NEBRASKA

CDC National Survey: Maternity Practices in mPINC Infant Nutrition & Care

2015 REPORT

Changes in maternity care improve breastfeeding outcomes.

CDC's mPINC Reports have what you need to understand and improve care across Nebraska:

- → 2015 survey scores and ranks
- → Action ideas to improve outcomes
- → Trends across all mPINC surveys:

New! — *TOTAL SCORES* averaging all hospitals' scores

- — *POLICIES* for staff training and infant feeding care
- — *PRACTICES* in supplementing breastfed infants
- — *PROTOCOLS* for support after discharge to home

What is mPINC?

mPINC is CDC's national survey of maternity practices in infant nutrition and care.

What does mPINC measure?

Survey questions measure infant feeding care practices, policies, and staffing expectations in place at hospitals that provide maternity services.

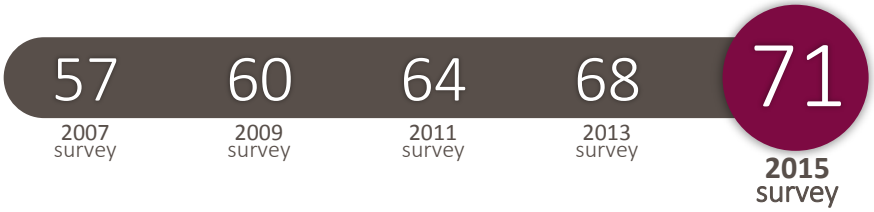
Who is included in mPINC surveys?

Every other year, CDC invites all maternity hospitals* nationwide to participate in mPINC.

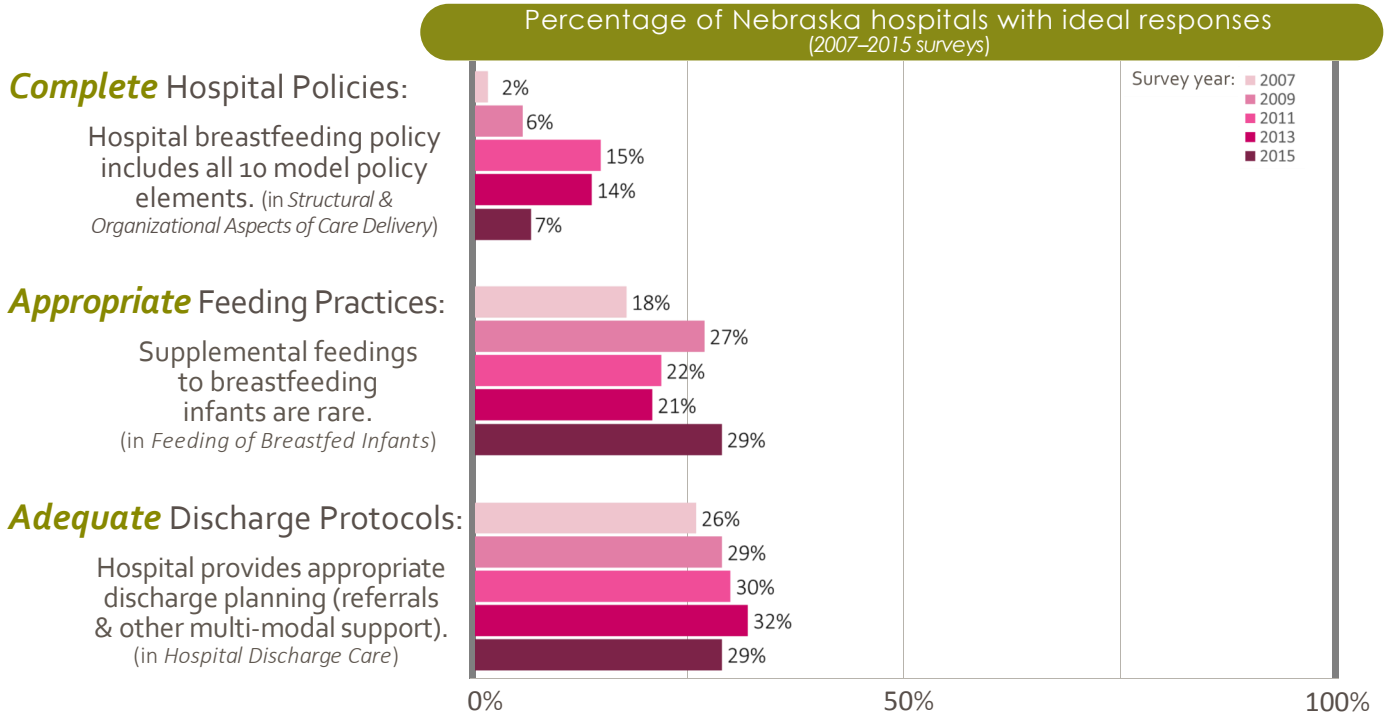
In 2015, **91%** of eligible Nebraska hospitals took part. (n=48)

* In states with free-standing birth centers, this includes hospitals and birth centers.

