

Distr.: Limited

AW2/CRVS/95/36

Original: English

UNITED NATIONS ECONOMIC AND SOCIAL COUNCIL

AFRICAN WORKSHOP ON STRATEGIES FOR ACCELERATING THE IMPROVEMENT OF CIVIL REGISTRATION AND VITAL STATISTICS SYSTEMS Rabat, Morocco, 4-8 December 1995 (FOR SELECTED FRENCH-SPEAKING COUNTRIES)

UNITED NATIONS	ECONOMIC	DIRECTORATE OF
STATISTICAL DIVISION	COMMISSION FOR AFRICA	STATISTICS MOROCCO

MANAGEMENT ROLE AND RESPONSIBILITY IN CIVIL REGISTRATION AND VITAL STATISTICS SYSTEMS

BY

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November 1995

* The views expressed in this paper are those of the author and do not necessarily reflect those of the United Nations.

* Issued without formal editing.

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INTRODUCTION

The civil registration and vital statistics systems require continuing and consistent management activities to assure that the program meets each of the needs described for registration services and vital statistics development. These activities, whether initiated at the central office level in a centralized system or at the state or province level in a decentralized system will determine the effectiveness of the system. Within the highest level of the hierarchy of the organizational infrastructure in place (central office), management must establish standards for system components, guidelines for operations and protocols to address related issues. These are then passed on to all administrative levels and are made known to the local registrars and sub-registrars.

Organizational Structure of Systems



Management Office

The management office is that portion of the organization that provides general administration to the various functional units. Although the size of the management office may be small, its function is essential to having an effective and efficient system. The responsibility of the management office will vary according to the organizational arrangement of the registration and vital statistics systems. Where the registration and the vital statistics functions are in the same national agency, the office must be qualified for management operations relating to both statistics and registration.

Other necessary staffing functions include fiscal management capabilities, clerical support services for correspondence, filing and related tasks, and interagency collaboration on the registration and statistics components as identified. Management must be directed at the legal and statistical activities that define the system, and those who produce the information for registration needs and those who access the data in the systems for analytical and quantitative use.

For each system, the management requirements include basic functions. In addition, depending on the type of structure that is in place in a particular country, other special type functions may be added. Figures 2. and 3. represent the basic structural outlines that are considered essential to manage effective civil registration and vital statistics systems. In the case where registration and vital statistics are in separate agencies, each of the management offices would need to meet the registration and statistical requirements as described, respectively.



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The functional requirements for each office is, however, reduced since the primary responsibilities relate to only one system. In the situation where the two systems are separate, but in the same agency, it would be possible for both fiscal and clerical duties to be handled by a single staff unit, with the responsible management functions conducted separately by each office.



Figure 3

Each of the functional units cited in the organizational structures for registration and vital statistics systems have similar management responsibilities though the activities may differ. However, the close relationship that must be maintained between registration and vital statistics functions require an interactive management role whether the systems are in separate agencies within a centralized or decentralized national program.

Legal Requirements

The legal requirements of each system in terms of national, state, and local responsibilities need to be clearly identified at each level. Seminars and training sessions conducted by management is a first step in meeting these needs. Staff at the central office are the primary focus for training since they will be the contacts for answering questions and providing legal assistance related to registration activities to the local office staff. Responses must be consistent with established laws, rules and regulations issued by the central office, and interpretation of specific legal elements prepared at the management level. Definitions for data items, appropriate documentation for certificate amendments or modifications, and procedures for information sharing among the various units relate directly to management. Feedback from local offices with regard to problems and issues which cannot be handled at the local level must, at some point, be shared with management. In this way, adjustments and enhancements to improve the system can be incorporated into their planning and policy development activities.

