
SCOTTISH STATUTORY INSTRUMENTS

2015 No. 180

**REGISTRATION OF BIRTHS,
DEATHS & MARRIAGES, ETC.**

The Registration of Births, Still-births,
Deaths and Marriages (Prescription of Forms)
(Scotland) Amendment Regulations 2015

<i>Made</i>	- - - -	<i>22nd April 2015</i>
<i>Laid before the Scottish Parliament</i>	- - - -	<i>24th April 2015</i>
<i>Coming into force</i>	- -	<i>13th May 2015</i>

The Registrar General makes the following Regulations in exercise of the powers conferred by sections 21(2), 21(4), 27(1) and 54(1)(b) of the Registration of Births, Deaths and Marriages (Scotland) Act 1965(1) and all other powers enabling him to do so.

In accordance with section 54(1) of the Registration of Births, Deaths and Marriages (Scotland) Act 1965(2), the Scottish Ministers have approved the making of these Regulations.

Citation and commencement

1. These Regulations may be cited as the Registration of Births, Still-births, Deaths and Marriages (Prescription of Forms) (Scotland) Amendment Regulations 2015 and come into force on 13th May 2015.

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- (1) 1965 c.49; section 21(2) was amended by section 40(2) of the Local Electoral Administration and Registration Services (Scotland) Act 2006 (asp 14) (“the 2006 Act”), sections 26(1) and 27(a) of the Certification of Death (Scotland) Act 2011 (asp 11), and section 24(2) and paragraph 12 of Schedule 7 to the Nurses, Midwives and Health Visitors Act 1979 (c.36); section 21(4) was amended by section 40(4) of the 2006 Act; section 27(1) was amended by section 42(8)(a) of the 2006 Act. Section 56(1) contains a definition of “prescribed” relevant to the exercise of the powers under which these Regulations are made, and section 1 contains a definition of “Registrar General” relevant to the exercise of the statutory powers under which these Regulations are made.
- (2) The functions of the Secretary of State under the 1965 Act were transferred to the Scottish Ministers by virtue of section 53 of the Scotland Act 1998 (c.45).

Amendment of the Registration of Births, Still-births, Deaths and Marriages (Prescription of Forms) (Scotland) Regulations 1997

2.—(1) The Registration of Births, Still-births, Deaths and Marriages (Prescription of Forms) (Scotland) Regulations 1997(3) are amended as follows.

(2) For the form set out in Schedule 6 (Certificate of Still-birth), substitute the form set out in Schedule 1 to these Regulations.

(3) For the form set out in Schedule 8 (Certificate of Registration of Still-birth), substitute the form set out in Schedule 2 to these Regulations.

(4) For the form set out in Schedule 14 (Certificate of Registration of Death), substitute the form set out in Schedule 3 to these Regulations.

New Register House,
Edinburgh
22nd April 2015

TIM ELLIS
Registrar General for Scotland

Approved by the Scottish Ministers

St Andrew's House,
Edinburgh
22nd April 2015

FIONA HYSLOP
A member of the Scottish Government

(3) [S.I. 1997/2348](#); relevant amending instruments are [S.I. 1999/104](#); [S.S.I. 2005/595](#) and [S.S.I. 2009/315](#).

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

SCHEDULE 1

Regulation 2(2)

Form 6

CERTIFICATE OF STILL-BIRTH (Form 6)

Serial number:

(Section 21(2) of the Registration of Births, Deaths and Marriages (Scotland) Act 1965)

The completed certificate should be produced to the Registrar of Births, Deaths and Marriages and will be retained by them.

GUIDANCE FOR COMPLETION OF THIS FORM IS AVAILABLE AT www.nrscotland.gov.uk/Form6Guidance

PLEASE PRINT CLEARLY IN BLOCK CAPITALS AND DO NOT ABBREVIATE

PART A - DETAILS OF STILL-BIRTH

I was present/not present* at the birth of a male/female/unknown* still-born child (*delete whichever does not apply)

Name of mother	
Date of still-birth (dd/mm/yyyy)	
Time of still-birth (24-hour clock – hh:mm)	
Place of still-birth	
Health Board area in which still-birth occurred	
Community Health Index (CHI) number of mother	
Date of birth of mother (dd/mm/yyyy)	

PART B - DETAILS OF CERTIFYING DOCTOR/MIDWIFE

Name	
GMC/NMC number	
Business address	
Business contact telephone number	
<i>For a still-birth in hospital</i> Name of the consultant in charge of the care of the mother	

I hereby certify that to the best of my knowledge and belief the information contained in this Certificate of Still-Birth is correct.

Signature of certifying doctor/midwife	
Date	

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PART C - CAUSE OF DEATH

(Form 6) **Serial number:**

PLEASE PRINT CLEARLY IN BLOCK CAPITALS AND DO NOT ABBREVIATE

I Fetal and/or maternal condition (please specify) directly leading to death (a)
Antecedent causes – Fetal and/or maternal conditions (please specify), if any, giving rise to the above cause, stating the underlying condition last due to (or as a consequence of) (b)
due to (or as a consequence of) (c)
due to (or as a consequence of) (d)
II Other significant conditions of child and/or mother contributing to the death, but not related to the disease or condition causing it

Not to be entered in register
Single birth/first twin/second twin/other multiple
Estimated duration of pregnancy
.....
Weeks
Weight of child if known
.....
grammes

PART D - HAZARDS

To the best of your knowledge and belief:		Y	N
DH1	Does the body of the still-born child pose a risk to public health: for example, did the child or the child's mother have a notifiable infectious disease or was the mother or child's body "contaminated" immediately before birth?		
DH2	Is there any potentially explosive device currently present in the still-born child?		
DH3	Is there radioactive material or other hazardous implant currently present in the still-born child?		

