



Committee for Finance

Report on the Deaths, Still-Births and Baby Loss Bill

This report is the property of the Committee for Finance. Neither the report nor its contents should be disclosed to any person unless such disclosure is authorised by the Committee.

Ordered by the Committee for Finance to be published 17 September 2025.

Report: NIA 116/22-27 Committee for Finance.

Contents

Powers and Membership.....	3
List of Abbreviations and Acronyms used in this Report	5
Executive Summary	6
Introduction	8
Committee Approach	10
Consideration of the Bill	12
Clause by Clause Consideration of the Bill	14
Clause by Clause Scrutiny of the Bill	34
Links to Appendices	36
Appendix 1: Memoranda and Papers from the Department for Finance	36
Appendix 2: Written Submissions	36
Appendix 3: Minutes of Proceedings.....	36
Appendix 4: Minutes of Evidence.....	36
Appendix 5: Research Papers	36
Appendix 6: Committee Survey Results.....	36
Appendix 7: List of Witnesses that gave evidence to the Committee	36

Powers and Membership

Powers

The Committee for Finance is a statutory departmental committee established in accordance with paragraphs 8 and 9 of Strand One of the Belfast Agreement and under Assembly Standing Order No 48. The Committee has a scrutiny, policy development and consultation role with respect to the Department of Finance and has a role in the initiation of legislation

The Committee has power to:

- consider and advise on Departmental budgets and annual plans in the context of the overall budget allocation;
- consider relevant subordinate legislation and take the Committee Stage of primary legislation;
- call for persons and papers;
- initiate inquiries and make reports; and
- consider and advise on matters brought to the Committee by the Minister of Finance.

Membership

The Committee has 9 members, including a Chairperson and Deputy Chairperson, and a quorum of five members. The membership of the Committee is as follows:

- Matthew O'Toole MLA (Chairperson)
- Diane Forsythe MLA (Deputy Chairperson)
- Dr Steve Aiken OBE MLA
- Phillip Brett MLA
- Gerry Carroll MLA

- Jemma Dolan MLA¹
- Paul Frew MLA
- Deirdre Hargey MLA
- Eóin Tennyson MLA

¹ With effect from 11 February 2025 Miss Jemma Dolan replaced Miss Nicola Brogan

List of Abbreviations and Acronyms used in this Report

DoF: Department of Finance

GRO: General Register Office

MCCD: Medical Certificate of Cause of Death

MP: Medical Practitioner

RM: Registered Midwife

MCCD: Medical Certificate of Cause of Death

HFE Act: Human Fertilisation and Embryology Act 2008

Executive Summary

1. This report sets out the Committee for Finance's consideration of the Deaths, Still-Births and Baby Loss Bill. The Bill consists of 13 clauses which amends both the Births and Deaths Registration (Northern Ireland) Order 1976 and the Civil Registration Regulations (Northern Ireland) 2012. The Bill also repeals parts of the Coronavirus Act 2020.
2. The Bill has three main parts and seeks to amend the law relating to the manner of notification of deaths and still-births and the manner of giving particulars relating to them. It will also provide a legislative basis for the introduction of a baby loss scheme and will address differences in registration processes for births and still-births between some same-sex female couples and opposite-sex couples.
3. The Bill makes permanent arrangements made in the Coronavirus Act 2020 which enabled documentation required for a death or still-birth registration to be transmitted electronically and enabled a death or still-birth registration to be carried out by telephone without the signature of an informant as opposed to attending in person and signing the entry.
4. The Bill also gives the Department powers to introduce a Baby Loss Certificate Scheme. The aim of a Baby Loss Certificate Scheme is to provide a certificate which recognises the loss of a baby prior to 24 weeks of pregnancy. It will offer the opportunity to have the loss recorded, and to obtain a certificate. It will be entirely voluntary with no legal requirement to record the loss. The resulting certificates will have no legal standing but will provide a formal means of recognising the loss and its impact.
5. The Committee requested evidence from a range of interested organisations and carried out a detailed online survey to which it received 40 responses from individuals, organisations and representative bodies. There were a number of responses from individuals with personal experience of baby loss.
6. Throughout its consideration of the Bill, the Committee was particularly mindful of the invaluable written submissions and testimony it received from individuals

who had personal experience of baby loss and strived to ensure that the legislation was fit for purpose and would offer support for people in the most difficult of circumstances.

7. The Committee held oral evidence sessions with the Forget Me Not group and with the National Association of Funeral Directors. The Committee also held a briefing from the Assembly's Research and Information Service.
8. The Committee sought advice from the Examiner of Statutory Rules in relation to the range of powers within the Bill to make subordinate legislation. The Examiner considered the Bill and Explanatory and Financial Memorandum and was satisfied with the rule making powers provided for in the Bill.
9. The Committee heard oral evidence from departmental officials and engaged with the Department on a number of issues during Committee Stage including around the potential for fees regarding the baby loss certificates and the electronic registration and transmission of documents.
10. The Department of Finance confirmed that the primary powers in the Bill to allow for a Baby Loss Certificate Scheme are intended to be deliberately broad as to allow the Department to develop the detail in regulations, after conducting a consultation with a wide range of stakeholders. They also confirmed that these regulations would be put forward to the Assembly for confirmation.
11. The consensus for the Deaths, Still-Births and Baby Loss Bill is extremely positive. A total of 40 responses were received to the Committee survey with a further 13 written submissions also provided. The recurring responses focusing on efficiency, modernisation, freedom to choose and the removal of administrative burden during an already distressing time. The introduction of the Baby Loss Scheme is welcomed and viewed as providing recognition to individuals and families who have suffered baby loss. A response from one respondent was critical of the western medical system as a whole, which is outside of the scope of the Bill.

