its citizens)
1. Background information on measurement of the infant mortality rate in Ontario and Canada
Infant mortality

- **Definition**: death of an infant during the first year following birth

- “...most comprehensive indicator of the level of health in a society, providing an important measure of the well-being of infants, children and their families.” (Smylie et al., CJPH 2010)

- Infant mortality rate is an important world-wide indicator of population health
Targets for MDG4
1. Reduce by two thirds the mortality rate among children under five
   - Under-five mortality rate
   - Infant mortality rate
   - Proportion of 1 year-old children immunised against measles
Iceland had the lowest rate at 2.4 infant deaths per 1,000 live births, followed by Japan, Sweden and Finland.

<table>
<thead>
<tr>
<th>Rank</th>
<th>Country</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Iceland</td>
<td>2.4</td>
</tr>
<tr>
<td>2</td>
<td>Japan</td>
<td>2.6</td>
</tr>
<tr>
<td>3</td>
<td>Sweden</td>
<td>2.8</td>
</tr>
<tr>
<td>3</td>
<td>Finland</td>
<td>2.8</td>
</tr>
<tr>
<td>5</td>
<td>Norway</td>
<td>3.2</td>
</tr>
<tr>
<td>6</td>
<td>Czech Republic</td>
<td>3.3</td>
</tr>
<tr>
<td>7</td>
<td>France</td>
<td>3.6</td>
</tr>
<tr>
<td>8</td>
<td>Germany</td>
<td>3.8</td>
</tr>
<tr>
<td>8</td>
<td>Denmark</td>
<td>3.8</td>
</tr>
<tr>
<td>10</td>
<td>Switzerland</td>
<td>4.4</td>
</tr>
<tr>
<td>10</td>
<td>Netherlands</td>
<td>4.4</td>
</tr>
<tr>
<td>12</td>
<td>Australia</td>
<td>4.7</td>
</tr>
<tr>
<td>13</td>
<td>Canada</td>
<td>5.0</td>
</tr>
<tr>
<td>13</td>
<td>United Kingdom</td>
<td>5.0</td>
</tr>
<tr>
<td>15</td>
<td>United States</td>
<td>6.7</td>
</tr>
</tbody>
</table>

P This rate was calculated with preliminary data.
1. The rates are per 1,000 live births.
Source(s): National Statistics Offices.
## Infant mortality

### Definition

### Data Tables

#### Infant mortality rates, by province and territory

<table>
<thead>
<tr>
<th>Three year average, by sex, Canada, provinces, territories, health regions and peer groups</th>
</tr>
</thead>
<tbody>
<tr>
<td>- CANSIM</td>
</tr>
<tr>
<td>- IVT</td>
</tr>
</tbody>
</table>

#### Three year average, by sex, Canada, provinces, territories, census metropolitan areas and metropolitan influence zones
### Table 102-0507

**Infant deaths and mortality rates, by age group, Canada, provinces and territories annual**

The data below is a part of CANSIM table 102-0507. Use the Add/Remove data tab to customize your table.

<table>
<thead>
<tr>
<th>Geography, place of residence</th>
<th>Characteristics</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada, place of residence</td>
<td>Number of deaths</td>
<td>1,775</td>
<td>1,863</td>
<td>1,771</td>
<td>1,891</td>
<td>1,911</td>
</tr>
<tr>
<td></td>
<td>Mortality rate per 1,000 live births</td>
<td>5.3</td>
<td>5.4</td>
<td>5.0</td>
<td>5.1</td>
<td>5.1</td>
</tr>
<tr>
<td>Ontario, place of residence</td>
<td>Number of deaths</td>
<td>735</td>
<td>745</td>
<td>674</td>
<td>723</td>
<td>753</td>
</tr>
<tr>
<td></td>
<td>Mortality rate per 1,000 live births</td>
<td>5.5</td>
<td>5.6</td>
<td>5.0</td>
<td>5.2</td>
<td>5.3</td>
</tr>
</tbody>
</table>

**Footnotes:**

1. Sources: Statistics Canada, Canadian Vital Statistics, Birth and Death Databases
Infant mortality rate (IMR) calculation

- **Calculation**: number of deaths of infants under 1 year of age per 1,000 live births (in a given place and time)
Infant mortality rate (IMR) calculation

- **Calculation**: number of deaths of infants under 1 year of age per 1,000 live births (in a given place and time)

\[
\text{Infant mortality rate (IMR)} = \left( \frac{\# \text{infant deaths in a given place and time}}{\# \text{live births in a given place and time}} \right) \times 1,000
\]
Infant mortality rate (IMR) calculation

- **Calculation**: number of deaths of infants under 1 year of age per 1,000 live births (in a given place and time)

“...an increasingly complex indicator, given regional and temporal variations in birth registration.”

