

Matters of Record



Baby schwimmen, by Thomas Grunert, flickr gallery, <https://www.flickr.com/photos/grutho/8465256706/>

News from the Center for Health Statistics Concerning the Oregon Birth Certificate

July 2014

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[Archived articles online](#)

What you need to know about fetal death disposition permits

Fetal deaths occur infrequently; therefore, hospital staff may not handle these cases regularly or know what to do when the situation arises. Additionally, disposition permit laws can be confusing to understand. This makes the reporting and handling of fetal deaths challenging. In this article, we hope to clear up any confusion you may have about fetal death dispositions.

All fetal death reports are completed in OVERS by birth clerks if the fetal death occurs in either of the following scenarios: a) in a medical facility, or b) outside of a facility without a doctor in attendance,

“When birth clerks complete the fetal death report, they should also print a completed disposition permit and provide it to the funeral home.”

but the mother or fetus was later transported to a medical facility for medical attention. Funeral home staff never complete the reports. When birth clerks complete the fetal death report, they should also print a completed disposition permit and provide it to the funeral home.

Anytime funeral home staff or parents pick up a fetus from a medical facility, whether the fetal death is reportable or not, a disposition permit must accompany the fetal remains. This permit is required for burial or cremation.

To locate the disposition permit, go to the OVERS main menu, select “Forms,” click on “Print Forms,” then click on

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Fetal death disposition permits (Continued from page 1)

"Fetal Death Disposition Permit" (45-3D). You can then print the permit form. Please share this information with other hospital staff that assist with fetal death reports. Additional information, including fetal death laws and definition are available on our website located at:

<http://public.health.oregon.gov/BirthDeathCertificates/RegisterVitalRecords/Documents/Fetal%20Death%20Info/fetdthinstr.pdf>

If you have any additional questions, please contact Cynthia Roeser, Data Entry Supervisor, by email at cynthia.r.roeser@state.or.us, or by telephone at 971-673-0478. ❖

Attendant reporting for C-section births

Staff at The Center for Health Statistics routinely conduct Quality Assurance (QA) checks on all birth records to ensure accurate and consistent reporting of Oregon births. Recent QA checks show the type of birth attendant is often listed incorrectly on C-section deliveries. Remember, the **attendant** at birth is the individual responsible for the **final delivery of the child**. A C-section is a surgical procedure,



and can only be performed by a licensed physician. **This means the attendant listed on C-section deliveries must be either a Doctor of Medicine (MD) or a Doctor of Osteopathic Medicine (DO).** No other attendant types are acceptable for C-section deliveries.

Please share this important message with other staff who provide information for the birth record. Your assistance is greatly appreciated!

If you have any questions, please contact Cynthia Roeser, Data Entry Supervisor, by email at cynthia.r.roeser@state.or.us or by telephone at 971-673-0478. ❖

Efficient electronic amendments

You can help us process electronic amendments more quickly by including all corrections for a birth record in a single amendment request by amendment type. Before starting an amendment, identify all the items requiring correction in the legal or statistical section of the record. After selecting and saving your amendment type, open each birth record page, make changes and save. Repeat this step until you have entered all the legal items or statistical corrections for the record. If you have finished keying and saving your amendment,

review for accuracy and completeness before submitting it for approval.

Submitting one amendment instead of multiple amendments is quicker for you to enter, and quicker for our office to approve. A single amendment reduces the number of duplicate amendments that must be canceled later. It also saves time if we only need to review and edit the footnote that prints on a birth record once instead of multiple times. If you would like to see the instructions for completing an amendment with screen shots,

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Efficient electronic amendments (Continued from page 2)

please see the training manual on the OVERS web page at:

http://public.health.oregon.gov/BirthDeathCertificates/RegisterVitalRecords/overs/Documents/ebrs_ch4.pdf

Helpful information for phone messages or emails

Oregon's Vital Records staff assist customers throughout the state. We receive many phone calls and emails every day. To better assist you, we ask that you clearly identify yourself when contacting Vital Record's employees. Important information to provide when leaving a voice message or sending an email includes the following: your first and last name, facility name, and a return phone number. Please also provide us with information related to the vital event such as case id, the name on the record, date of the event, and a brief explanation of your

Vital records order forms

When new parents want to order a birth certificate for their infant, they often contact the hospital for assistance. Since we all want to be helpful and provide the best customer service possible, it is important for hospital staff to provide customers with the most up-to-date order forms to avoid delays.