Introduction

Background to the Bill

12. The **Deaths, Still-Births and Baby Loss Bill** was introduced to the Northern Ireland Assembly by the Minister of Finance on 25 March 2025 and was referred to the Committee for Finance for consideration in accordance with Standing Order 33(1) on completion of the Second Stage of the Bill on 7 April 2025.
13. At introduction, the Minister made the following statement under section 9 of the Northern Ireland Act 1998: 'In my view the Deaths, Still-Births and Baby Loss Bill would be within the legislative competence of the NI Assembly'.
14. The Bill makes permanent arrangements which enables documentation required for a death or still-birth registration to be transmitted electronically and enable a death or still-birth registration to be carried out by telephone without the signature of an informant.
15. The Bill also gives the Department powers to introduce a Baby Loss Certificate Scheme. The aim of a Baby Loss Certificate Scheme is to provide a certificate which recognises the loss of a baby prior to 24 weeks of pregnancy.
16. The Bill contains 13 clauses. The Bill has three main parts as follows:

Registration

The Bill proposes amendments to the Births and Deaths Registration (Northern Ireland) 1976 Order and the Civil Registration Regulations (Northern Ireland) 2012 in order to;

- Enable the transfer of death and still-birth forms between the Medical Practitioner/Midwife and the Registrar, and then the Registrar and the funeral director alongside the current provision of providing the forms to the informant;

- Enable an informant of a death or still-birth to give information by telephone or approved electronic means alongside attendance in person at the registration office;
- Remove the requirement to sign the register if the registration has been completed by telephone or electronic means. The signature will be replaced by the name of the person professing to be the informant;
- Introduce the use of approved electronic means for the delivery and signing of documents;
- Enable a same-sex female couple to attend separately at the registration office to register a birth; and
- Enable a second female parent to register a still-birth without the mother being present, and to enable the re-registration of the still-birth if the mother disputes the details recorded by the second female parent.

Certificates of Baby Loss

- Introduce an enabling power to make regulations for a Baby Loss Certificate Scheme to recognise losses before 24 weeks of pregnancy.

General

- Contains the Commencement and Short Title clauses.

Committee Approach

17. As part of this Bill is to make provisions in the Coronavirus Act 2020 permanent, the Committee received regular briefings from the Department on renewing the provisions through subordinate legislation. The Committee took evidence from departmental officials on the development of the legislation at its meeting of 11 September 2024.
18. The Committee published a media sign posting notice in the Belfast Telegraph, Irish News and Newsletter seeking responses to its Bill survey. The Committee carried out a four-week consultation on the Deaths, Still-Births and Baby Loss Bill from 12 May 2025 to 9 June 2025. The Committee received 40 responses to its survey along with a number of separate written submissions from organisations and representative bodies. A number of the responses were from individuals with personal experience of baby loss. The Committee would like to place on record its thanks to all who responded. Copies of the written submissions are included at **Appendix 2**.
19. The Committee also used social media to raise awareness of and engage with the public to encourage participation in the Committee Stage of the Bill. X (formerly known as Twitter) and the Northern Ireland Assembly website were used to disseminate information on the Bill.
20. During the period covered by this report the Committee considered the Bill and related issues at 10 meetings. The Minutes of Proceedings are included at **Appendix 3**.
21. The Committee had before it the Deaths, Still-Births and Baby Loss Bill (NIA 13/22-27) and the Explanatory and Financial Memorandum that accompanied the Bill.
22. At its meeting on 7 May 2025, the Committee agreed a motion to extend the Committee Stage of the Bill to 1 October 2025. The extension requested the Committee reflected need to progress the legislation in a timely manner but also to ensure robust and detailed scrutiny by the Committee. The motion to extend was supported by the Assembly on 19 May 2025.

23. The Committee held oral evidence sessions with the Forget Me Not group as well as the National Association of Funeral Directors. The Committee received invaluable oral and written testimony from those who have suffered from baby loss and the Committee thanks them for their responses. The Minutes of Evidence are included at **Appendix 4**.
24. The written and oral evidence provided to the Committee indicated strong support for the introduction of a Deaths, Still-Births and Baby Loss Bill. Many respondents highlighted that the legislation is long overdue given that baby loss certificates are supported by the majority. The arrangements which enables documentation required for a death or still-birth registration to be transmitted electronically and enable a death or still-birth registration to be carried out by telephone without the signature of an informant have also been welcomed by all stakeholders. The Written Submissions are included at **Appendix 2**.
25. The Committee sought advice from the Examiner of Statutory Rules in relation to the range of powers within the Bill to make subordinate legislation. The Examiner considered the Bill and Explanatory and Financial Memorandum and was satisfied with the rule making powers provided for in the Bill.
26. To assist consideration of specific issues highlighted in the evidence, the Committee commissioned a research paper from the NI Assembly Research and Information Service on the provisions of the Bill. A copy of this paper is at **Appendix 5**.
27. The Committee carried out informal deliberations on the Clauses of the Bill and undertook its formal clause by clause scrutiny of the Bill at its meeting of 10 September 2025.
28. At its meeting of 17 September 2025 the Committee agreed its report on the Deaths, Still-Births and Baby Loss Bill and ordered that it should be published.

Consideration of the Bill

29. The Deaths, Still-Births and Baby Loss Bill is an Executive Bill introduced by the Minister of Finance. The Bill makes permanent arrangements which enables documentation required for a death or still-birth registration to be transmitted electronically and enable a death or still-birth registration to be carried out by telephone without the signature of an informant and also gives the Department powers to introduce a Baby Loss Certificate Scheme.
30. The Bill contains thirteen clauses and has seven main objectives which are as follows;

Registration

The Bill proposes amendments to the Births and Deaths Registration (Northern Ireland) 1976 Order and the Civil Registration Regulations (Northern Ireland) 2012 in order to;

- Enable the transfer of death and still-birth forms between the Medical Practitioner/Midwife and the Registrar, and then the Registrar and the funeral director alongside the current provision of providing the forms to the informant;
- Enable an informant of a death or still-birth to give information by telephone or approved electronic means alongside attendance in person at the registration office;
- Remove the requirement to sign the register if the registration has been completed by telephone or electronic means. The signature will be replaced by the name of the person professing to be the informant;
- Introduce the use of approved electronic means for the delivery and signing of documents;
- Enable a same-sex female couple to attend separately at the registration office to register a birth; and

- Enable a second female parent to register a still-birth without the mother being present, and to enable the re-registration of the still-birth if the mother disputes the details recorded by the second female parent.