Infant mortality rate (IMR) calculation

- Types of IMR calculations:
  - Period IMR calculation
  - Cohort IMR calculation
  - *Gestational-age specific IMR
  - *Birth weight-specific IMR
Data sources for IMR calculation

- 2 sources of information required to calculate IMR:
  1. Death registration file (# of infant deaths)
  2. Live birth registration file (# of live births)

- **Unlinked files** (infant death and live birth registrations are separate)

- *Linked files* (each infant death registration is linked to its corresponding live birth registration)
Purpose of linked files

- Cornerstone of national and international perinatal surveillance
- Purpose of linked files is to use the additional variables from the birth registration that are not available on the death registration

<table>
<thead>
<tr>
<th>DEATH REGISTRATION</th>
<th>BIRTH REGISTRATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Date of birth</td>
<td>- Date of birth</td>
</tr>
<tr>
<td>- Sex</td>
<td>- Sex</td>
</tr>
<tr>
<td>- Date of death</td>
<td>- Birth weight</td>
</tr>
<tr>
<td>- Age at time of death</td>
<td>- Gestational age at birth</td>
</tr>
<tr>
<td>- Cause of death</td>
<td>- Plurality</td>
</tr>
<tr>
<td>- Place of death</td>
<td>- Maternal age</td>
</tr>
</tbody>
</table>

DEATH REGISTRATION
- Date of birth
- Sex
- Date of death
- Age at time of death
- Cause of death
- Place of death

BIRTH REGISTRATION
- Date of birth
- Sex
- Birth weight
- Gestational age at birth
- Plurality
- Maternal age
Example: Period IMR (unlinked)

**FIGURE 25.1** Rates of neonatal, postneonatal and infant death

*Canada (excluding Ontario), *1995–2004*

A

Deaths per 1,000 live births**

Example: Cohort IMR (linked)

Deaths per 1,000 live births ≥500 g***


* Data for Ontario were excluded because of data quality concerns; they are presented in Appendix H.

** Includes deaths for the specified calendar year (period calculation).

*** Includes deaths occurring to births weighing ≥500 g for the specified calendar year (cohort calculation). Unlinked infant deaths (i.e., infants whose death registration could not be linked to their birth registration) and live births/infant deaths with missing birth weight were also included, but live births/infant deaths with a missing birth weight and a gestational age <22 weeks were excluded.

† Per 1,000 neonatal survivors.