Compare ***TOTAL SCORES*** from 2007 through 2015:



Examine ***IDEAL RESPONSES TO SELECTED ITEMS*** in Nebraska hospitals for 2007–2015:



National Center for Chronic Disease Prevention and Health Promotion
Division of Nutrition, Physical Activity, and Obesity

mPINC Nebraska 2015 Survey Results

Make mPINC work for you.

Use your mPINC data to bring together partners, identify gaps, celebrate achievements, and prioritize next steps.

Total **SCORE*** (out of 100) **71**

Overall **RANK**** (out of 53) **50th**

USE THESE RESULTS.

Action ideas:

Use your mPINC summary data to:

→ **Help** hospitals meet Joint Commission Perinatal Care Core Measure breastfeeding requirements.

→ **Ensure** hospital staff across Nebraska are trained in infant feeding care.

→ **Celebrate** the 1 Baby-Friendly hospital in Nebraska and show how to use mPINC to work toward Baby-Friendly designation.

Learn how mPINC works.

See questionnaires, past survey results, and read about mPINC.

→ Go to www.cdc.gov/mpinc or

→ Scan this code:

mPINC Care Dimensions

Ideal response to each care dimension item

	Percentage of hospitals with ideal response	Care Dimension SUBSCORES
Labor and Delivery Care		83
Initial skin-to-skin contact is at least 30 min w/in 1 hour (vaginal births)	73%	
Initial skin-to-skin contact is at least 30 min w/in 2 hours (cesarean births)	70%	
Initial breastfeeding opportunity is w/in 1 hour (vaginal births)	72%	
Initial breastfeeding opportunity is w/in 2 hours (cesarean births)	75%	
Routine procedures are performed skin-to-skin	38%	
Feeding of Breastfed Infants		87
Initial feeding is breast milk (vaginal births)	72%	
Initial feeding is breast milk (cesarean births)	72%	
Supplemental feedings to breastfeeding infants are rare†	29%	
Water and glucose water are not used	89%	
Breastfeeding Assistance		83
Infant feeding decision is documented in the patient chart	98%	
Staff provide breastfeeding advice & instructions to patients	85%	
Staff teach breastfeeding cues to patients	81%	
Staff teach patients not to limit suckling time	56%	
Staff directly observe & assess breastfeeding	81%	
Staff use a standard feeding assessment tool	73%	
Staff rarely provide pacifiers to breastfeeding infants	22%	
Contact Between Mother and Infant		84
Mother-infant pairs are not separated for postpartum transition	83%	
Mother-infant pairs room-in at night	94%	
Mother-infant pairs are not separated during the hospital stay	52%	
Infant procedures, assessment, & care are in the patient room	2%	
Non-rooming-in infants are brought to mothers at night for feeding	91%	
Hospital Discharge Care		57
Staff provide appropriate discharge planning† (referrals & other multi-modal support)	29%	
Discharge packs containing infant formula samples and marketing products are not given to breastfeeding patients	58%	
Staff Training		35
New staff receive appropriate breastfeeding education	4%	
Current staff receive appropriate breastfeeding education	15%	
Staff received breastfeeding education in the past year	31%	
Competency assessment in bf management & support is at least annual	21%	
Structural & Organizational Aspects of Care Delivery		68
Breastfeeding policy includes all 10 model policy elements†	7%	
Breastfeeding policy is effectively communicated	70%	
Facility documents infant feeding rates in patient population	60%	
Facility provides breastfeeding support to employees	58%	
Facility does not receive infant formula free of charge	21%	
Breastfeeding is included in prenatal patient education	87%	
Facility has a designated staff member who coordinates lactation care	78%	

* Scores range from 0 to 100 for each item, dimension of care, facility, and state. The highest, best possible score for each is 100. Each facility and state's "Total Score" is made up of subscores for practices in each of 7 dimensions of care.

** Ranks range from 1 to 53; 1 is the highest rank. In case of a tie, both are given the same rank.

† Key items highlighted on page 1.

Suggested Citation:
Centers for Disease Control and Prevention. Nebraska 2015 Report, CDC Survey of Maternity Practices in Infant Nutrition and Care. Atlanta, GA. September 2016.