A second general area requiring management decisions relate to security and confidentiality of the records and documents maintained at each level within the system. Guidelines as to 1) storage requirements, 2) lockable rooms and cabinets, 3) authorization for selected staff to access certain records, 4) release of records to the public, government agencies and private institutions, and 5) procedures for daily operations. Many of these elements should reflect what is done at the central office, and if not in effect, should be initiated by management. Storage of records is a critical factor in order to assure the quality and utility of the records are sustained. Record deterioration adversely affects the capability to read the record or to use automated equipment such as automatic feeding mechanisms for subsequent microfilm or optical image processing. The storage environment also relates to security issues, where the location should have locked doors or storage cabinets.

In those areas where the local registrar also has responsibility for handling vital statistics forms as well, the primary focus should be on maintaining accurate logs on the volume of forms received and transmittal of the data in appropriate timeframes to the central statistical office. Some type of verification should be made, including consistent numbers of forms with the registration system.

The release of records is another area requiring management oversight. Personal information that may be requested by government agencies, news media, individuals, or other institutions from vital records or from the statistical forms when these are collected separately, such as cause of death of an individual, legitimacy of a birth, or other family information related to a vital event in some instances can have an impact on the individual or family involved. In these instances, restricted release at the local level can result in some difficulties. Such cases should be referred to management which can address the issue directly, or involve the legal office at the central level to assist in the actions taken.

Since a number of factors are addressed daily in the operation of a registration program, some basic elements of the process can be specified. Hours of operation are set in order to provide appropriate services to the public. The forms for data abstraction, recording of events and registers are elements which should be standardized and issued by management. Timing for the transfer of records to the next level of operation within the system, specific procedures for the receipt and entry of data into logs or indexes, and the reporting of events both in individual and aggregated formats are developed and issued by management for use at the local site. Specific criteria must be established and distributed by management to each level of the system authorized to issue copies of records. Where a controversy or action is taken against this restriction, referral should be made to management at the central office. This approach sets a structure so that local officials are not intimidated, and management has the opportunity to address the specific questions being raised.

Inter-agency Collaboration.

Civil registration and the vital statistics system, by the very nature of the data and information obtained, have significant interactive relationships with other governmental agencies, programs and institutions in areas of record matching, information exchange, the validation of reporting of events and accuracy of related data. The management role in this instance is to establish inter-agency communication and activities directed at addressing these specific areas. Record matching and linkage to other health databases can provide additional information relevant both to the registration system and the related program. For example, mortality data can be matched with health registers such as TB, Cancer, and AIDS in order to update these registers in terms of patient status and for research and epidemiologic studies.

Matching can also be used for administrative purposes. Benefits and services being provided by government or private agencies to the public can assess the status of the recipient and determine if there is misuse of funds or cases of fraud. The former may relate to fiscal support based on family size ie., number of children in the family or, cases of fraud where the recipient is deceased but social benefits continue to be received by other family members. The matching of birth and death files with the related social service files can provide data to assess these events. The agreements and control of use of the files is an important component which is set by management in the registration system.

Similarly, information exchange with other programs and agencies can also be important in the management of the system. Establishing committees to work with appropriate programs such as family planning, immunization for children, hospitals and clinics can result in valuable information to assess the completeness the reporting of vital events. These sources of independent information identified by management as relevant to the monitoring and evaluation of the registration system are necessary in order to maintain an effective program. The nursery logs in a hospital or clinic, for example, can provide information to assess the quality of registration in a particular area. Management, through periodic meetings and communication with these types of information sources, incorporate a process for system integrity and oversight utilizing extraneous resources.

These activities as described above relate to each of the organizational infrastructures that may exist. It is the responsibility of management at the appropriate administrative level - national, state or province, or local - to initiate and implement interagency collaborative arrangements. Various aspects of the programs, depending on the agencies involved, will have issues of legal, social and economic concern. Sharing of information, conducting record matches and linkages, undertaking data abstraction or, where available, data entry activities to serve the functions identified have associated costs and time constraints. These issues must be assessed by management in relation to the benefits received for justification of conducting these various activities. A major commitment must be made by management to incorporate these activities into their overall agenda to realize the full potential of the goals and objectives of the civil registration and vital statistics programs. The multiple sources of data and information that may be used to accomplish them must become an integral part of the management protocol.