The order forms were updated in 2012. We now require the applicant's signature and a copy of their current valid

"Please make sure the forms you have require a signature and ID."

identification. Additionally, the state started charging for the commemorative certificate of stillbirth. We can no longer process orders using older forms (prior to 2012). Please make sure the forms you have require a signature and ID.

You may also call the OVERS help desk or request assistance from Amanda Vega at 971-673-1169. ❖

problem or question. This allows us to have the case or your hospital information up on our computer screens, and to do research before we return your phone call or email. This will minimize the amount of time you are kept on hold, and create faster and better responses to your questions or concerns. ❖



An incomplete order form requires us to contact the customer directly (first by telephone or email). If contact is not made, a letter is sent to the customer requesting the required information or documentation. This creates extended delays for orders and unhappy customers for all of us.

Please review the "Birth Record Order" forms and the "Certificate of Stillbirth Order" forms you currently have. If they are older than 2012, discard them.

The link to the most current state vital record birth and stillbirth order forms can be found at: <http://public.health.oregon.gov/BirthDeathCertificates/GetVitalRecords/Pages/forms.aspx>. You can order a supply of forms by contacting Eddy Conrad-Wiggins

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Vital records order forms (Continued from page 3)

at 971-673-1180 or at edward.conrad-wiggins@state.or.us. Forms can also be ordered by completing the Forms order form at <http://public.health.oregon.gov/BirthDeathCertificates/RegisterVitalRecords/Documents/45-43.pdf>.

Providing the correct forms to customers will help us process vital record orders in a timely manner and maintain the level of customer satisfaction we are all known for. We greatly appreciate your assistance! ❖



Reminder: “Parent/Parent” birth certificates available to recognize same-sex marriages

A birth mother, legally married to a same-sex spouse, may list her spouse as the second parent at the time of birth. Marital status should be entered as “married” on the birth record. Proof of marriage is not required.



The birth record [Our first mother's day](#), by Essie, flickr gallery will print with the titles “Mother” and “Father” for the parents **unless** you request a change to the record. In some instances, certain agencies scrutinize the birth record when parents are the same sex and have a record with the “Mother/Father” titles.

Please ask same-sex parents if they would like the birth certificate to print “Parent/Parent” rather than “Mother/Father” when they purchase the birth certificate from Vital Records. If the parents would like this adjustment made to the birth record, call our OVERS Help Desk at 971-673-0279. Please inform the Help Desk that the parents requested a “Parent/Parent” certificate and provide us with the case id number and the child’s name.

There is no change to how Oregon registered domestic partners are listed on a birth certificate, or to how two men who are either legally married or in a domestic partnership are listed on a birth record. Out-of-state registered domestic partnerships are not recognized in Oregon and cannot be listed as such on a birth record. ❖

Paternal rights and responsibilities - update

The law requires that each parent *hear* the rights and responsibilities on the paternity acknowledgment affidavit forms (45-21 or 45-31) before signing the form. There are several ways this could happen:

- parents reading the right and responsibilities to each other;
- someone else reads the rights and responsibilities to both parents; or
- parents listening to or watching a video of someone stating the rights and responsibilities.

Several years ago (2007) CHS and the Division of Child Support worked together to distribute DVDs containing the required ‘Rights and Responsibilities’ on the paternity forms (45-21 and 45-31). Changes in law have made those DVDs obsolete, and they should no longer be used.



With changes in technology, DVDs are no longer produced. Instead, the internet is used to deliver the information. Current versions of the video are available online at the following links:

http://www.youtube.com/watch?feature=player_embedded&v=rhKVvJw50IE (English) and <http://www.youtube.com/watch?v=pI67APUIRpM> (Spanish). ❖

Paternity establishment percentage - update

Over the years, the newsletter topic of paternity establishment repeats from time to time because it continues to be an important issue in Oregon.