PART E – ADDITIONAL INFORMATION

Post mortem examination by a pathologist (tick one)	
PM1	Post mortem has been done and information is included above
PM2	Post mortem information may be available later
PM3	No post mortem
Time of Death (tick one)	
AP	Death occurred before the onset of labour (ante-partum)
IP	Death occurred during labour (intra-partum)
Procurator Fiscal (tick if applicable)	
PF	This still-birth has been reported to the procurator fiscal
Extra information for statistical purposes (tick if applicable)	
X	I may be able to supply the Registrar General with additional information

For registration office use	RD Number	Year	Entry number
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SCHEDULE 2

Regulation 2(3)

Form 8

Form 8



CERTIFICATE OF REGISTRATION OF STILL-BIRTH

(Section 21(4) of the Registration of Births, Deaths and Marriages (Scotland) Act 1965)

This is to certify that :

Name

Was still-born on (date)

and was registered by me on (date)

Forename(s) and surname(s) of child's mother
.....

Forename(s) and surname(s) of child's father/parent
.....

Address of parents (or of mother)

..... Postcode

The certifying doctor/midwife has confirmed the following to the best of their knowledge and belief:

	Y	N
Does the body of the still-born child pose a risk to public health: for example, did the child or the child's mother have a notifiable infectious disease or was the mother or child's body "contaminated" immediately before birth?		
Is there any potentially explosive device currently present in the still-born child?		
Is there radioactive material or other hazardous implant currently present in the still-born child?		

Details of Certifying Doctor/Midwife

Name	
GMC/NMC number	
Business Address	
Business contact telephone number	

Signed Registrar

Name

District of

Note: This certificate should be given either directly by the informant or by another person (such as a funeral director or family representative) to a person having charge of a place of interment, cremation or other means of disposal of human bodies who inter, cremates or otherwise disposes of the body of a still-born child.

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

SCHEDULE 3

Regulation 2(4)

Form 14

Form 14



CERTIFICATE OF REGISTRATION OF DEATH

(Section 27(1) of the Registration of Births, Deaths and Marriages (Scotland) Act 1965)

This is to certify that the death of

Name

Address

.....

..... Postcode

was registered by me on

The certifying doctor has confirmed the following to the best of their knowledge and belief:

	Y	N
Does the body of the deceased pose a risk to public health: for example, did the deceased have a notifiable infectious disease or was their body "contaminated", immediately before death?		
Is there a cardiac pacemaker or any other potentially explosive device currently present in the deceased?		
Is there radioactive material or other hazardous implant currently present in the deceased?		

Details of Certifying Doctor

Name	
GMC number	
Business Address	
Business contact telephone number	

Signed Registrar

Name

District of

Note: This certificate should be given either directly by the informant or by another person (such as a funeral director or family representative) to a person having charge of a place of interment, cremation or other means of disposal of human bodies who inter, cremates or otherwise disposes of the body of a deceased person.

EXPLANATORY NOTE

(This note is not part of the Regulations)

These Regulations amend the Registration of Births, Still-births, Deaths and Marriages (Prescription of Forms) (Scotland) Regulations 1997 (S.I. 1997/2348, “the principal Regulations”). Regulation 2 of these Regulations substitutes a revised “Certificate of Still-birth” for the form prescribed in Schedule 6 to the principal Regulations; a revised “Certificate of Registration of Still-birth” for the form prescribed in Schedule 8 to the principal Regulations; and a revised “Certificate of Registration of Death” for the form prescribed in Schedule 14 to the principal Regulations.

The revised Form 6 prescribes additional medical information to be included about the still-born child, namely the presence of any hazards. The definition of still-birth has been removed and is provided for in the guidance referred to in the Form. The Form prescribes that the certifying doctor or midwife must identify whether they were present or not present at the still-birth. In the previous version of the Form, the certifying doctor or midwife required to indicate whether they were present at the still-birth or whether they examined the body of the still-born child. The Form also prescribes that the certifying doctor or midwife must advise whether the still-birth was reported to the Procurator Fiscal. The Form prescribes certain other additional information including General Medical Council/Nursing and Midwifery Council (GMC/NMC) numbers and contact details for the certifying doctor or midwife to increase identification of, and enhance communication with, certifying medical professionals by others who may need to contact them, such as funeral industry staff. The Form includes the addition of a line about the sex of the child. The Form further requires additional information on the mother and location of the still-birth and any extra information that may be relevant to facilitate improved public health information and statistics around still-birth. The layout of the Form has also been improved for ease of completion.

The revised Form 8 prescribes additional medical information to be included about the still-born child, namely the presence of any hazards.

The revised Form 14 prescribes additional medical information to be included about the deceased, namely the presence of any hazards.

The revised Forms effect the changes in the law from the Certification of Death (Scotland) Act 2011.