Planning, Policy and Development

Evaluation and assessment of the registration and vital statistics systems by management implies a need for continuing improvements or upgrading of components of the system. These may reflect staff needs, technical assistance and training, equipment for automating certain processes, legal modifications, and organizational restructuring. To accomplish these ends, management must have effective procedures for program planning and policy formulation. This may include a policy committee, workgroups for planning and development purposes, or various combinations of these resources to review and prepare the necessary background and projected data to address specific issues.

A policy committee may be established to 1) assist management in maintaining oversight of the system in terms of modifications, 2) consider the addition of new components to address required changes, 3) provide input from related areas having some type of relationship to the program, 4) discuss current developments, and 5) to prepare legislation, rules and regulations for accomplishing designated objectives. The committee would normally have a chairperson, support staff for preparing materials for use by committee members or to distribute outgoing materials, arrange for sessions, and subcommittees established to work on specific topics that are initiated at the meetings. Support for travel, lodging and related expenses are essential, and sources of funding need to be identified.

Policy questions are generally item specific, but may cover a broad range of issues. Related to registration, these may be directed at current procedures for registering of events, concerns regarding the form and content of the certificates for data collection, legislative change to meet new needs, and new directions with other agencies and programs. In a centralized organizational structure the policy committee would primarily focus on internal operations from the national level to the local offices, with an ongoing systematic process for managing the program. This is possible since control of all functions rest within a national office, or shared between two separate agencies within the national structure. Issues and topics for policy discussion are more internal in nature.

There are a series of operational items that need to be developed as a new or modified system moves forward. Procedures and guidelines are required to set the required timing for the reporting and recording of events; storage sites identified, with minimum levels of control for the maintenance, security and access for records; transmittal of records to the national or state/province, district or region depending on the structure of the registration and vital statistics systems. Record processing, including recording, coding, index preparation, search and retrieval methodology, and copy and abstract procedures, are developed at the initial stages of the program to assure consistency, utility, compliance and timeliness for each aspect of the program. Timeliness of registration services to the public, appropriate data items for the preparation of vital statistics at the local and national levels, information sharing among programs and agencies, and communication capabilities for all these related interests are to be developed within the context of the policy statements issued, planning protocols, and strategies for implementation.

Each of these processes require management to have held discussions, meetings and conducted review and evaluations of various components of the systems to move forward with the recommendations. Contacts with other agencies, with internal units which have direct involvement with the system or system components, and with legal and administrative staff serve to establish relationships which will help result in effective and efficient operations. Direct contacts within the centralized system are more likely to occur or to be more easily arranged. Within the decentralized structure, major efforts may be required to reach the same goals since there is a much broader and more diversified number of those involved in the overall process of the registration program and in the development of the vital statistics system.

Management Control Functions

In addition to the general requirements of management to maintain the overall registration program, there are a number of specific areas that require direct control. These areas relate to legal components that can have a very negative impact on the program if not handled in a positive and consistent manner. One area is that of confidentiality of the data obtained in the recording of vital events and in the security of the records on file. Selected data collected through the civil registration program is sensitive and could cause difficulties for individuals. Abortion data and other health data items obtained on the birth and death records such as cause of death, complications associated with a pregnancy, adoptions, marital status, and other social and economic data should be limited for statistical purposes only. This serves to eliminate the possible misuse of the data on an individual basis. Restrictions are required for this type of information.

Where statistical data are collected on forms separate form the registration forms, control functions need to be expanded to assure completeness and quality of the data are accomplished. Independent assessments of the statistical data, either by conducting sample surveys or integrating the data with other sources including the registration records can serve to maintain a quality statistical system. The role of management is to implement, monitor and evaluate the results of these various processes, and adjust or modify them to meet established data quality needs. Reasons for the concern with respect to confidentiality and security relate to fraud control.