9 Per 1,000 neonatal survivors ≥500 g.

### Example: International IMR ranking

<table>
<thead>
<tr>
<th>Country</th>
<th>Rate*</th>
<th>Rank</th>
<th>Canada v country: rate ratio (95% CI)</th>
<th>Rate*</th>
<th>Rank</th>
<th>Canada v country: rate ratio (95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sweden</td>
<td>2.99</td>
<td>1</td>
<td>1.69 (1.49 to 1.92)</td>
<td>2.37</td>
<td>4</td>
<td>1.05 (0.90 to 1.22)</td>
</tr>
<tr>
<td>Norway</td>
<td>3.01</td>
<td>2</td>
<td>1.68 (1.43 to 1.97)</td>
<td>3.01</td>
<td>3</td>
<td>1.08 (0.89 to 1.31)</td>
</tr>
<tr>
<td>Finland</td>
<td>3.39</td>
<td>3</td>
<td>1.49 (1.28 to 1.74)</td>
<td>2.16</td>
<td>2</td>
<td>1.15 (0.95 to 1.40)</td>
</tr>
<tr>
<td>Czech Republic</td>
<td>3.75</td>
<td>4</td>
<td>1.35 (1.20 to 1.52)</td>
<td>2.12</td>
<td>1</td>
<td>1.18 (1.00 to 1.38)</td>
</tr>
<tr>
<td>Belgium</td>
<td>3.94</td>
<td>5</td>
<td>1.28 (1.13 to 1.46)</td>
<td>2.79</td>
<td>9</td>
<td>0.89 (0.76 to 1.05)</td>
</tr>
<tr>
<td>Northern Ireland</td>
<td>4.02</td>
<td>6</td>
<td>1.26 (1.01 to 1.56)</td>
<td>2.60</td>
<td>7</td>
<td>0.96 (0.73 to 1.25)</td>
</tr>
<tr>
<td>Austria</td>
<td>4.05</td>
<td>7</td>
<td>1.25 (1.10 to 1.41)</td>
<td>2.48</td>
<td>5</td>
<td>1.00 (0.85 to 1.18)</td>
</tr>
<tr>
<td>Germany</td>
<td>4.14</td>
<td>8</td>
<td>1.22 (1.14 to 1.31)</td>
<td>2.65</td>
<td>8</td>
<td>0.94 (0.85 to 1.04)</td>
</tr>
<tr>
<td>Denmark</td>
<td>4.43</td>
<td>9</td>
<td>1.14 (1.00 to 1.30)</td>
<td>2.88</td>
<td>10</td>
<td>0.87 (0.73 to 1.02)</td>
</tr>
<tr>
<td>Scotland</td>
<td>4.93</td>
<td>10</td>
<td>1.02 (0.89 to 1.17)</td>
<td>3.51</td>
<td>13</td>
<td>0.71 (0.60 to 0.84)</td>
</tr>
<tr>
<td>England and Wales</td>
<td>4.93</td>
<td>10</td>
<td>1.02 (0.95 to 1.10)</td>
<td>3.00</td>
<td>11</td>
<td>0.83 (0.75 to 0.91)</td>
</tr>
<tr>
<td>Canada</td>
<td>5.05</td>
<td>12</td>
<td>1.00</td>
<td>2.49</td>
<td>6</td>
<td>1.00</td>
</tr>
<tr>
<td>Malta</td>
<td>5.92</td>
<td>13</td>
<td>0.85 (0.57 to 1.29)</td>
<td>4.64</td>
<td>17</td>
<td>0.54 (0.34 to 0.86)</td>
</tr>
<tr>
<td>Estonia</td>
<td>6.29</td>
<td>14</td>
<td>0.80 (0.65 to 1.00)</td>
<td>4.38</td>
<td>15</td>
<td>0.57 (0.44 to 0.74)</td>
</tr>
<tr>
<td>Hungary</td>
<td>6.60</td>
<td>15</td>
<td>0.77 (0.69 to 0.84)</td>
<td>3.67</td>
<td>14</td>
<td>0.68 (0.59 to 0.78)</td>
</tr>
<tr>
<td>Poland</td>
<td>6.77</td>
<td>17</td>
<td>0.75 (0.69 to 0.80)</td>
<td>4.60</td>
<td>16</td>
<td>0.54 (0.49 to 0.60)</td>
</tr>
<tr>
<td>United States</td>
<td>6.70</td>
<td>16</td>
<td>0.75 (0.71 to 0.80)</td>
<td>3.50</td>
<td>12</td>
<td>0.71 (0.65 to 0.78)</td>
</tr>
<tr>
<td>Latvia</td>
<td>9.38</td>
<td>18</td>
<td>0.54 (0.46 to 0.63)</td>
<td>7.74</td>
<td>18</td>
<td>0.32 (0.27 to 0.39)</td>
</tr>
</tbody>
</table>

* Infant mortality rates expressed per 1000 live births.

Source: Joseph KS et al. BMJ 2012
“Additionally, as in previous CPSS publications, Ontario vital statistics data were excluded from most vital statistics-based indicators due to concerns about data quality. Ontario has begun to take steps to respond to this important problem and we hope to be able to include Ontario data in national statistics in future reports. Ontario vital statistics are reported separately in Appendix H.”

Pp. 6
Proportion of unlinked infant deaths

2. Legal requirements for and process to complete live birth registration in Ontario
Legal birth registration requirements

- Live birth registration is a legal requirement in each Canadian province and territory

- A live birth is defined by the *Vital Statistics Act* as:

  “...the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life, such as 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.” (Statistics Canada)
In Ontario, as in most Canadian provinces and territories, live birth registration requires completion of **2 forms**:

1. one from primary care provider
2. one from parents
Complete live birth registration in ON

- Hospital: “Notice of Live Birth”
- Parents: “Statement of Live Birth”
- ServiceOntario: Office of the Registrar General
- Registered Event
- Statistics Canada
- National Vital Statistics
Incomplete live birth registration in ON

Hospital: “Notice of Live Birth”

Parents: “Statement of Live Birth”

ServiceOntario: Office of the Registrar General

Unregistered Event

Statistics Canada

National Vital Statistics
Why are some births unregistered?

