



REPÚBLICA DE MOÇAMBIQUE

MINISTÉRIO DA SAÚDE



Assessment of the quality of information collected through new national death certificates in Mozambique

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Rationale of the study

- 2006 → ICD-10 officially adopted
- 2008 → MoH revised mortality registration system
- **2009 → New Death Certificate implemented nationwide**
 - **Sole source for the National Mortality Register**
- Mortality register scaled up from 1 to 18 hospitals across the country in 3.5 years
- 2012 → First analysis of national mortality data (Posters C413 & C415)
 - Study on quality of data collected through New Death Certificate

Objective

To assess

- extent of the use of new DC
- completeness of the information collected
- degree of adherence to filling instructions

Methods

- Sample included certificates filled between Oct 2011 and Jun 2012 in 5 randomly selected hospitals
- Assessment of causes of death only in terms of availability and completeness

Results (1)

- New death certificate routinely used in all hospitals
- No stock-out ever reported
- 28% (25-32%) of death certificate filled in all 63 fields
- 39% (36-43%) filled with full compliance to instruction

Results (2)

- Completeness (selected variables):

Nationality, place of birth, name, address, identification of issuing hospital	>90%
Age, sex, date of death, date of hospitalization, hospital ward, underlying cause of death*	80%-90%
Place of death (if not hospital), signing doctor, direct cause of death*	70%-80%
Occupation, ID number, type of admission	60%-70%
Type of death (fetal or not), autopsy, civil status	<60%

Results (3)

- Correctness against instructions (selected sections)

Identification of dead person	95%
Place of death	98%
Signing doctor	85%
Handwriting (good or acceptable)	94%

Conclusions

- New death certificate regularly used
- Fully complete/correct certificates were few, suggesting need for further training and supervision
- Information is acceptably complete/correct (>80%) for the most significant fields (currently analysed for mortality statistics)

Steps forward to increase quality of death certification

- Training (new and refresher)
- Dissemination of results of mortality analysis to raise awareness on importance of death certification
- Considering revision of procedure to fill the certificate (person responsible and timing)
- Distribution of free software for mobile phones to consult full ICD-10
- Further studies on quality of causes of death, if resources are available

Obrigada
Thank you