# From the Center for Health Statistics Value of Record Of Record

# **Birth certificate news**

February 2017

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# Oregon paternity establishment percentage results

# 2015-2016 Fiscal Year

Once a year, we take time to remind you of the importance of paternity establishment and provide an update on our progress towards meeting benchmarks for facility and statewide paternity establishment percentages.

Paternity establishment is an important issue in Oregon and has implications for both the children and their parents. Additionally, meeting the paternity establishment percentage requirement of 90 percent, set by the federal government, protects benefit dollars for the Temporary Assistance for Needy Families (TANF) program.

For the 2015-2016 fiscal year (October 1, 2015, through September 30, 2016), Oregon exceeded the federal requirement with an overall paternity establishment of **91.9** percent. We could not have done this without all your hard work. **Thank you!** 

Your participation is essential. More than 75 percent of the paternities established in Oregon started at the hospital with an acknowledgment of paternity. Oregon needs facility acknowledgments of paternity to be above 80 percent for births to unwed mothers in order to be confident that, when combined with data for married mothers, we can continue to meet the federal requirement.

We would like to recognize the facilities that <u>met or exceeded the 80 percent goal</u> during the 2015-2016 fiscal year.

# Congratulations!

Facilities with **more than 500 births** to unwed mothers during the fiscal year:

- Providence St. Vincent Medical Center
- St. Charles Medical Center Bend

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Facilities with **100 to 499** births to unwed mothers during the fiscal year:

- Bay Area Hospital
- Good Samaritan Regional Medical Center
- Kaiser Foundation Hospital Westside
- Legacy Mount Hood Medical Center
- Providence Hood River Memorial Hospital
- Providence Newberg Medical Center
- St. Anthony Hospital
- St. Charles Medical Center Redmond
- Tuality Community Hospital Hillsboro

Facilities with **fewer than 100** births to unwed mothers during the fiscal year:

- Alma Midwifery Services
- Andaluz Birth Center Portland
- Andaluz Birth Center Tualatin
- Aurora Birth Center
- Blue Mountain Hospital District
- Bright Eyes Midwifery and Wild Rivers Women's Health
- Canyon Medical Center
- Growing Family Birth Center
- Home Sweet Home Birth
- Peace Harbor Medical Center
- PeaceHealth Medical Group Nurse Midwifery Birth Center
- Providence Seaside Hospital
- Sacred Waters A Community Birthing Center
- Samaritan North Lincoln Hospital
- Tillamook Regional Medical Center
- Trillium Birth Center Medford
- Wallowa Memorial Hospital

To see how your facility did this past year, we've included a table at the end of this article reporting the paternity establishment percentages by facility.

# Keep up the good work!

If you are looking for ways to increase the number of paternities at your facility, please feel free to contact us. We'd be happy to talk with you about how we can work together to establish paternities more effectively. You can also find information online at the <u>Public Health</u> Division as well as at the Division of Child Support.