Certificates of Baby Loss

- Introduce an enabling power to make regulations for a Baby Loss Certificate Scheme to recognise losses before 24 weeks of pregnancy.
31. The Committee's consideration of the clauses of the Bill was informed by the written and oral evidence it received. The Committee received 13 written submissions in response to its call for evidence and heard oral evidence from two of those stakeholders. The Committee also received 40 responses to a public survey on the Bill via Citizen Space.
32. A summary of the evidence received in relation to each Clause of the Bill and the Committee's consideration of the issues raised in written and oral evidence is set out below. The Committee's consideration of the clauses of the Bill was informed by its online survey and the written and oral evidence it received throughout the Committee Stage of the Bill. A copy of the results of the Committee's online survey can be found at **Appendix 6**.

General Remarks

33. In response to the call for evidence, the Committee received 40 responses to its online survey which ran from 12th May to 9th June 2025. A significant proportion, 36 responses were from individuals, including those who had suffered baby loss. The Committee received a further 13 written submissions from organisations including Councils, including stakeholder groups and health trusts. The Committee appreciates the time, effort and care that was taken to submit the evidence, especially from those who shared very personal experiences. The written submissions can be found at **Appendix 2**.
34. There were widely expressed views on the critical importance of this legislation, that it was a long overdue and that it should be introduced as soon as possible.
35. The consensus for the Deaths, Still-Births and Baby Loss Bill is extremely positive, with the recurring responses focusing on efficiency, modernisation,

freedom to choose and the removal of administrative burden during an already distressing time. The introduction of the Baby Loss Scheme is welcomed and viewed as providing recognition to individuals and families who have suffered baby loss. A response from one respondent was critical of the western medical system as a whole, which is outside of the scope of the Bill.

Clause by Clause Consideration of the Bill

Clause 1

36. **Clause 1** is the introductory clause of the Bill, advising what the 1976 Order and the 2012 Regulations are referring to in the Bill.

Clause 2

37. **Clause 2** provides for the Registrar General to approve the use of electronic means for the delivery or giving of documents, e.g. Medical Certificate of Cause of Death between the medical practitioner and the registrar, and for the signing of any documents required as part of the registration process.
38. The survey feedback is largely supportive of this clause with 85% in favour of using electronic means to facilitate the delivery or giving of these documents. 92% support the provision for the signing of any document required as part of the registration process in this manner.
39. Comments were positive particularly in relation to the modernisation of services, greater efficiency of the registration process and the reduction of stress for bereaved families, with consideration to be given for the 'in person' process to remain alongside to offer a choice.
40. Amongst the concerns raised related to access to technology and the security of the process with respect to hacking.
41. Recommendations included clarity for healthcare professionals and parents with respect to key documents required for the registration process.

42. Lisburn and Castlereagh City Council outlined its strong support that permanent legislation is put in place permitting remote registration of still births and deaths to continue. They state that this has transformed the registration of Deaths and Still-births, leading to a more efficient service, and first and foremost providing an empathetic and compassionate service to the bereaved.
43. Armagh City, Banbridge and Craigavon Council agreed with this assessment stating in their submission that these provisions have proved successful. The remote registration process has been welcomed by the majority of registration informants. Therefore, the approval of the use of electronic means as a permanent procedure is a welcomed modernisation of the registration process.

Clause 3

44. **Clause 3** imposes a duty on the Medical Practitioner or Registered Midwife to sign and deliver a certificate of still-birth to the registrar by electronic means. It also provides for a copy of the certificate to be provided to the qualified informant, if requested. The Clause removes the requirement for notice to the registrar to be in writing and for the person giving notice to provide a copy of the still-birth certificate as the registrar will have received this from the Medical Practitioner or Registered Midwife. It enables the certificate of registration to be issued to the funeral director, and also to the informant if they request it. The requirement for a person to give written notice to the registrar and the provision of the Certificate of Still-Birth when registration of the still-birth is to be delayed will also be removed.
45. The feedback was largely supportive of this clause with 95% support the provision for the Medical Practitioner or Registered Midwife to sign and deliver a certificate of still-birth and 85% agree with the removal of this requirement for notice to be given in writing.
46. Comments viewed this as a compassionate, practical step to ease stress during an already traumatic experience. It allows parents to receive necessary documentation more quickly, reduces emotional trauma, improves efficiency and reduces errors. Reference is made to it supporting the removal of outdated requirements such as written notices. This modernises and streamlines

procedures in line with compassionate care frameworks like the National Bereavement Care Pathway.

47. A recommendation was made to ensure trained healthcare professionals explain the process thoroughly.
48. During its deliberations, the Committee asked the Department for clarification on the inclusion of the wording “and a copy of such a certificate” or if the word “accompanied by such a certificate” needed to be moved.
49. The Department responded stating that the provision in the Bill is in order. The wording identified in Article 15(7) of the Births and Deaths Registration (NI) Order 1976 (“the 1976 Order”) has been temporarily changed by the six-monthly extension orders, but the Bill reflects the substantive wording. The Bill needs to reference to the text of the 1976 Order ignoring the effect of the temporary modification made by the Coronavirus Act 2020 (the “CA”). The CA did not amend the Order as such, only making a temporary modification – it is the underlying substantive text of the 1976 Order that the amendment needs to be based on.
50. Paul Frew MLA asked for clarification on this during the 2nd stage debate stating that:

Clause 3(6)(a) of the Bill asks: “for ‘written notice of a still-birth accompanied by such a certificate as is mentioned in paragraph (3)’” to be substituted. Should it not read: “written notice of a still-birth accompanied by such a certificate and a copy of such a certificate as is mentioned in paragraph (3)”?