- Not well understood why the proportion of unlinked infant deaths has consistently been so much higher in Ontario compared with other Canadian provinces/territories.

- CPSS:
  - The majority of “missing” live birth registrations for infant deaths are for infants who die in hospital, deaths during the neonatal period, and deaths due to causes that are specific to the perinatal period (e.g., short gestation, respiratory distress, low birth weight, hypoxia).
  - These findings suggest that a large number of the unlinked infant deaths arise following complicated pregnancies/births.
Why are some births unregistered?

- **BORN 2010 Survey:**
  - Conducted an informal survey of obstetrical units and NICUs in 77 Ontario hospitals to ask about policies/practices regarding live birth registration of healthy babies and babies who die in the hours/days after birth
  - Some hospitals provide specific support through live birth registration to parents who have experienced a neonatal death, but many do not (~33%)
  - Only 6% of the 77 responding hospitals ensured that parents completed the live birth registration prior to discharge for **all** babies
Why are some births unregistered?

- BORN 2010 Survey contd:
  - Grieving parents may not know of the requirement to register the live birth, in addition to the death, when their baby dies shortly after birth
  - Some care providers have told us it is very difficult to approach bereaved parents to ensure they complete the live birth registration
3. Strategies to facilitate completion of live birth registration regardless of birth outcome
Between 2006 and 2009, ServiceOntario implemented an electronic newborn registration system that has made it easier for parents to register a birth and eliminated fees for registration (www.ontario.ca)
Potential solutions

- Short term:
  - BORN and PCMCH work with hospitals to make changes to birth registration practices in hospitals
  - E.g., Alberta has implemented a province-wide policy to ensure that live birth registration takes place in hospital in situations involving a neonatal death
  - Alberta has additionally implemented a province-wide policy that all registrations be completed in hospital prior to discharge of the mother
Potential solutions

- **Long term:**
  - First, evaluate whether birth registration system changes and hospital-level registration practices have decreased the number of unlinked infant death registrations in Ontario
  - If required, collaboration between BORN, PCMCH, ServiceOntario, and MOHLTC to identify other strategies
4. Recommended *Birth Registration Policy* Template for Organizations
# Policy template

**Introduction:**

This policy template, completed by PCMCH in partnership with BORN Ontario, supports the establishment of organizational policies and procedures to ensure that all live births are registered in Ontario.

**Definitions:**

Live Births: as defined by the World Health Organization (WHO), 2010 is the process where there is complete expulsion or extraction all products of conception showing signs of life (i.e. breathing, having heartbeat, movement of voluntary muscles etc) after birth regardless of duration of pregnancy/gestational age, and birth weight.

Birth Registration: is the process by which a newborn’s birth is recorded in the civil register by the government authority. It provides the first legal recognition of the child and is required by law. A registration is generally required to obtain a birth certificate, a social insurance number and any other rights or legal documents.

Registering all live births assists with the accurate measurement and reporting of both live births and infant mortality rates. This includes those infants who die within the first few minutes, hours or days following birth, regardless of their gestational age.
This proposed policy is intended to facilitate live birth registration of deceased infants prior to parental discharge from hospital.

It does not include the acquisition of a birth certificate or any related legal documents.
Policy template

- PCMCH and BORN Ontario request that each Ontario hospital that provides birthing services put in place, as part of the approach to supporting bereaved parents of newborns, a policy and accompanying mechanisms to assist these parents with completion of the second portion of the live birth registration process prior to maternal discharge from hospital.
What can you do?

1. Ensure that all care providers and staff who support bereaved parents understand that **live birth registration is legally required** even for babies who die within a short period after birth.

2. As soon as possible, implement **special assistance** with this task for families who experience an early neonatal death.
How can you do this?

1. Birth Registration Policy Template for Organizations

2. Have care providers attend this webinar on June 7th, or host a staff in-service to ensure that staff working with bereaved parents understand birth registration requirements and processes.

3. Contact your BORN Ontario Regional Coordinator to assist with strategies regarding implementation.
References (I)


References (II)


- Statistics Canada. Deaths 2006. Catalogue no. 84F0211X.