# For questions or more information, please call:

### **Carol Sanders**

Vital Records, Certification and Amendments Manager 971-673-1178

### **Debbie Gott**

Vital Records, Paternity Specialist 971-673-1155

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Paternity establishment by birth facility for unwed mothers		Births to unwed mothers Was acknowledgment of paternity signed?		
County	Facility	Total	Yes	%
Baker	St. Alphonsus Medical Center - Baker City	54	34	63.00%
Benton	Good Samaritan Regional Medical Center	249	211	84.70%
Clackamas	Kaiser Sunnyside Medical Center Legacy Meridian Park Hospital Providence Willamette Falls Medical Center	698 251 333	557 191 264	79.80% 76.10% 79.30%
Clatsop	Columbia Memorial Hospital Providence Seaside Hospital	155 43	123 35	79.40% 81.40%
Coos	Bay Area Hospital	334	272	81.40%
Crook	St. Charles - Prineville	1	0	0.00%
Curry	Bright Eyes Midwifery and Wild Rivers Women's Health Curry General Hospital	3 16	3 12	100.00% 75.00%
Deschutes	Bend Birth Center St. Charles Medical Center - Bend St. Charles Medical Center - Redmond	6 528 214	3 429 178	50.00% 81.30% 83.20%
Douglas	Mercy Medical Center	420	307	73.10%
Grant	Blue Mountain Hospital District	16	14	87.50%
Harney	Harney District Hospital	23	17	73.90%
Hood River	Providence Hood River Memorial Hospital	154	124	80.50%
Jackson	Asante Ashland Community Hospital Asante Rogue Valley Medical Center Kalista Birth Sanctuary Providence Medford Medical Center Trillium Birth Center - Medford	74 725 8 204 5	58 575 0 163 5	78.40% 79.30% 0.00% 79.90% 100.00%
Jefferson	St. Charles - Madras	66	46	69.70%
Josephine	Asante Three Rivers Medical Center Trillium Waterbirth Center - Redwood Clinic	405 9	313 6	77.30% 66.70%
Klamath	Baby Catchers & Company Klamath Women's Clinic & Birth Center Sky Lakes Medical Center	3 9 391	2 7 302	66.70% 77.80% 77.20%
Lake	Lake District Hospital	16	11	68.80%
Lane	McKenzie-Willamette Medical Center Peace Harbor Medical Center PeaceHealth Medical Group Nurse Midwifery Birth Ctr Sacred Heart Medical Center - RiverBend Sacred Waters - A Community Birthing Center	450 43 26 989 5	359 35 23 777 5	79.80% 81.40% 88.50% 78.60% 100.00%

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Paternity establishment by birth facility for unwed mothers		Births to unwed mothers	Was acknowledgment of paternity signed?	
County	Facility	Total	Yes	%
Lincoln	Home Sweet Home Birth Samaritan North Lincoln Hospital Samaritan Pacific Communities Hospital	1 89 100	1 78 69	100.00% 87.60% 69.00%
Linn	Growing Family Birth Center Samaritan Albany General Hospital Samaritan Lebanon Community Hospital	10 268 157	9 207 112	90.00% 77.20% 71.30%
Malheur	St. Alphonsus Medical Center - Ontario	256	184	71.90%
Marion	Aurora Birth Center Salem Hospital Santiam Memorial Hospital Silverton Hospital	5 1438 33 641	5 1135 23 499	100.00% 78.90% 69.70% 77.80%
Multnomah	Adventist Medical Center Alma Midwifery Services Andaluz Birth Center - Portland Legacy Emanuel Medical Center Legacy Good Samaritan Medical Center Legacy Mount Hood Medical Center OHSU Hospitals and Clinics Providence Portland Medical Center	321 11 22 868 219 421 762 978	234 10 19 604 166 340 588 714	72.90% 90.90% 86.40% 69.60% 75.80% 80.80% 77.20% 73.00%
Tillamook	Tillamook Regional Medical Center	97	81	83.50%
Umatilla	Good Shepherd Medical Center St. Anthony Hospital	239 179	186 145	77.80% 81.00%
Union	Grande Ronde Hospital, Inc	110	80	72.70%
Wallowa	Wallowa Memorial Hospital	10	8	80.00%
Wasco	Mid-Columbia Medical Center	122	90	73.80%
Washington	Andaluz Birth Center - Tualatin Canyon Medical Center Kaiser Foundation Hospital - Westside Providence St. Vincent Medical Center Tuality Community Hospital - Hillsboro	4 5 274 981 356	4 5 220 802 286	100.00% 100.00% 80.30% 81.80% 80.30%
Yamhill	Andaluz - Dundee Bella Vie Gentle Birth Center Providence Newberg Medical Center Willamette Valley Medical Center	3 4 157 235	2 3 129 173	66.70% 75.00% 82.20% 73.60%

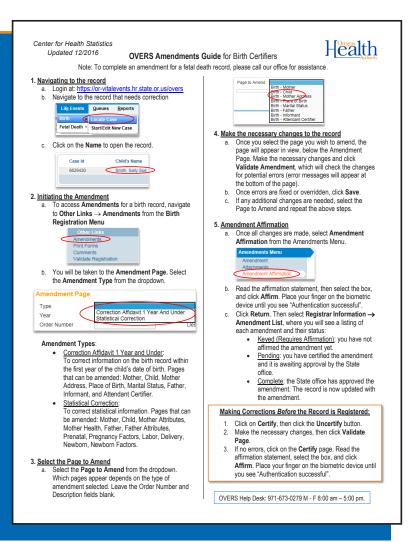
<sup>\*</sup> Statewide total includes 221 out-of-facility births