51. The Department responded stating:

The wording of the Bill has been checked again and is correct. The 1976 Order originally contained the wording as shown below: 1976 Order, Article 15(7) “Where a registrar receives written notice of a still-birth accompanied by such a certificate as is mentioned in paragraph (3), he may, before registering the still-birth, give to the person sending the notice a certificate in the prescribed form that he has received notice of the still-birth.” This wording was amended by the Coronavirus Act 2020 (see paragraph 20(a) of Schedule 13) to remove the

words ‘accompanied by such a certificate’ and substitute the words ‘and a copy of such a certificate’. The words were substituted for the original text and not added to it. The Article then read: 1976 Order, Article 15(7) as amended by Coronavirus Act “Where a registrar receives written notice of a still-birth accompanied by such a certificate and a copy of such a certificate as is mentioned in paragraph (3), he may, before registering the still-birth, give to the person sending the notice a certificate in the prescribed form that he has received notice of the still-birth.” Under the Deaths, Still-births and Baby Loss Bill, the original 1976 Order language is proposed to be amended again, such that: 1976 Order, Article 15(7) as amended by the Bill “Where a registrar receives notice of a still-birth from an informant and a certificate delivered under paragraph (3) written notice of a still-birth accompanied by such a certificate as is mentioned in paragraph (3), he may, before registering the still-birth, give to the person sending the notice (a) the person who gave that notice, if the person so requests, and (b) The person who has control over, or who ordinarily effects the disposal of bodies at, any burial ground or other place at which it is intended to dispose of the body to a still-born child. a certificate in the prescribed form that he has received notice of the still-birth.”

52. In their oral evidence to the Committee, the Forget Me Not Group underlined that electronic registration and transmission of documents in such circumstances would be significantly less traumatic.
53. Armagh City, Banbridge and Craigavon Council agreed with this sentiment but also urged for clarity as to the prescribed procedure for medical practitioners issuing certificates of Cause of Death or Still-Birth electronically directly to the Registrar. They highlighted this is in every case and should supersede the issuing of certificates manually. As there is provision for the informant to also receive a copy of the certificate if requested, it should be clear this is in addition to and not instead of issuing to the Registrar as this leads to confusion, duplication and consequent delay in the registration process.
54. In response to this query the Department advised that prior to commencement of the death and still-birth provisions in the Bill, the General Register Office, in conjunction with the Department of Health, will be issuing guidance to registered medical practitioners. This will ensure that the procedure for the

issue of the Medical Certificates of Death and the Certificates of Still-birth is clearly understood. This guidance will emphasise that cause of death and still-birth certificates should be issued directly, by electronic means, to the registrar. It will also advise that a copy of the certificate can be issued to the informant if they request it and this action is alongside the issue of the certificate to the registrar.

55. During clause by clause deliberations, the Committee raised the issue of supplying guidance to registered medical practitioners to the Department directly, stating that this should be a priority to ensure that the procedures are understood.

Clause 4

56. **Clause 4** removes the requirement for the notice to extend the period of registration of the death from 5 to 14 days to be in writing and for the person giving the notice to provide a copy of the certificate as the registrar will have received this from the Medical Practitioner. The Medical Practitioner will be able to sign and deliver a Medical Certificate of Cause of Death to the registrar by electronic means and a copy of the certificate will be provided to the qualified informant if it is requested.
57. The responses are largely supportive of this clause with 92% supporting the removal of the requirement for such a notice to be in writing and 95% agreeing that the MP should be able to sign and deliver a MCCD to the Registrar by electronic means.
58. Comments were supportive especially due to reducing administrative burdens and prioritising compassionate care for grieving families. Support is evident for removing the need for hard-copy written notices to extend the registration period. It was noted that under COVID-19 emergency measures, digital extensions worked smoothly and spared grieving families unnecessary administrative steps. The electronic transmission of documents removes the onus from bereaved parents to manage paperwork. This change would reduce the risk of loss or misplacement, avoid cancelled appointments and delays, and minimise additional distress.

59. Recommendations were made that trained healthcare staff should clearly explain the new process to parents, emphasising that they will receive a copy of the MCCD or still-birth certificate for memory-making in line with the National Bereavement Care Pathway.
60. Lisburn and Castlereagh Council stated that there is strong support for permanent legislation to permit the remote registration of still births and deaths to continue. They state that the temporary provisions have transformed the registration of Deaths and Still-births, leading to a more efficient service, and first and foremost providing an empathetic and compassionate service to the bereaved.

Clause 5

61. **Clause 5** removes the requirement for a notice of death to the registrar to be in writing and for the person giving notice to provide a copy of the MCCD, as the registrar will have received this from the Medical Practitioner or Registered Midwife. The requirement to give written notice to the registrar and provision of the MCCD when registration of death is to be delayed is also removed.
62. This clause is largely supported with a focus on reducing administrative burden on grieving parents, enhancing efficiency and communication. It advocates for a streamlined, compassionate, and tech-enabled approach to handling bereavement-related paperwork.
63. The Northern Health and Social Care Trust advised the Committee that the proposal to make electronic registration of deaths and stillbirths a permanent option is both timely and necessary. This has proven to be effective during and since the COVID-19 pandemic. During times of grief, making processes easier can reduce additional stress. It is also practical and helpful for both staff and bereaved families.

Clause 6

64. **Clause 6** updates the means by which an informant can provide information to the registrar for the registration of a still-birth. This can be done in person, by telephone or by approved electronic means. It also specifies that a 'qualified

informant', who has attended in person, must sign the registration entry. It also amends forms to reflect the manner of registration.