Having two parents on a child's birth certificate is important to the child and parents. In addition, establishing paternity for at least 90% of births to unwed mothers

Are you using our new white paternity envelopes? This helps us get the birth records registered more quickly. Order yours today at: <http://bit.ly/form45-43>

provides additional benefit dollars for the Temporary Assistance for Needy Families (TANF) program. Oregon barely *meets* the minimum with a preliminary paternity establishment of 90 percent.

Participation by birth hospitals remains essential. More than 75 percent of the established paternities in Oregon started at the hospital with an acknowledgment of paternity. We need facilities to average 80 percent of the current births to unwed mothers to be confident we can meet the federal requirement of 90 percent. The remaining paternity establishments come from administrative orders, notarized paternity acknowledgments, and court orders.

The Division of Child Support (DCS) continues to be a strong partner in paternity establishment. DCS staff help parents complete an affidavit if both were not

available at the hospital or if the original acknowledgment cannot be accepted. If you have a paternity acknowledgment you believe cannot be accepted, please forward the form to our office. We will follow up with the family if we know they are interested in establishing paternity. If parents contact you after leaving the hospital, please tell them to contact The Center for Health Statistics, their local DCS office, or one of the people listed at the end of this article. Information is also available online at <http://www.oregonchildsupport.gov/services/pages/paternity.aspx> including contact information for each DCS office.

We would like to recognize the facilities that met or exceeded the 80 percent goal in the six-month period from October 2013 through March 2014.

Facilities with **more than 500 births** to unwed mothers in the six-month period:

- Providence St. Vincent Medical Center

Facilities with **100 to 499 births** to unwed mothers in the six-month period:

- Silverton Hospital
- Kaiser Sunnyside Medical Center
- St. Charles Medical Center – Bend
- Providence Willamette Falls Medical Center
- Samaritan Albany General Hospital

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Facilities with **fewer than 100 births** to unwed mothers in the six-month period:

- Legacy Good Samaritan Hospital and Medical Center
- Providence Newberg Medical Center
- Providence Hood River Memorial Hospital
- Mid-Columbia Medical Center
- Samaritan Lebanon Community Hospital
- Columbia Memorial Hospital
- Grande Ronde Hospital
- St. Charles Medical Center – Madras
- Asante Ashland Community Hospital
- Ashland Community Hospital
- Lake District Hospital
- Blue Mountain Hospital
- Curry General Hospital

Freestanding birthing centers:

- Andaluz Waterbirth Centers– Portland *and* Tualatin
- Growing Family Birth Center
- Home Sweet Home Birth Center
- Trillium Waterbirth Center – Medford *and* Redwood Clinic
- Sacred Waters Birthing Center
- PeaceHealth Medical Group Nurse Midwifery Birth Center

At the end of this article, we have included a table reporting the paternity establishment percentages by facility.

Please keep up the good work. If you want to increase the number of paternities at your facility, talk with us about how we can work together to establish paternities more effectively.

Call us with any questions or for more information:

- Judy A. Shioishi, Vital Records Field Liaison, at 971-673-1166
- Debbie Gott, Vital Records Paternity Specialist, at 971-673-1155
- Bill Cooksey, Child Support Performance Analysis Manager, at 971-673-1681

Paternity establishment percentage - update

Paternity establishment by birth facility for birth October 2013 through March 2014				
County and Facility		Total Unwed Births	AOP signed at hospital	
		Count	Count	%
Statewide		7,766	5,928	76.3%
Baker	Saint Alphonsus Medical Center - Baker City, Inc.	27	17	63.0%
Benton	Good Samaritan Regional Medical Center	115	90	78.3%
Clackamas	Kaiser Sunnyside Medical Center	268	215	80.2%
	Legacy Meridian Park Hospital	122	88	72.1%
	Providence Willamette Falls Medical Center	175	142	81.1%
Clatsop	Columbia Memorial Hospital	56	45	80.4%
	Providence Seaside Hospital	15	11	73.3%
Coos	Bay Area Hospital	178	135	75.8%
Curry	Curry General Hospital	1	1	100.0%
Deschutes	Bend Birth Center	2	1	50.0%
	St. Charles Medical Center - Bend	260	214	82.3%
	St. Charles Medical Center - Redmond	80	61	76.3%
Douglas	Mercy Medical Center, Inc.	231	176	76.2%
Grant	Blue Mountain Hospital	6	5	83.3%
Harney	Harney District Hospital	6	3	50.0%
Hood River	Providence Hood River Memorial Hospital	72	60	83.3%
Jackson	Asante Ashland Community Hospital	32	27	84.4%
	Asante Rogue Regional Medical Center	336	250	74.4%
	Ashland Community Hospital	17	16	94.1%
	Providence Medford Medical Center	95	71	74.7%
	Trillium Waterbirth Center	3	3	100.0%
Jefferson	St. Charles - Madras	42	34	81.0%
Josephine	Asante Three Rivers Medical Center	184	146	79.3%
	Trillium Waterbirth Center - Redwood Clinic	3	3	100.0%