- Statistics Canada. Table 102-0507 - Infant deaths and mortality rates, by age group, Canada, provinces and territories, annual, CANSIM (database). http://www.statcan.gc.ca/pub/82-221-x/2011002/tblstructure/1hs/1de/de1imx-eng.htm.
Q 1  **What information is included on the parental form?**

A  In order to complete the form, the parent will need to know:

- The child’s date of birth
- The child’s first, middle (if applicable), and last names
- Birth mother’s maiden name
- Name of the hospital or birthing centre where the birth took place*
- Name of the person attending the birth*
- Weight of the child (either grams or pounds)*
- Duration of the pregnancy in weeks*

* Indicates that the information can be found on the hospital release form.

Note: Form 2 can only be used for up to 5 children (quintuplets).

See Appendix A.

Q 2  **Why can’t a hospital staff member complete this information rather than have the bereaved parent do it?**

A  This is a legal document and therefore must be signed by each parent whose information is included on the form. Hospital personnel may assist the parents in completing the form however the parent(s) must certify that the statements made on the form are true and correct. They must also certify that they were present during the completion of the entire form and have not allowed another person to complete it for them.

If both parents are incapable, or the mother is incapable and the father is unknown to or unacknowledged by the mother and there is no “other parent” the statement may be completed and signed by an informant acting on the mother’s behalf. In the rare instance that one of the parents is completely unavailable, there are two options for completing the registration. The parents may complete the hard copy registration once both are available, or the available parent can complete the registration before discharge, and apply to have it amended to include the information of the other parent. In the second instance, a $37 amendment fee applies. It is an offense to sign someone else’s name on the form. Information on statutory declarations is provided at the end of the online application. You may contact the municipality where the child’s birth took place.

The online application takes approximately 20-25 minutes to complete and must be completed in one session (information cannot be saved).
<table>
<thead>
<tr>
<th>Q 3</th>
<th>Do parents have the option of either online registration or hard copy as not all hospitals have online access?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Yes, parents can complete a hard copy registration (see Appendix A), known as Form 2 under the Vital Statistics Act, issued by the attending health care professional at birth. Once complete, it can be mailed to the Registrar General using the address at the top of the form. It can also be handled by a municipal clerk, but a fee may apply.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Q 4</th>
<th>Do parents have to provide the name of the infant for registration to occur?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Yes, Service Ontario will not accept the application without the child’s full name. For babies who pass away soon after birth, the parents can provide a generic forename (i.e. ‘Baby Girl’) on the registration to ensure it is completed before they leave the hospital. The parents whose information is on the registration have the option to amend the forename at a later date however a fee of $37 will apply.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Q 5</th>
<th>Are there future plans to evaluate this process and the impact on improved registration completion?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Yes - evaluation is a critical step to measure the impact of these system changes on improving the complete registration process and for informing future initiatives.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Q 6</th>
<th>Which professionals can assist parents in completing live birth registration?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Your organizational policy should identify which staff members are available to complete this process with the parents.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Q 7</th>
<th>Language and literacy may be a barrier for parents. What can be done to assist them?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Interpreter services/language lines can be used to support parent(s) at the time the application is completed.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Q 8</th>
<th>Parents traditionally have about a month to register a birth, and, in that time need to be able to provide a name. How will parents be forewarned to have a name available in this instance?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>If parents have not chosen a name they may wish to delay completion of registration until they are home and have a name confirmed. If the child has died in hospital, they will have to assign a name in order to complete the form prior to discharge. The parents may, however, provide a generic name (i.e. ‘Baby Girl’). If they wish to amend the registration at a later date, for example to replace “Baby Girl” with a name, a fee of $37 will apply.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Q 9</th>
<th>Do live birth registrations differ from stillbirth forms and death registrations, considering the latter are done through city hall?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Yes. Stillbirth forms are completed by the hospital and submitted to the Ontario Registrar General and the parents are not required to complete a live birth registration.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Q 10</th>
<th>Is it necessary to ensure all parents complete the registration before discharge, even if there is no loss?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>While it is optimal to phase in birth registration before hospital discharge as is done in other provinces, the most urgent need is to get completed birth registration for those babies who die shortly after birth or in the NICU. For sites with a large birth volume and a fair number of infant deaths, this would be a huge first step and an important process to get under way.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Q 11</th>
<th>Is there a timeline for sites to follow in terms of ensuring birth registration for all births before discharge?</th>
</tr>
</thead>
</table>
A There is currently no implementation date proposed. The webinar was to bring this issue to the attention of the hospitals and ask that they consider how to go about implementing such a policy in their site(s). That being said, the sooner hospitals put this into place, the sooner Ontario will have improved data.

Q 12 What is the role of a surrogate (birth parent) in registering the birth? Who is required to complete the form — the birth parent or the intended parent?