65. The responses are largely supportive of this clause with 90% agreeing that the means by which an informant can provide information to the registrar for the registration of a still-birth can be changed in this manner.
66. Comments asserted support for choice and accessibility. Bereaved parents should be able to register a stillbirth in the manner most comfortable for them whether in person, by phone, or electronically to reduce the administrative burden. Criticism of past practices include personal accounts that highlight the distress caused by in-person registration and insensitive presentation of stillbirth certificates.
67. Recommendations include bereavement care training for Registrars to provide compassionate, appropriate support and clear guidance. In addition, clarification is required on the current timeframe, highlighting a discrepancy between the stated 42-day registration deadline and the NI Direct website's one-year timeframe.
68. The Committee asked the Department for their rationale for the removal of regulation 12(4), the Department advised that the amendment in clause 6(2)(a) does not actually remove regulation 12(4). Regulation 12(4) remains in its place, in the provisions about registration of births. Clause 6(2)(a) amends regulation 16(2), which states that regulation 12(4) applies to registration of still-births in the same way that it applies to births, except referring to Forms 2, 2A and 2B instead of Forms 1, 1A and 1B. The effect of the draft is to abandon that approach of applying-with modification and instead set out the relevant rule in new regulation 16(4), which has the same effect as existing regulation 16(2) but refers directly to Forms 2, 2A and 2B. The result is to set out a clearer and more coherent story regarding the registration of still-births, in regulation 16 as amended (with new paragraphs (2A), (4) and (5) alongside the existing paragraphs).

Clause 7

69. **Clause 7** updates the means by which an informant can provide information to the registrar for the registration of a death. This can be done in person, by telephone or by approved electronic means. It also specifies that a qualified informant, who has attended in person, must sign the registration entry. It also amends Forms to reflect the manner of registration.
70. This clause is viewed as making the process more efficient and easier for people, particularly in difficult circumstances. Allowing multiple channels for registration aligns with public expectations and provides flexibility while maintaining process integrity through in-person signatures when necessary. Although support for choice is evident, it has also been suggested that electronic means only ensures traceability.
71. In their written submission, Armagh City, Banbridge and Craigavon Council stated that the amendments referred to provide for the omission of the informant's signature in the case of a remote registration. The informant is still required to sign if attending in person. The remote registration process has mostly proved successful for all parties involved, in particular those informants experiencing traumatic life events who are dealing with personal grief and loss.
72. They noted some minor issues, such as confirming details taken by telephone, an increase in errors and correction of same, nevertheless the process has been largely successful and making such provisions permanent is a welcomed modification.

Clause 8

73. **Clause 8** introduces the Schedule to the Bill, which makes minor amendments to certain provisions in the 1976 Order and the 2012 Regulations relating to births and still-births.

The Committee asked the Department for clarification as to why the text of amendments is in a schedule rather in the Bill's narrative. The Department responded by stating that the structure of a Bill and the arrangement of material within it is considered carefully in each case by legislative counsel, having regard to the content of the Bill and seeking to present the material in the most clear and coherent way (having regard also to various drafting rules and

conventions). This includes, in cases like the present one, the choice between presenting material in the body of the Bill or instead in a Schedule. The use of Schedules to present groups of minor amendments with a connected theme is commonplace. All Schedules need to be introduced by a clause in the body of the Bill, which is what clause 8 does.

Clause 9

- 74. **Clause 9** ensures that any amendments introduced to the 2012 Regulations through the Bill can be amended by a further exercise of the powers under which the 2012 Regulations were made.
- 75. Responses are mainly in favour with 87% stating they agree, with comments citing the flexibility to keep up with technological and social changes as a positive.
- 76. Armagh City, Banbridge and Craigavon Council outlined that the amendments referred to in Clauses 8 and 9 will allow same-sex female parents who are not married or in a civil partnership to register a Birth or Still-Birth in the same manner as heterosexual couples and that they are content with this update to the registration process.

Clause 10

- 77. **Clause 10** repeals the temporary provisions in the Coronavirus Act 2020.
- 78. Survey responses are supportive of this clause with 82% in favour. There is recognition that temporary measures were necessary under the Coronavirus Act, but there is support for the new Bill making processes permanent without causing additional trauma to bereaved families.
- 79. Recommendations included sensitive communication with parents and updates to healthcare professionals and funeral directors and consistency across different Health Trusts.
- 80. The Committee sought clarification that all provisions within the Coronavirus Act have been removed from both the 1976 Order and 2012 Regulations. The Department advised that the temporary modifications to the Births and Deaths

Registration (NI) Order 1976 and the Civil Registration Regulations (NI) 2012 were introduced through the provisions in section 18(3) and Part 3 of Schedule 13 of the Coronavirus Act 2020. Clause 10 of the Bill repeals section 18(3) and Part 3 of Schedule 13 to the Coronavirus Act; this will remove all the temporary modifications to the 1976 Order and the 2012 Regulations contained in the Coronavirus Act.

81. Armagh City, Banbridge and Craigavon Council welcomed the repeal of the temporary provisions of the Coronavirus Act 2020.

Clause 11

82. **Clause 11** gives the Department for Finance the power to make Regulations to introduce a Baby Loss Certification Scheme. It sets out the provisions that maybe included in the Regulations such as the conditions and information on the certificates, who may apply, the form of application and for the charging of fees. The clause also specifies that a draft of the secondary legislation must be laid before and approved by the Assembly before the Regulations can be made, using the Draft Affirmative Procedure.
83. 92% of survey responses agreed that the Department of Finance should be given the power to introduce such a scheme with 75% agreeing that the draft of any secondary legislation should be laid before and approved by the Assembly before the Regulations can be made.
84. The responses for this clause are generally positive. Personal testimonies include many parents who have lost a baby before 24 weeks and have no official recognition of their baby's existence. A certificate would provide validation, a sense of acknowledgment, and support mental health during grief. For many, seeing their baby's name in print is profoundly meaningful. One response expressed discomfort with using the term "baby loss" for miscarriages, recommending that it should be reserved for stillbirths or cot deaths, proposing differentiating "pregnancy loss" from "baby loss". A response included support for providing the first certificate free and charging only for replacements or additional copies.

85. The introduction of draft secondary legislation received some criticism mainly as it was felt that this would delay the introduction of the baby loss scheme, highlighting that the scheme has already shown benefits in England, therefore approval from the Assembly should not be required.