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Paternity establishment by birth facility (Continued from page 7)

Klamath	Sky Lakes Medical Center	179	131	73.2%
Lake	Lake District Hospital	10	9	90.0%
Lane	McKenzie-Willamette Medical Center	148	118	79.7%
	Peace Harbor Medical Center	18	12	66.7%
	PeaceHealth Medical Group Nurse Midwifery Birth Center	8	8	100.0%
	Sacred Heart Medical Center at RiverBend	549	419	76.3%
	Sacred Waters Birthing Center, Inc	4	4	100.0%
Lincoln	Home Sweet Home Birth Center, LLC	1	1	100.0%
	Samaritan North Lincoln Hospital	43	34	79.1%
	Samaritan Pacific Communities Hospital	49	38	77.6%
Linn	Growing Family Birth Center, LLC	1	1	100.0%
	Samaritan Albany General Hospital	135	115	85.2%
	Samaritan Lebanon Community Hospital	60	50	83.3%
Malheur	Saint Alphonsus Medical Center - Ontario, Inc.	151	100	66.2%
Marion	Aurora Family Health & Maternity Care Services	2	1	50.0%
	Salem Hospital	605	442	73.1%
	Santiam Memorial Hospital	26	21	80.8%
	Silverton Hospital	322	261	81.1%
Multnomah	Adventist Medical Center	209	149	71.3%
	Alma Midwifery Services, LLC	1	0	0.0%
	Andaluz Waterbirth Center - Portland	10	9	90.0%
	Legacy Emanuel Hospital & Health Center	424	284	67.0%
	Legacy Good Samaritan Hospital and Medical Center	82	66	80.5%
	Legacy Mt. Hood Medical Center	193	146	75.6%
	OHSU Hospitals & Clinics	420	321	76.4%
Providence Portland Medical Center	425	307	72.2%	
Tillamook	Tillamook Regional Medical Center	34	26	76.5%
Umatilla	Good Shepherd Medical Center	101	76	75.2%
	St. Anthony Hospital	74	55	74.3%
Union	Grande Ronde Hospital	47	38	80.9%
Wallowa	Wallowa Memorial Hospital	5	3	60.0%
Wasco	Mid-Columbia Medical Center	61	49	80.3%
Washington	Andaluz Waterbirth Center - Tualatin	1	1	100.0%
	Kaiser Foundation - Westside	129	101	78.3%
	Providence St. Vincent Medical Center	531	433	81.5%
	Tuality Community Hospital	178	126	70.8%
Yamhill	Bella Vie Gentle Birth Center	8	3	37.5%
	Providence Newberg Medical Center	81	72	88.9%
	Willamette Valley Medical Center	114	84	73.7%

Just for Midwives - Insert to Birth Matters July 2014

HB 2997 mandatory midwife licensing and birth records

House Bill (HB) 2997 passed into law in 2013, and takes effect January 1, 2015. The law requires all midwives in Oregon who do not meet the exception listed in the box below to be *licensed*. The Oregon Health Licensing Agency (OHLA) Board of Direct Entry Midwifery will administer the law. The Center for Health Statistics (CHS) will follow the Board of Direct Entry Midwifery's direction to implement the law and will cooperate with the Board to enforce it.

How does this affect birth records?

Currently, CHS allows a registered midwife who is not a licensed birth attendant to submit reports of live birth with minimal supporting documentation. Persons *who are*

not required by law to be licensed as midwives may be registered with CHS under ORS 432.088(5). After January 1, 2015, a person cannot be a CHS registered midwife unless exempt from the requirement to be licensed as a midwife.