The potential for fraudulent use of the information contained on birth and death records covers a broad area. The identity of an individual can be changed through access to other birth documents. The access to resources and services can be misused by falsifying the number of births, for example, that a particular family may claim. Insurance claims related to a death, or inheritance issues of among families can be initiated with false death or birth records.

A second area for management control is that of monitoring of events. As previously noted, the capability to assess the reliability and validity of reporting of events can be based on the monitoring of reports from various geographic areas. Patterns of previously reported events are used to project future numbers of records and data. Should significant differences emerge from the monitoring system, then specific actions can be taken by management to determine what has caused the changes.

Vital records, with both health and demographic information, can be used to identify changes by management. The specific characteristics of an area must be established, based on previous reports, and then comparisons made to see if significant deviations from expected characteristics occur. Subsequent changes can then lead management to implement on-site reviews to evaluate the local operations and, where necessary, take action to correct deficiencies. If the reasons are inherent in the area due to economic or other factors, then the control standard used in that area is to be adjusted. The results of undertaking these types of control strategies forms the basis for management to establish enforcement procedures related to activities representing the highest levels of vital records and statistical data failures. The factors may include fines, reassignment of registration to another registration area, or require training over a specified period of time. The latter is considered the primary option since the local office has the knowledge of the area covered. This is a contributing factor to an effective registration program and should be held wherever possible. These control activities represent close involvement of management with the various components of the registration program and can lead to mutual understanding of the problems and concerns which may be occurring in local areas. This knowledge provides management with background to modify or adjust the system.

Logistics for Record Management

Within a management unit, a series of functions must take place in order to accomplish stated goals and objectives. Management of the vital records component of the registration system is a significant role that needs constant attention. The recording of events, logging in and out when transmittal of records to higher levels of authority occur, and timing for these activities are essential management tools. Other functions to be addressed is the auditing and printing of the records. The purpose of audits is first to establish a protocol which assures that the legal requirements and key elements to the registration process are operating in a satisfactory mode and, second to have all participants in the system aware of the conduct of audits. This awareness can have a positive impact on eliminating misuse or non compliance by local agencies, programs reporting events and health care providers. For the printing of forms, there should be a common central source. This reduces the possibility of misuse of the forms which may occur when the printing is allocated to provide sources. Management must consider this as a significant item, and provide the necessary resources to adequately resolve this issue.

Internal audits are directed at activities within the various record processing units of the system. These include adoption, amendment, coding and data classification, and index preparation. For adoption and amendment, audits cover the documentation or court orders issued to initiate the process. These documents and orders should undergo a periodic review based on a sample of previously processed records. The assessment to be made relates to the legal aspects, the regulations and rules regarding these activities, and the appropriateness of the units' documentation in making the modifications to the original records. Each of these areas are defined and guidelines issued to the units conducting these activities as noted above ie, by the management unit. Whether the registration program is in a centralized or decentralized organization, the audit process is essential to be carried out. Standards must be established for the common data elements which are coded at the various government office levels. In some countries, such coding is limited to the national office; in others, due to the large volume of records or, difficulties in record transmittal which can affect the corrections and updating of records, responsibility for the coding is done at the local level. In either case, however, the process must be defined which allows for some effort to be made to audit the activity. Standards that are set for common data elements may also reflect national requirements. The International Classification of Diseases (ICD) of the World Health Organization provides a common code structure for causes of death. This coding scheme, which undergoes a change approximately every ten years, is the basis for coding causes of death from death records, and used as the comparison of cause specific death rates among various countries.

The extension of the audit process outside the registration system to the reporting sources is an important aspect of data audits. The abstracts taken from medical records and placed on the vital record, birth or death, must be accurate and complete or resulting vital statistics are not valid and registration services are compromised. Where hospital records are part of the reporting process to a national office or program, samples of these records can be compared to the vital records and the accuracy and completeness of the registered data can be assessed. If there is no such program, field surveys can be done to obtain hospital, clinic or other health care provider records and used to compare with the recorded data in the registration system.