86. During the Committee's deliberations, Members requested a detailed rationale for the explicit provision for the possibility of charging within the Bill. The Department responded by stating:

It is our expectation that there will be no charge when someone applies for a Baby Loss Certificate. This, and a range of other features of the scheme are a matter for public consultation. The scheme is intended to be a compassionate service for those who wish to avail of it, and we do not want to place any barriers to accessing the service. GRO is required to be a self-funding part of the department, and a fee is charged in relation to the provision of life event certificates. The only exceptions are: short death certificates when the birth and death of an infant under one are being registered at the same time, and, still-birth certificates. The provision for charging is included in the Bill in case it is needed in the future to allow us to levy a charge if required. This could be for someone requiring multiple copies of a certificate, for amendments to the certificate: for instance, the correction of any erroneous information supplied or the inclusion of further information previously omitted.

87. During clause by clause deliberations, the Committee agreed that there should be no charge in principle for a Baby Loss Certificate. They noted the Department's view that if charging were to be introduced it would have to come back through the Committee for Finance through subordinate legislation per the draft affirmative procedure thus allowing the statutory rule to be amended and then having to be passed through a vote by the Assembly. This means that a charge could not be introduced for a baby loss certificate without the full consent of the Assembly. It should be noted that the public consultation on the Scheme is ongoing and asks about charges in a range of circumstances.

88. The Committee also requested information on the need for a legislative base for the Baby Loss Certificate Scheme, the Department advised that their understanding is that a new legal basis will be required for a scheme in

Northern Ireland. This arises from the current legal framework, and the absence of a more general power in the relevant registration legislation in Northern Ireland.

89. The Committee raised a number of issues that were raised in oral evidence by the Forget Me Not group. In response, the Department advised the Committee that as far as possible the issues raised with regards to sensitive wording have been taken on board in the consultation paper. The consultation exercise will provide people who have suffered a loss the opportunity to have their say with regards to the content of the certificate, who can apply and the time limit for applying for a baby loss certificate, all issues raised by the Group.
90. The Department has also noted the issue raised regarding specialist counselling support services for persons who have suffered a loss and will consider highlighting the services available when the operational aspects of the scheme are being considered. For the issue highlighted in the case of a still-birth, the Department has advised that a still-birth is registered as an individual event and a certificate relating specifically to the still-birth is issued.
91. A birth and death for an infant child under 1 year old is registered as a joint event with the parents only have to complete one form for the registration as opposed to two separate forms. Individual short birth and short death certificates are issued following the registration. The current policy was based on feedback from parents registering an infant death as they felt that it was distressing having to complete a birth registration form and a death registration form.
92. The Committee also received confirmation from the Minister that officials will liaise with all key stakeholders, including the Forget Me Not Group, as part of the public consultation exercise. The Department is committed to ensuring as broad a range of input as possible is gathered through this consultation, to ensure that everything can be done to meet the needs and expectations of those who have experienced the loss of a child. It is vital that the scheme is accessible to all who can benefit from it in any way and is fit for purpose.
93. The Committee received a number of written submissions as regards to the introduction of a Baby Loss Certificate Scheme. The Northern Health and Social

Care Trust, Miscarriage Association, Lisburn and Castlereagh City Council and Armagh City, Banbridge and Craigavon City Council all wrote in support of the scheme.

Clause 12 and 13

94. **Clause 12** is the commencement clause and **Clause 13** gives the short title.

Schedule

95. The Schedule of the Bill contains a number of minor amendments to the 1976 Order and the 2012 Regulations to enable both parents in same-sex female couples who are not married to or in a civil partnership with each other to register the birth of a child by attending separately at the registration office. It will also enable the second female parent to register a still-birth on her own with the mother being able to re-register the still-birth if she does not agree with the information entered by the second female parent.
96. The responses received represent varied views on the Schedule. 77% supported the amendments with 67% agreeing with the approach. 67% felt there was nothing else that the clause should include.
97. Several responses support making the birth registration process fair and equitable for same-sex couples, criticising inefficiencies and unnecessary procedures such as separate attendance and re-registration.
98. Evangelical Alliance UK acknowledge the need for legal clarity and recognition for all families, however, they express concern over removing gendered terms like "mother" and "father" from legislation. They stress the importance of preserving these terms due to their relational and biological significance and reaffirm a traditional view of marriage. Responses also include that registration should be carried out by the birth mother/authorised by birth mother and/or biological parent.
99. Recommendations include financial and additional support, no timeframe for registration and the ability to backdate.

100. The Committee requested clarification on a potential inequality faced by unmarried same sex couples living in NI but undertaking IVF treatment in the Republic of Ireland – will the non-birth mother be named on a birth certificate.
101. The Department responded by stating that under Westminster legislation, parents who undertake fertility treatment have different registration rights depending on their marital status and where they receive treatment. Under the Human Fertilisation and Embryology Act 2008, married or civil partnered couples may name two parents on the birth certificate, irrespective of where the treatment took place. But where either of those couples are neither married nor in a civil partnership then a restriction based on where the treatment took place applies which will determine if the non-birth mother can be included on the birth certificate. General Register Office officials have carried out initial investigations into this issue and have contacted officials in other jurisdictions who have advised that they are not aware of any imminent planned changes in the Westminster legislation. Resolving this matter will require engagement with the UK Government over the HFE Act and will take time to progress therefore has not been considered for inclusion in the Bill. Officials immediate focus is on the Bill for the permanent replacement of the temporary provisions in the Coronavirus Act 2020 for the registration of deaths and still-births and the establishment of a Baby Loss Scheme. Officials intend to return to this matter once this Bill has been progressed.
102. The Committee also asked whether the omission of “father” takes away the provision for a biological father to be included on a birth certificate. The Department advised that the inclusion of a biological father’s details on a birth certificate along with the mother and other parent’s details is beyond the purpose of the current Bill. Current registration legislation prescribes that a birth certificate can contain the details relating to the mother, or the mother and father, or the mother and second female parent (depending on the circumstances). There is no provision made for the inclusion of a biological father along with the mother and second female parent in the case of a same-sex female couple registration. This is also the position in other jurisdictions within the UK.

103. Lisburn and Castlereagh City Council welcomed the measures being taken to address the current differences in the registration of births and still births between same-sex female couples and opposite-sex couples. All legislation that promotes equality is to be supported.