As of January 1, 2015, births occurring outside a licensed facility must be certified by people meeting these criteria:

- a licensed birth attendant including NP, ND, and LDM;
- a CHS registered midwife if exempt from licensing; or
- a parent completing a home birth packet including evidence of residence and of the live birth.

Do you meet the licensing exception?

1. Are you a licensed health care practitioner and acting as a midwife is within the scope of duties for your practice? If yes, you do not need to be licensed as a direct entry midwife. If not, move to the next question.
2. Are you a traditional midwife? HB 2997 defines a traditional midwife as someone who:
 - Does not use legend drugs or devices; AND
 - Does not advertise as a midwife; AND
 - Discloses unlicensed status to each client on the form adopted by the Board of Direct Entry Midwifery. The form will include statements on the limitation of services, increase risk of harm, and the lack of recourse through a complaint process.

If not, you must be licensed to act as a midwife in Oregon beginning January 1, 2015.

Please see the Board of Direct Entry Midwifery and HB 2997 itself for specific information.

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What do you need to do?

If you are a LDM or other licensed health care provider, you only need to maintain a licensed status. Staff at CHS regularly check the licensing boards to confirm providers' licenses remain current.

If you meet the exception for licensing, you might still qualify to be a CHS registered midwife. We will be updating our annual enrollment form to match the exemption criteria in HB2997 to confirm eligibility.



[240 - checking in](#), by eyeliam, flickr gallery

Please note CHS considers a web page announcing availability of services and contact information to be advertising as a midwife. This means anyone who has a webpage announcing services as a birth attendant

would not be eligible to be a CHS registered midwife.

If you are not currently a licensed health care practitioner and do not meet the exception criteria, you should contact the Board of Direct Entry Midwifery for information on your options.

Resources

We will continue to share information with you as it becomes available. However, the Board of Direct Entry Midwifery at the Oregon Health Licensing Agency will lead implementation of HB 2997. Information will likely be posted on their website (<https://www.oregon.gov/OHLA/DEM/pages/index.aspx>).

If you would like to read HB 2997, it is available online at <https://olis.leg.state.or.us/liz/2013R1/Measures/Text/HB2997/Enrolled>. ❖

Wanted—Newsletter topics

Have a question or idea for a future newsletter article? Contact Judy Shioishi at 971-673-1166 or judy.shioishi@state.or.us. Judy collects ideas for articles and shares them with the writing team.

Thank you to the contributors of this newsletter:

James Burke, Becki Buskirk, Johanna Collins, Edward Conrad-Wiggins, Karen Hampton, JoAnn Jackson, Lynda Jackson, Kerry Lionadh, Krista Markwardt, Craig New, Karen Rangan, Cynthia Roeser, Carol Sanders, Judy Shioishi, Vivian Siu, Kelly Stacey, Amanda Vega, Megan Welter and Jennifer Woodward.

Frequent Contacts

Paternities Debbie Gott 971-673-1155	Filiations Tony Bojanowski 971-673-1143	State Registrar Jennifer Woodward 971-673-1185	Certification Supervisor Karen Rangan 971-673-1182
Death Corrections Patty Thompson 971-673-1163	Adoptions Debbie Draghia 971-673-1152	OVERS Manager Karen Hampton 971-673-1191	Statistics Manager Joyce Grant-Worley 971-673-1156
Birth Corrections <1 year, Amanda Vega 971-673-1169 1year +, Johanna Collins 971-673-1137	Delayed Filings Becki Buskirk 971-673-1147 OVERS Help Desk 971-673-0279	Registration Manager JoAnn Jackson 971-673-1160 Data Processing Supervisor Cynthia Roeser 971-673-0478	Amendments/Certification Manager Carol Sanders 971-673-1178

The Center for Health Statistics is located at:

800 N.E. Oregon Street, Suite 225
 Portland, OR 97232-2187

Mailing address: P.O. Box 14050
 Portland, OR 97293-0050

General information: 971-673-1180
Order vital records: 1-888-896-4988

Website:

<http://public.health.oregon.gov/BirthDeathCertificates>

OVERS website:

<http://healthoregon.org/overs>