# **New Amendment Guide**

Occasionally corrections need to be made to a birth or fetal death record after it has been registered at the State. When amending a record via OVERS, multiple corrections can be submitted in one request. This can significantly shorten the processing time necessary to change a birth certificate after registration.

Instructions can be found in the new Amendment Guide located under the Birth Facility User Guides section of our website: <a href="http://public.health.oregon.gov/BirthDeathCertificates/RegisterVitalRecords/overs/Pages/UserGuides.aspx">http://public.health.oregon.gov/BirthDeathCertificates/RegisterVitalRecords/overs/Pages/UserGuides.aspx</a>

If you have questions about completing an electronic amendment through OVERS, please contact Krystalyn Salyer at 971-673-1197 or at <a href="mailto:krystalyn.salyer@state.or.us">krystalyn.salyer@state.or.us</a>.



# New national study on causes of fetal death

A fetal death is the death of a fetus before the complete extraction from the mother, regardless of the length of gestation. Induced terminations are not considered fetal deaths. Fetal deaths must be reported to the Center for Health Statistics when the fetus weighs 350 grams or more or, if weight is unknown, when gestation is 20 weeks or more.

Your accurate reporting of fetal deaths provides important data for research aimed at understanding and preventing them. Fetal deaths are rare, and their reporting is often not as consistent or detailed as the reporting of a birth or death. This makes it hard to accumulate enough data to support the kind of research we see using data from birth and death records. The National Center for Health Statistics (NCHS) recently published a study – the first of its kind – looking at the causes of fetal death. The study used data from 15,840 fetal deaths occurring in 2014 across 35 states and the District of Columbia. This article shares the findings of the study, and looks at how Oregon compared with the rest of the country.

Five causes accounted for 94 percent of fetal deaths in Oregon, and 90 percent nationally. These causes, and the percent of fetal deaths they comprise, are shown in the table below. Unspecified cause was the leading cause in both groups, accounting for 42 percent of the fetal deaths in Oregon and 30 percent nationally. The range of percentages among the states in the national sample was 18 percent to 75 percent. Complications of the placenta, cord and membranes ranked second. The third leading cause in Oregon was congenital malformations, but nationally this cause ranked fourth behind Fetus affected by maternal complications of the pregnancy.

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Table 1. Rank of the five leading causes of fetal deaths, and percentage of total fetal deaths, Oregon (2015) and the U.S. (2014)\*

Rank	Cause of death	Percent of total fetal deaths	
OR (US)	Gause of death	Oregon	U.S.
1 (1)	Unspecified cause	42%	30%
2 (2)	Complications of placenta, cord and membranes	27%	28%
3 (4)	Congenital malformations	12%	10%
4 (3)	Fetus affected by maternal complications of pregnancy	8%	14%
5 (5)	Fetus affected by maternal conditions unrelated to pregnancy	6%	8%

<sup>\*</sup> U.S. sample of fetal deaths accounts for 66% of all fetal deaths nationally. Oregon is not included in the U.S. sample. 2014 is the most recent national fetal death data that is available.

The NCHS study noted that more attention is typically paid to infant deaths, rather than fetal deaths, in part due to less knowledge on what causes fetal deaths and how to prevent them. This lack of knowledge is linked to the generally lower quality of data reported on fetal death certificates, compared to the reporting of other deaths. This is true even though, nationally, the fetal death rate is higher than the infant death rate (6.0 vs. 5.8 per 1,000 live births). This emphasizes the need for high quality, complete reporting of fetal deaths.

NCHS offers a free, web-based training on the reporting of births and fetal deaths, which includes a section devoted to reporting cause of fetal death: <a href="http://www.cdc.gov/nchs/training/BirthCertificateElearning/">http://www.cdc.gov/nchs/training/BirthCertificateElearning/</a>.