A The birth mother must register the birth. In this case, the “other parent” section of the form is left blank. An application can be made to the Registrar General to amend the registration after the birth has been registered. Either the surrogate can apply for the amendment, or the intended parents (if they are considered the legal parents) can apply. The Registrar General’s office will then conduct a follow-up to ensure the registration is amended to include the information of the legal parents of the child. Seeking counsel from a family lawyer may be warranted in this instance.

There is an “other parent” section of the form which can be used for a non-biological parent where the child was born from assisted conception with an anonymous sperm donor. An “other parent” can only be named on the birth registration if he/she is acknowledged by the mother and he/she agrees to be named on the birth registration. There is a supplementary form that must also be completed which is not available online. Service Ontario will mail out this form when requested. Service Ontario can be contacted at 416-325-8305 or 1-800-461-2156 for further information.

Supporting documentation will be required if:

- Only the birth mother is signing and wants to include the information of the biological father or other parent on the birth registration form
- The biological father or other parent is signing but the birth mother is incapable of signing due to illness or death
- Neither of the parents are signing
Live Birth Registration Webinar

Webinar Questions & Answers (June 7th, 2012)

1. Question:

*What information is included on the parental form?*

Answer:

In order to complete the form, the parent will need to know:

- The child’s date of birth
- The child’s first, middle (if applicable), and last names
- Birth mother’s maiden name
- Name of the hospital or birthing centre where the birth took place*
- Name of the person attending the birth*
- Weight of the child (either grams or pounds)*
- Duration of the pregnancy in weeks*

* Indicates that the information can be found on the hospital release form.

Note: Form 2 can only be used for up to 5 children (quintuplets).

See attached form.

2. Question:

*Why can’t a hospital staff member complete this information rather than have the bereaved parent do it?*

Answer:
This is a legal document and therefore must be signed by each parent whose information is included on the form. Hospital personnel may assist the parents in completing the form however the parent(s) must certify that the statements made on the form are true and correct. They must also certify that they were present during the completion of the entire form and have not allowed another person to complete it for them.

If both parents are incapable, or the mother is incapable and the father is unknown to or unacknowledged by the mother and there is no “other parent” the statement may be completed and signed by an informant acting on the mother’s behalf. In the rare instance that one of the parents is unavailable, there are two options for completing the registration. The parents may complete the hard copy registration once both are available, or the available parent can complete the registration before discharge, and apply to have it amended to include the information of the other parent. In the second instance, the $37 amendment fee applies. It is an offense to sign someone else’s name on the form. Information on statutory declarations is provided at the end of the online application. You may contact the municipality where the child’s birth took place.

The online application takes approximately 20-25 minutes to complete and must be completed in one session (information cannot be saved).

3. **Question:**

   *Is there a way for health care providers to complete Form 1 (Notice of Live Birth) electronically?*

   **Answer:**

   Health care providers can use the ehealthontario portal to complete Form 1, the Notice of Live Birth. They (or their organization) will need a login, which they can obtain from registering with the ehealth portal. Once they are in the portal, simply searching “eNLB” (electronic Notice of Live Birth) will bring up a link that leads them to the ‘apps’ page. From here, they can select eNLB and proceed to complete and submit Form 1 electronically.

   The portal can be found at [www.ehealthontario.ca](http://www.ehealthontario.ca)

4. **Question:**

   *Do parents have the option of either online registration or hard copy as not all hospitals have online access?*

   **Answer:**

   Yes, parents can complete a [hard copy registration](http://www.ehealthontario.ca), known as Form 2 under the Vital Statistics Act, issued by the attending health care professional at birth. Once complete, it can be mailed to the Registrar General using the address at the top of the form. It can also be handled by a municipal clerk, but a fee may apply.
5. Question:

*Do parents have to provide the name of the infant for registration to occur?*

Answer:

Yes, Service Ontario will not accept the application without the child’s full name. For babies who pass away soon after birth, the parents can provide a generic forename (i.e. ‘Baby Girl’) on the registration to ensure it is completed before they leave the hospital. The parents whose information is on the registration have the option to amend the forename at a later date however the fee of $37 will apply.

6. Question:

*Are there future plans to evaluate this process and the impact on improved registration completion?*

Answer:

Yes - evaluation is a critical step to measure the impact of these system changes on improving the complete registration process and for informing future initiatives.