Other sources which may serve to provide information for the audit function include administrative records for social service benefits, school enrollment records and census data. To the extent these sources can contribute to the process they should be incorporated by management into the audit protocol. These activities are adaptable to those systems which use separate forms to obtain registration and vital statistics data. The process can be addressed in similar fashion, with differences relating only to the item contents of the forms used. Both registration and statistical data collection forms must undergo a constant and consistent pattern of review and monitoring to assure the completeness, quality and validity of the data.

Management of records within the civil registration system is an essential and productive activity, with results identifying the next steps to be taken to continually improve and upgrade the various components of the system. The entire process, from the initial recording of information on the vital records forms to the coding and data entry for use in preparing national vital statistics, requires a careful and consistent management approach. Without this, the data, information and resulting statistics can be questionable and the utility of the system negatively impacted. Though the related costs and time commitments may be significant, the value of the results is what sustains the ongoing registration process.

The role of management is to assess the potential application of automated procedures to enhance and upgrade system operations. Manual recording of information into ledgers versus data entry into a computer file can have significant impact on the processing involved. Computer entry allows for the automatic preparation of indexes which can be printed and distributed to local offices which do not have the capacity or resources to use automated equipment. In addition, at the office where automation occurs, the indexed records can be searched automatically and short-form certifications produced with minimal manual requirements. The impact on cost, timing and productivity is significantly improved. Consideration by management is to determine the equipment and maintenance costs, associated training and related resources as compared to the current methods employed. Both short-term and long-term considerations should be made to ascertain the final methodological direction to pursue in the processing of the records and data.

In this latter approach, some type of quantitative assessment is required. This would involve identifying the current rate per staff member as to the particular function performed. These may include the hourly rate of characters entered into an automated data entry system; daily number of records filed, recorded and indexed per staff; time period to manually search for a particular record or sets of records; time required to make modifications and amendments; the volume of copies of records prepared per staff; and, reports generated for administrative use. Options to improve these activities can then be assessed depending on the methods selected for comparative review and assessment. The final results of this type of management function is then brought to the administrative unit to obtain necessary resources. When a comprehensive review comparison has been conducted, there is a solid basis for justifying the resources identified for improving the system.

External Participation in System Functions

Many of the functions conducted in both the civil registration and vital statistics systems involve various programs and agencies either as direct participants - health care providers, hospitals, clinics, court houses, parishes - or, indirect through contacts with other sources -social services, voluntary health service organizations (immunization, family planning, or chronic diseases) - and related programs such as school enrollment. To effectively utilize these sources, management may institute a series of programs to involve them in activities to benefit the registration and vital statistics systems. For direct participants, the registration office can provide standard worksheets which would allow for the collection of the data required on the vital records and/or vital statistics forms. hospital worksheet, for example, can serve several purposes. A It provides a standard format for abstracting related registration from hospital medical records and other forms, data thus eliminating incomplete recording or inaccuracies due to staff turnover. The worksheet, with instructions attached, can be easily applied. Second, this gives the hospital a good summary of information for their files in addition to an effective method for meeting mandatory reporting requirements for registration. The same type of form can be provided to the other direct service providers, maintaining an accurate and consistent basis for obtaining the data.

Indirect participants can also contribute to the system. The data collection processes used in these areas may obtain complete family information, data on births and siblings, and mortality data on specific causes of death related to particular disease registers. Contacts with these programs, sharing of information and matching of data files can provide a profile of expected events in a particular local registration area. This can serve as a method to validate reported data by linking selected records based on a previously designed sample or by assessing trends from the data combined with the vital statistics for the geographic area covered. These independent sources, either programmatic or administrative reporting, provide valuable information for use in the registration system. The particular needs of the system should direct which sources to utilize.