Other issues raised in the consideration of the Bill

104. A portion of the responses advocate for urgency in passing the Bill. There is a reference to language, specifically "pregnancy loss" instead of "baby loss" when referring to miscarriage, for clarity and sensitivity. The Department has advised they will review responses to the public consultation exercise to ascertain any concerns with the terminology and will re-consider the use of the term 'baby loss', if necessary.
105. Sands stress the emotional impact of having to register births and deaths after termination for foetal anomalies post-20 weeks. They place emphasis on the need for sensitive bereavement care and support during this process.
106. Evangelical Alliance UK stresses incorporation of religious and cultural preferences into healthcare decisions. They recommend the NHS Race & Health Observatory report as a resource for addressing ethnic health inequalities.
107. The Committee requested a review of terminology "disposal of the body" on documentation and forms in order to eliminate distress to families if seen on documents used by undertakers. The Department advised they will carry out a review of the terminology used in death and still-birth registration forms contained within the Civil Registration Regulations (NI) 2012 and will consider amendment, if necessary. As the wording on the forms is prescribed in legislation, any change to the forms would require fresh legislation. GRO plan to consider and carry out a full review of the list of qualified informants in future.
108. The Committee advised the Department that certificates not a substitute for improving data collection around the number of miscarriages and asked for the best means to capture this information. The Department recognised the importance of good data to improve our understanding and knowledge of Baby and early pregnancy loss, as well as to strengthen policy. It is of the

Department's understanding that the responsibility for this policy area lies with the Department of Health, and they will bring this to their attention.

109. In their submission, the Justice Committee highlighted the importance of ensuring that the necessary checks and balances are in place in respect of the handling and retention of sensitive data when considering the Bill. In response, the Department stated that the General Register Office and the District Registration Offices use the Northern Ireland Registration Office System for the registration and retention of life event information. The system and registration network are managed by GRO and IT Assist to ensure optimum functionality and robust security thus safeguarding the personal data provided by informants. Departmental Data Protection policies are strictly adhered to in respect of all data with appropriate restrictions in place for the handling and retention of sensitive data.
110. The Committee also requested a communication campaign to inform people about the implementation of the Bill and permanent provisions for remote registrations. The Department stated that the provision for the registration of deaths and still-births remotely has been in successful operation for the last five years and is considered to be the normal registration process. The Department has informed people about the implementation of the Bill through:
- Press releases;
 - Information provided on DoF and NI Direct websites;
 - Correspondence with the District Registrars located in the Councils;
 - Social Media; and
 - The Baby Loss Certificate Scheme consultation exercise
111. Belfast City Council raised the issue of a long-form birth certificate being free of charge in the case of a still-birth as this also has the cause of death stated and also raised the waiving of fee for marriage certificates when one of the parties to be married is terminally ill with limited life expectancy. The Department has confirmed that no fee is charged for a still-birth certificate issued at point of registration and they will consider the policy around fees for the issue of full

birth certificates and full death certificates for an infant death and for marriage certificates for a terminally ill person – as well as the other life events services we provide – when the next Fees Order is taken forward.

112. The Miscarriage Association called for an expansion of bereavement leave. The Department outlined that this issue is outside the remit of the Department of Finance, so is not within the intended scope of the Bill. It is our understanding that the responsibility for this area lies with the Department for Economy and we will bring this comment to their attention.
113. Armagh City, Banbridge and Craigavon Council raised an issue from The Births and Deaths Registration NI Order 1976 Article 21(4), specifically on the term “Person procuring/who procured the disposal of the body”. This refers to the person employing the Funeral Director. It is an archaic, confusing and cumbersome description requiring explanation. Many informants are reluctant to register under such a description and have expressed the need for a more secular. Another term used is, “Person taking charge of the body” this refers to the Funeral Director and therefore an amendment to simply state Funeral Director or Undertaker would be a more acceptable secular term. The Department replied that the GRO recognises that the terminology used in the list of potential informants for registering a death, which include procuring disposal of the body and taking charge of the body, could be difficult to understand for informants registering a death. GRO plan to consider and carry out a full review of the list of qualified informants in future.

Citizen Space Comments

114. There were a number of issues raised by comments following the call for evidence on Citizen Space. These comments and departmental responses are outlined below.
115. A concern was raised regarding technology; especially for those persons who do not have the necessary access to technology to utilise electronic means to register. They asked for confirmation that the ‘in person’ process will remain. In addition, security of the electronic method has been raised as a concern, with respect to hacking. The Department confirmed that the ‘in person’ registration

process will remain as an option alongside the remote registration process. At this point in time the remote registration process will be by telephone only – online remote registration will not be available at this point.

116. There is a need to ensure trained Healthcare professionals explain the process for providing still-birth and death certificates thoroughly. The Department is planning, in liaison with the Department of Health, to issue guidance to healthcare professionals on the registration process and their role within it. This will enable them to be in a position to advise the next of kin on the steps they need to take with regards the Medical Certificate of Cause of Death and the Certificate of Still-Birth.
117. Bereavement care training for Registrars to provide compassionate, appropriate support and clear guidance. In addition, clarification is required on the current timeframe, highlighting a discrepancy between the stated 42-day registration deadline and one year timeframe as per the NI Direct website. The Department will consider the provision of bereavement care training for registrars to enable them to provide appropriate support to bereaved families who are carrying out a death or still-birth registration. It is assumed that the comment regarding 42 days relates to the registration of births and still-births. The Births and Deaths Registration (NI) Order 1976 provides that births and still-births are registered within 42 days (Article 10), and where this has not occurred a registrar may (but is not obliged to) serve a notice on a qualified informant requiring them to come forward with the relevant particulars, in which case the informant must comply (Article 12). Any birth registrations required after a year from the date of birth has passed, require the written approval of the Registrar General (Article 13). The Department will review the birth and still-birth pages on NI Direct and update as necessary.
118. Sensitive communication with parents and updates to healthcare professionals and funeral directors with consistency across different Health Trusts. It is assumed that this comment relates to the registration of deaths and still-births. The Department is planning, in liaison with the Department of Health, to issue guidance to healthcare professionals on the registration process and their role within it. Communications and guidance will also be issued to funeral directors

to provide them with information on the remote registration procedures for deaths and still-births.