Our website also has forms, instructions, and other information about when and how to complete a fetal death record: <a href="http://public.health.oregon.gov/BirthDeathCertificates/RegisterVitalRecords/Pages/InstructionsFetalDeath.aspx">http://public.health.oregon.gov/BirthDeathCertificates/RegisterVitalRecords/Pages/InstructionsFetalDeath.aspx</a>

If you would like to see the latest statistics on fetal and infant deaths in Oregon, visit our statistics page at the address below. The data tables for the most recent annual report have been posted, and the complete annual report will be published soon. <a href="http://public.health.oregon.gov/BirthDeathCertificates/VitalStatistics/Pages/index.aspx">http://public.health.oregon.gov/BirthDeathCertificates/VitalStatistics/Pages/index.aspx</a>

If you have any questions about fetal deaths or fetal death reporting, contact JoAnn Jackson, Registration Manager, at 971-673-1160 or at <a href="mailto:joann.jackson@state.or.us">joann.jackson@state.or.us</a>.

i Hoyert DL, Gregory, ECW. Cause of fetal death: Data from the fetal death report, 2014. National Vital Statistics Reports; 65(7). Hyattsville, MD: National Center for Health Statistics 2016. <a href="https://www.cdc.gov/nchs/data/nvsr/nvsr65/nvsr65">https://www.cdc.gov/nchs/data/nvsr/nvsr65/nvsr65</a> 07.pdf

ii The most recent (2015) Oregon fetal death data was used for comparisons.

# **Trial of labor**

There continues to be confusion on how to answer the trial of labor question in OVERS. Any time the method of delivery is cesarean section, the trial of labor question must be answered with either a "Yes" or a "No". Answering "Not Applicable" is never acceptable. The instructions previously outlined in the July 2016 Birth Newsletter are being provided again below for your reference:



For all cesarean deliveries, you must report whether labor was attempted. This article will clarify how to answer the "Trial of Labor" question on the birth record.

In OVERS, the trial of labor question ("If cesarean, was a Trial of Labor Attempted?") is found on the "Delivery" page just under "Final Route and Method of Delivery." The question is locked as "Not Applicable" until "cesarean" is selected as the final method of delivery. Once cesarean is selected, in all but the rarest of cases, you will answer the trial of labor question in one of two ways:

"Yes," when a woman goes into labor with the plan to deliver vaginally; or

"No," when a woman has an elective cesarean section.

You may be asking, "If only yes and no are acceptable, why have these other two choices of 'not applicable' and 'unknown'?"

"Unknown" is used in only the most extreme cases where it is known that a cesarean section was performed, but it is unknown if a trial-of-labor was attempted.

"Not applicable" is only a valid answer for non-cesarean deliveries. Most births occur vaginally, so the trial of labor field is automatically filled as "Not applicable" in every new OVERS record. Due to limitations in the OVERS system, "Not applicable" remains as a possible answer, even after cesarean is selected as the delivery method. Remember: "Not applicable" should never be selected for the trial of labor for a cesarean delivery.

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

# How to open secure emails from state agencies

The Public Health Division and the Center for Health Statistics are strongly committed to protecting the privacy and security of all the people we serve. By sending emails securely we can help ensure the protection of confidential information. Our office sends you the Center for Health Statistics birth edit report every two weeks via secure email. This article will explain how to open secure emails, set up an account and change your password within our secure site called "Proofpoint Encryption." See below for an example of what you will see when you receive a secure email:

Click on the blue hyperlink in the attachment. Select "Save" and then "Open". A new web browser window will appear. After clicking the button that reads "Click to read message," you will be directed to the "Proofpoint Encryption" site. If this is your first time exchanging secure emails with DHS or OHA you will be prompted to set up an account. Returning users will be asked to simply log in. All you need to set up a new account is your email address, name and a password. Your password must be 8 to

20 characters long and contain numbers and both uppercase and lowercase letters. Once you have entered all the fields, select "Continue." You can now read your secure email!