A number of approaches can be taken to keep the public informed as to the requirements and, more importantly, the significance of registration. Dissemination of information through pamphlets at hospitals, clinics and local health service agencies and providers is an initial step in getting the public informed. In urban areas, news media, television and radio, can be effective for one segment of the population. Where such resources are not accessible by the public other means need to be established. Recruitment of local officials or service providers such as midwives can be effective in disseminating and explaining the information and benefits of the registration system. In many areas, literacy is nominal, and means other than written materials must be used to inform the public. Local meetings, either as a result of community or village activities, should be considered an effective source for informing people about the registration process. Or, if these do not occur on a periodic basis, such community and village meetings should be initiated by the registration program officials. In some cases, local police units are used to provide information to the population regarding registration in their area. However, this has resulted in difficulties in some instances and must be assessed in terms of the potential for success or failure in particular areas before implementation.

In rural areas, the literacy issue can be extensive and local meetings and orientation sessions need to be conducted. The local registration official should be directed toward accomplishing these types of activities in the registration area. At times when village, district or regional festivals or holidays occur and where groups of people get together, staff from the registration office should be there to provide both written materials and hold briefing sessions for the population. An essential component of the presentations, again either written or discussed, is the importance to the individual and the family to have their events registered. Topics such as personal identity, inheritance, family ties, legal benefits, citizenship, school enrollment, driver's licenses, employment, and social and health service benefits all may require the individual or family to produce documents establishing these items and relationships. This then becomes a major incentive for individuals to register vital events occurring in their families, and to share this information with others in their household, village and community so that all become informed and oriented to the system.

Comparative Analysis for Selected Data Elements

In managing the registration and vital statistics systems, there the need to have information which can serve to is always identify areas of success or failure in the systems. Geographic location and source of the event related to the population covered, changes which may occur in the reporting of events by type of event, and demographics of the reporting population are all elements which can serve this purpose. The reporting of specific disease categories through the registration system allows for the identification and subsequent monitoring of developing epidemics changes in trends and numbers of events. Use of the or International Classification of Diseases as noted earlier provides a standard coding system to note what the occurrences are at any time in the system and establishes the disease status of the population in selected reporting areas.

The vital statistics derived from the registration records or from the separate statistical reporting forms using the ICD codes can be prepared by the geographic definitions used in the system i.e., the place where the event was recorded and place of residence of the individual. The need to identify both sites allows management to make several assessments. First, the geographically defined place of residence tentatively identifies the location where the disease may be prevalent. Based on this information from the vital statistics system, health and/or medical services may be directed to the area. The seriousness of the event, based on the volume of reporting through the registration system, for example the number of deaths from the particular disease, may also initiate an epidemiologic investigation for further followup. The place where the event is recorded may indicate the resources being used to treat the disease. The severity of the illness may require the person to be brought to a hospital or clinic in another location. Hence, the registration of the event may not be in the registration area of the residence of the patient. This information is useful for several reasons. It identifies the catchment area of the health care provider - hospital, clinic, physician or other health agency - which is accessed by the population in these areas.

The impact on health and medical resources can be assessed for that particular site. It also eliminates the possibility of misidentification of the location of the disease. Should only the recorded location be stated on the death certificate, the assumption may be made that the site of the problem is there. This could lead to misdirection or mismanagement of available health and medical resources. The analysis of the data based both on recorded and resident classifications is an effective quantitative approach serving important planning and decisionmaking processes. Data utilization is an important aspect of the registration system and the management function and must be integrated into the infrastructure of each.

Another area which provides valuable input to the management of the system relates to vital statistics data based on selected variables. Natality data derived from the reported birth record or the statistical form can be produced in a variety of categories. Age-specific fertility rates, parity, prenatal care services, place of delivery, and the care provider indicate what the general patterns are at all geographic levels. Where programs have been initiated by other governmental agencies or organizations the impact can be assessed through the analysis of relevant variables. Family planning can influence the volume of events registered in areas where such programs have been implemented. Prenatal service, if included as an item and is reported on the birth record, provides an indication as to the availability of the service in specific areas or the utilization being made by certain segments of the population. Where the services are available but not used, information and training can be directed to the sites to improve this activity.