7. Question:

*Which professionals can assist parents in completing live birth registration?*

Answer:

Your organizational policy should identify which staff members are available to complete this process with the parents.

8. Question:

*Language and literacy may be a barrier for parents. What can be done to assist them?*

Answer:

Interpreter services/language lines can be used to support parent(s) at the time the application is completed.

9. Question:

*Parents traditionally have about a month to register a birth, and, in that time need to be able to provide a name. How will parents be forewarned to have a name available in this instance?*

Answer:

If parents have not chosen a name they may wish to delay completion of registration until they are home and have a name confirmed. If the child has died in hospital, they will have to assign a name in
order to complete the form prior to discharge. The parents may, however, provide a generic name (i.e. ‘Baby Girl’). If they wish to amend the registration at a later date, for example to replace “Baby Girl” with a name, a fee of $37 will apply.

10. Question:

Do live birth registrations differ from stillbirth forms and death registrations, considering the latter are done through city hall?

Answer:

Yes. Stillbirth forms are completed by the hospital and submitted to the Ontario Registrar General and the parents are not required to complete a live birth registration.

11. Question:

Is it necessary to ensure all parents complete the registration before discharge, even if there is no loss?

Answer:

While it is optimal to phase in birth registration before hospital discharge as is done in other provinces, the most urgent need is to get completed birth registration for those babies who die shortly after birth or in the NICU. For sites with a large birth volume and a fair number of infant deaths, this would be a huge first step and an important process to get under way.

12. Question:

Is there a timeline for sites to follow in terms of ensuring birth registration for all births before discharge?

Answer:

There is currently no implementation date proposed. The webinar was to bring this issue to the attention of the hospitals and ask that they consider how to go about implementing such a policy in their site(s). That being said, the sooner hospitals put this into place, the sooner Ontario will have improved data.

13. Question:

Do other provinces have the same (or similar) registration process as Ontario for registering neonatal death?

Answer:

Yes. The Vital Statistics department of each provincial government requires a live birth registration, followed by a death registration. There is no way to combine the registration of the birth with the
registration of the death, even if they happen within minutes of each other. The live birth registration must be completed by the parents, and the death registration must be processed by a funeral home.

14. Question:

**What is the process for registering a live birth when the birth weight is less than 500 grams?**

**Answer:**

ServiceOntario recommends the paper version of the live birth registration be completed by the parents in this instance, as the system is unable to recognize a birth weight below 500g. If, however, on-line registration is the most viable option for the parents in registering the birth, they may enter 500g and a follow-up will be conducted by the Office of the Registrar General to clarify the discrepancy between the Notice of Live Birth (completed by the attendant) and the registration.

15. Question:

**Is feedback given to either parents or hospitals if the registration is incomplete or missing?**

**Answer:**

When the birth registration is completed on-line, it cannot be submitted if there is incomplete or missing information. If an incomplete paper registration is filed by the parents, follow-up to complete the form either by phone or by mail will be conducted by the Office of the Registrar General.

There is no follow-up conducted if Form 2 is never filed by the parents. Neglecting to register the birth will prevent the child from being eligible for a social insurance number, birth certificate, health card number, and many other social services. It will also prevent the parents from being able to receive tax benefits and credits for the child whose birth is unregistered. If the birth remains unregistered when the mother is discharged from the hospital, it is recommended that the registration be completed on-line no more than thirty days after the birth. The parents do have the opportunity to postpone registering the birth on-line up to one year after the birth, at which time they must contact the Office of the Registrar General.

16. Question:

**Is it possible to register the death of a neonate on-line?**

**Answer:**

While it is possible to obtain a Death Certificate on-line, it is not possible to register any death on-line. Death registration must be completed by contacting a funeral home. The funeral home is responsible for processing these registrations and submitting this information to ServiceOntario and the Office of the Registrar General.
17. Question:

*What is the process for registering a stillbirth?*

Answer:

The Notice of Stillbirth must be completed by the attendant. This can be done on-line by visiting the ehealthontario portal. They (or their organization) will need a login, which they can obtain from registering with the ehealth portal. The portal can be found at [www.ehealthontario.ca](http://www.ehealthontario.ca). The parents do not need to register the birth.

18. Question:

*What is the process for registering a birth when the pregnancy is terminated after 20 weeks? For example, when a serious anomaly is discovered after the 18-20 week ultrasound and the pregnancy is terminated a few weeks later, the intention is that there be a stillbirth. But, in some cases, the baby is born alive. What is the protocol considering that there was never an intention for the baby to be born alive after the decision to terminate the pregnancy has been made?*

Answer:

In this case, Form 1 (the Notice of Live Birth) must be completed by the attendant, and Form 2 (Registration) must be completed by the parents. If there is a neonatal death, it must be registered separately from the birth by a funeral home.

