

What is mPINC™?

mPINC is CDC's national survey of Maternity Practices in Infant Nutrition and Care.

What does mPINC measure?

The survey measures care practices and policies that impact newborn feeding, feeding education, staff skills, and discharge support.

Who is included in mPINC surveys?

CDC invites all hospitals with maternity services in the U.S. and territories to participate. In 2022, 10 of 11 eligible hospitals in Vermont participated (91%).

Implementing best practices and policies in maternity care help to improve breastfeeding outcomes. Use your state's mPINC data to bring together partners, identify gaps, celebrate achievements, and prioritize next steps.

Immediate Postpartum Care	National Subscore	84	Vermont Subscore	90	Vermont Hospitals with Ideal Response
Newborns remain in uninterrupted skin-to-skin contact for at least 1 hour or until breastfed (vaginal delivery)					90%
Newborns remain in uninterrupted skin-to-skin contact for at least 1 hour or until breastfed (cesarean delivery)					60%
Mother-infant dyads are NOT separated before rooming-in (vaginal delivery)					100%
Newborns are monitored continuously for the first 2 hours after birth					70%
Rooming-In	National Subscore	76	Vermont Subscore	87	Vermont Hospitals with Ideal Response
Mother-infant dyads are rooming-in 24 hours/day					90%
Routine newborn exams, procedures, and care occur in the mother's room					50%
Hospital has a protocol requiring frequent observations of high-risk mother-infant dyads					90%
Feeding Practices	National Subscore	81	Vermont Subscore	92	Vermont Hospitals with Ideal Response
Few breastfeeding newborns receive infant formula					90%
Hospital does NOT perform routine blood glucose monitoring on newborns not at risk for hypoglycemia					100%
When breastfeeding mothers request infant formula, staff counsel them about possible consequences					70%

Feeding Education & Support	National Subscore	94	Vermont Subscore	97	Vermont Hospitals with Ideal Response
Mothers whose newborns are fed formula are taught feeding techniques and how to safely prepare/feed formula					80%
Breastfeeding mothers are taught/shown how to recognize/respond to feeding cues, to breastfeed on-demand, and to understand the risks of artificial nipples/pacifiers					80%
Breastfeeding mothers are taught/shown how to position and latch their newborn, assess effective breastfeeding, and hand express milk					80%
Discharge Support	National Subscore	78	Vermont Subscore	83	Vermont Hospitals with Ideal Response
Discharge criteria for breastfeeding newborns requires direct observation of at least 1 effective feeding at the breast within 8 hours of discharge					50%
Discharge criteria for breastfeeding newborns requires scheduling of the first follow-up with a health care provider					100%
Hospital's discharge support to breastfeeding mothers includes in-person follow-up visits/appointments, personalized phone calls, or formalized, coordinated referrals to lactation providers					100%
Hospital does NOT give mothers any of these items as gifts or free samples: infant formula; feeding bottles/nipples, nipple shields, or pacifiers; coupons, discounts, or educational materials from companies that make/sell infant formula/feeding products					80%
Institutional Management	National Subscore	76	Vermont Subscore	74	Vermont Hospitals with Ideal Response
Nurses are required to demonstrate competency in assessing breastfeeding (milk transfer & maternal pain), assisting with breastfeeding (positioning & latch), teaching hand expression & safe formula preparation/feeding, and demonstrating safe skin-to-skin practices					80%
Hospital requires nurses to be formally assessed for clinical competency in breastfeeding support/lactation management					60%
Hospital records/tracks exclusive breastfeeding throughout the entire hospitalization					90%
Hospital pays a fair market price for infant formula					60%
Hospital has 100% of written policy elements [§]					30%

*Scores range from 0 to 100, with 100 being the best possible score. The "Total Score" is an average of the subscores for the 6 subdomains.

[§]See the scoring algorithm for specific items at www.cdc.gov/breastfeeding/data/mpinc/scoring.htm

NOTE: The mPINC survey was redesigned in 2018. Results from the 2022 mPINC survey cannot be compared with results from 2007-2015 mPINC surveys.

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Questions about the mPINC survey?
Visit www.cdc.gov/breastfeeding/data/mpinc to learn more.

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