119. Discomfort with using the term “baby loss” for miscarriages, recommending that it should be reserved for stillbirths or cot deaths, proposing differentiating “pregnancy loss” from “baby loss”. The Department will review responses to the public consultation exercise to ascertain any concerns with the terminology and will re-consider the use of the term baby loss’, if necessary. The scheme is designed to be a compassionate scheme that will enable all parent(s) who have suffered a loss to up to the end of 24 weeks of pregnancy to obtain a certificate.
120. Concern over removing gendered terms like "mother" and "father" from legislation - these terms should be preserved due to their relational and biological significance and reaffirm a traditional view of marriage. The Department responded that this is not within the intended scope of the Bill. Current registration legislation prescribes the terms ‘mother’ and ‘father’ for the registration of a child to an opposite-sex couple and mother and second female parent for a same-sex couple registration. The Schedule to the Bill does not alter the registration requirements but rather changes and equalises the way that couples can register a birth or still-birth.
121. Registration should be carried out by the birth mother/authorised by birth mother and/or biological parent. The Department states that Civil registration legislation provides for a number of scenarios for the registration of a birth depending on the situation. The first option is for the mother/father of the child to register the birth but there are scenarios where this is not possible. Therefore, there is provision for other parties to register the birth such as, another family member, a person present at the birth, the occupier of the premises where the child was born or the person having charge of the child i.e. a social worker.
122. There was a comment on financial support for burial and bereavement. The Department replied that this is not within the intended scope of the Bill. It is outside the remit of the Department. It is our understanding that the responsibility for this area lies with the Department for Communities and we will bring this comment to their attention.

123. An issue was raised regarding there being no timeframe or deadline for registration. The Department stated that the ability to request a baby loss certificate for an event that has occurred in the past is one of the issues being considered in the public consultation exercise. The Department will be guided by the responses to this question.
124. A question was raised on the ability to backdate, with no limit on retrospectively registering for a certificate. The Department replied that the ability to request a baby loss certificate for an event that has occurred in the past is one of the issues being considered in the public consultation exercise. The Department will be guided by the responses to this question.
125. A comment was made on the emotional impact of having to register births and deaths after termination for foetal anomalies post-20 weeks - emphasis on the need for sensitive bereavement care and support during this process. The Department recognises that registrations can be a very distressing situation for the parent(s). Registration staff in local council registration offices handle all registrations as sensitively as possible and help the parent(s) through the registration process.
126. A comment was made over the incorporation of religious and cultural preferences into healthcare decisions - recommend the NHS Race & Health Observatory report as a resource for addressing ethnic health inequalities. The Department replied that this is not within the intended scope of the Bill. It is outside the remit of the Department. It is our understanding that the responsibility for this area lies with the Department of Health and we will bring this comment to their attention.
127. There were concerns raised regarding the timeframe for the introduction baby loss certificate – there was a consensus if for it to be introduced without delay. The Department replied that is moving forward at pace for the implementation of the baby loss certificate scheme.

Clause by Clause Scrutiny of the Bill

128. Having considered the written and oral evidence received on the Bill, the Committee undertook its formal Clause-by-Clause consideration at its meeting on 10 September 2025 - see Minutes of Proceedings in **Appendix 3** and Minutes of Evidence in **Appendix 4**.

Clause 1

129. The Committee was content with this clause as drafted by the Department.

Clause 2

130. The Committee was content with this clause as drafted by the Department.

Clause 3

131. The Committee was content with this clause as drafted by the Department.

Clause 4

132. The Committee was content with this clause as drafted by the Department.

Clause 5

133. The Committee was content with this clause as drafted by the Department.

Clause 6

134. The Committee was content with this clause as drafted by the Department.

Clause 7

135. The Committee was content with this clause as drafted by the Department.

Clause 8

136. The Committee was content with this clause as drafted by the Department.

Clause 9

137. The Committee was content with this clause as drafted by the Department.

Clause 10

138. The Committee was content with this clause as drafted by the Department.

Clause 11

139. The Committee was content with this clause as drafted by the Department.

Gerry Carroll MLA recorded his dissent regarding agreement of the clause as drafted on the matter of the potential of a future charge for a Baby Loss Certificate.

Clause 12

140. The Committee was content with this clause as drafted by the Department

Clause 13

141. The Committee was content with this clause as drafted by the Department

Schedule

142. The Committee was content with the Schedule as drafted by the Department

Long Title

143. The Committee was content with the Long Title as drafted by the Department

Links to Appendices

Appendix 1: Memoranda and Papers from the Department for Finance

[View Memoranda and Papers supplied to the Committee by the Department](#)

Appendix 2: Written Submissions

[View Memoranda and Papers supplied to the Committee by other individuals or organisations](#)

Appendix 3: Minutes of Proceedings

[View Minutes of Proceedings of Committee meetings related to the report](#)

Appendix 4: Minutes of Evidence

[View Minutes of Evidence from evidence sessions related to the report](#)

Appendix 5: Research Papers

[View Research Papers produced by the Assembly's Research and Information Service \(RaISe\) in relation to the report](#)

Appendix 6: Committee Survey Results

[View Committee Survey Results in relation to the report](#)

Appendix 7: List of Witnesses that gave evidence to the Committee

- Forget Me Not
- National Association of Funeral Directors

You may re-use this publication (not including images or logos) free of charge in any format or medium, under the terms of the Open Northern Ireland Assembly Licence.

[Find out more about the Open Northern Ireland Assembly Licence.](#)

This Report can be made available in a range of formats including large print, Braille etc. For more information please contact:

Committee for Finance

Peter Hall, Committee Clerk

Northern Ireland Assembly

Parliament Buildings

Ballymiscaw

Stormont

Belfast BT4 3XX

Telephone: 028 90 521903

Email: committee.finance@niassembly.gov.uk

X (formerly Twitter): @NIAFinance