The population characteristics derived from the census can also provide baseline data to determine expected number of birth and death events. The age and sex distribution of the population along with local, state or national fertility and mortality rates provide an indicator for the number of births and deaths that should appear in the registration system. Some variability is incorporated into the estimation procedures, but where significant differences occur, some type of followup would need to be implemented to determine the source of error or problem. This procedure can also draw on other options like the dual reporting system if the completeness of registration in the country would not provide for reasonable estimates. As part of the management of the registration program, determination must be made periodically as to what health and medical issues are being addressed or have become major factors in the health status of the population. This then provides management with the information to redesign the data collection forms used in the registration system to meet new requirements. Record form modifications may occur every several years or sooner depending on the variability of the health of the population. Item content should be structured to meet current and projected information needs for programs and other agencies as these change over time. Keeping pace with these developments keeps registration and vital statistics an integral part of the health and population programs of the national, state or province, and local government agencies, programs and related activities. The nature of the data can be assessed as key elements for program review and evaluation, descriptive summaries of health status, and quantitative analysis in each of the areas identified in this section.

The value of civil registration and population registers for legal, statistical and administrative purposes at the national or other geographic level of a country is significant. These systems however require constant monitoring and updating in order to maintain a high quality of information for the purposes noted above. The independence of the systems provides the capability to compare and validate the information collected in both systems, and to prepare specific rates of selected events since they contain the numerator and denominator data. Completeness of reporting is a very important item which can be shared by both systems, as can the accuracy of reported events. Rates in the areas of natality and mortality are readily available on a timely basis since the population data are continuously updated in the population register and the occurrence of vital events in the registration system. For statistical purposes this is an advantage since in many instances only population estimates based on previous census data are available for denominator use. When the census is conducted only periodically, the interval between the census can vary from five to ten year intervals. The longer the interval, the less reliable are the population counts and the rates based on these denominators.

Consideration as to processing strategies and coding and indexing features are critical to having an integrated approach for the civil registration program and population register in countries where both exist. The use of computers to effectively integrate the related data items involves providing copies of records or, where possible, machine readable magnetic tapes or disks for processing and linking the data. Where hardcopy records need to be transferred to a common source for processing either to the registration or the population office, issues of confidentiality and security need to be addressed. At the processing center, standard coding procedures need to be set and complied with by both systems in order to have comparable and comparative information. Indexes, which serve to provide access to individual records for updates, corrections and changes either in an automated or manual mode also need to be standardized for compatibility. Management, by assuring that these arrangements are operational, can proceed to promote the utilization of the information for a variety of purposes and set all of the requirements with which the data users must comply.

Summary

In principle, the primary goal of the civil registration system is to have complete, consistent and timely reporting and recording of each vital event that occurs in order to provide information to the individual and to the administrative and program needs of the governmental agencies involved in the process. For the vital statistics system, the goal is to have available complete, accurate, and reliable data. These data can then used for purposes of 1) demographic, statistical and health research; 2) planning, development and evaluation of medical and health programs; and, 3) for the preparation and dissemination of timely reports based on the detailed data collected from the recorded vital events.

The described coordination functions related to management roles and responsibilities within the registration and vital statistics systems include several important areas. Coordination of the development of the form and content of the basic vital record reporting is a key function. The coordination of this task will include not only the sections of the registration and statistics office noted in the organizational structure, but also all the external participants (physicians, coroners, hospital personnel, etc.) who deal with the documents. It is necessary that the management office establish a regular procedure and a regular interval for review and update of the reporting instruments.

The statutes and regulations under which the registration and vital statistics system operates are also a major concern to the management office. The statutes and regulations must be monitored in two major ways. First, the management office must monitor any legislation changes under consideration by the law making body that might affect the registration and statistics system. Changes to social services legislation or to legislation covering the responsibilities of medical personnel or medical institutions may often have an effect on registration and statistics. The management office must monitor such legislation and offer ideas during each legislative session. Management also should address proper funding, budgeting and accounting functions. As indicated in the staffing and structure discussion it is important that the management office be appropriately staffed to handle these responsibilities.