Your password will expire after 90 days. You can change your password by clicking on the link next to the expiration message. If your password expires, you will be prompted to change it the next time you open a secure email. If you forget your password, use the "Forgot Password" link to receive an email with instructions for how to change your password.





This is a secure message.

Click here by 2017-01-04 15:47 PST to read your message, or open the SecureMessageAtt.html attachment.

After 2017-01-04 15:47 PST , you must open the attachment to read the email.

### More Info

Disclaimer: This email and its content are confidential and intended solely for the use of the addressee. Please notify the sender if you have received this email in error.

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If you need any further assistance please contact the OVERS Helpdesk at 971-673-0279 or Cynthia Roeser, Data Entry Supervisor, at 971-673-0478 or at <a href="mailto:cynthia.r.roeser@state.or.us">cynthia.r.roeser@state.or.us</a>.

# The Training Corner — Canadian province

This article provides direction on what to enter in the "Birthplace State" field when one or both parents were born in Canada. When Canada is entered in the "Birthplace Country" field, then you will need to enter the name of the Canadian province in "Birthplace State" field.

There are several reasons why you need to enter the Canadian province:

- The parent's place of birth on a birth record is legally required information.
- It is used for statistical purposes.
- The National Center for Health Statistics (NCHS) has an interjurisdictional agreement to report Canadian Provinces on birth records.



# **New e-Learning tool for Birth Information Specialists**

A new e-Learning tool on completing the medical and health information for the certificate of live birth is now available. This training is designed for birth information specialists, and others who are responsible for gathering birth record information, including doctors, nurses, and office staff, or anyone with an interest in the subject.

This training is available for free on the web and is estimated to take approximately 90 minutes to complete. Developed by the National Center for Health Statistics (NCHS) and local partners, this e-Learning package is designed to help us all better understand and improve the quality of birth data. The information is aimed at a national audience and provides a great overview for reporting this information.

Since the training provides awareness of the importance of quality data, it should be helpful for existing staff as well as new employees. This e-Learning session is well laid-out, educational, and continuing education units (CEUs) are available.

To access the training follow this link: <a href="http://www.cdc.gov/nchs/training/BirthCertificateElearning/">http://www.cdc.gov/nchs/training/BirthCertificateElearning/</a> If you are interested in taking the free training, feel free to do so or to share the link with others. Please let us know what you think if you do take it. Feedback can be sent to Krystalyn Salyer at <a href="https://krystalyn.salyer@state.or.us">krystalyn.salyer@state.or.us</a> or by calling her at 971-673-1197.



We are currently working to develop a full orientation and training package for new birth information specialists, which will include an Oregon Vital Events Registration System training as well as this great new e-training from NCHS.

Stay tuned for more information!

# **Birth Clerks to Birth Information Specialists**

Please note a new change in how we address you in communications. Instead of "birth clerks", we are now referring to your titles as "Birth Information Specialists". We appreciate the important role you play in collecting information for the legal record of birth, and we want that to be reflected in your title. Let us know if you have any questions, and as always, thank you for being strong partners in the birth reporting system.

# Wanted – newsletter topics

Have a question or idea for a future newsletter article? Contact Judy Shioshi, at 971-673-1166 or <u>judy.shioshi@state.</u> <u>or.us</u>. Judy collects ideas for articles and then shares them with the writing team.

# Thank you to the contributors of this newsletter:

Jennifer Woodward, JoAnn Jackson, Carol Sanders, Karen Hampton, Cynthia Roeser, Karen Rangan, Mike Golafshar, Mason Mohamad, Judy Shioshi, Juana Anguiano Rivera, Jamie Gould, Megan Welter, Carolyn Hogg, Kelli Wasson, Cody Wang, Craig New, Derrick Patterson and Krystalyn Salyer.

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General information: 971-673-1190 Order vital records: 1-888-896-4988

### Website:

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

# **OVERS** website:

http://healthoregon.org/overs

PUBLIC HEALTH DIVISION

Center for Public Health Practice/Center for Health Statistics

Health Authority

You can get this document in other languages, large print, braille or a format you prefer. Contact the Center for Health Statistics at 971-673-1173 or 711 for TTY.

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