For entry into the BORN system and our ability to do infant mortality rate calculations, BORN allows users to specify whether the live birth and neonatal death happened under the circumstance of intended termination. All sites have been instructed to indicate that there was an intention to terminate the birth. For this reason, late terminations that end in a live birth will not affect infant mortality rate calculations in Ontario if they are done using BORN data.

19. Question:

*What is the role of a surrogate (birth parent) in registering the birth? Who is required to complete the form ----the birth parent or the intended parent?*

Answer:

The birth mother must register the birth. In this case, the “other parent” section of the form is left blank. An application can be made to the Registrar General to amend the registration after the birth has been registered. Either the surrogate can apply for the amendment, or the intended parents (if they are considered the legal parents) can apply. The Registrar General’s office will then conduct a follow-up to ensure the registration is amended to include the information of the legal parents of the child. Seeking counsel from a family lawyer may be warranted in this instance.
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**Ontario**
Office of the Registrar
Registered in Canada

**Statement of Live Birth**

**Filing 2**

**User:** December 31, 2023

**Section A: General Information**

<table>
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<th>Item</th>
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**Section B: Child's Information**

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**Section C: Parental Information**

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<td>Father</td>
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**Section D: Additional Information**

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**Section E: Declaration**

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<tr>
<td>Declaration</td>
<td>I declare that the information contained in this document is true and complete to the best of my knowledge.</td>
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**Section F: Certification**

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**Section G: Registration**

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Ontario

Statement of Live Birth - IMPORTANT Instructions

General Information

A. This document is a permanent legal record. The person who completes the form and signs it agrees to be bound by its contents. Failure to sign and date the form may result in delays in obtaining birth certificates and other related documents.

B. It is important to provide accurate and complete information on this form. Any errors or omissions may delay the process and may result in additional fees.

C. The information provided on this form will be used by the Office of the Registrar of Births, Deaths, and Marriages to register the birth of the child. The information will also be used to prepare birth certificates and other related documents.

D. The information provided on this form will be protected and used in accordance with the principles of the Freedom of Information and Protection of Privacy Act.

E. The information provided on this form will be kept confidential and will not be disclosed to any third party without your consent, except as required by law.

F. If you make a mistake when filling out the form, you must correct it and sign and date the corrected form. Use a black or blue ink pen.

G. The form must be completed and returned to the Office of the Registrar of Births, Deaths, and Marriages within 60 days of the child's birth.

Child's Name

A. The child's name must be entered in the space provided. The name should be spelled correctly and should include any middle names or initials.

B. The child's address must be entered in the space provided. The address should include the city, province, and postal code.

C. The child's sex must be entered in the space provided. The sex should be entered as male or female.

D. The child's date of birth must be entered in the space provided. The date of birth should include the month, day, and year.

Mothers' Information

A. The mother's name must be entered in the space provided. The name should be spelled correctly and should include any middle names or initials.

B. The mother's address must be entered in the space provided. The address should include the city, province, and postal code.

C. The mother's date of birth must be entered in the space provided. The date of birth should include the month, day, and year.

D. The mother's occupation must be entered in the space provided. The occupation should be listed accurately.

E. The mother's race must be entered in the space provided. The race should be entered as White, Black, Asian, Indigenous, or Other.

F. The mother's marital status must be entered in the space provided. The marital status should be entered as Single, Married, or Widowed.

Father's Information

A. The father's name must be entered in the space provided. The name should be spelled correctly and should include any middle names or initials.

B. The father's address must be entered in the space provided. The address should include the city, province, and postal code.

C. The father's date of birth must be entered in the space provided. The date of birth should include the month, day, and year.

D. The father's occupation must be entered in the space provided. The occupation should be listed accurately.

E. The father's race must be entered in the space provided. The race should be entered as White, Black, Asian, Indigenous, or Other.

F. The father's marital status must be entered in the space provided. The marital status should be entered as Single, Married, or Widowed.

Personal Information

A. The information provided on this form must be complete and accurate. Any errors or omissions may result in delays in obtaining birth certificates and other related documents.

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D. If you make a mistake when filling out the form, you must correct it and sign and date the corrected form. Use a black or blue ink pen.

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