

## Expert Consultation Summary

### Overview

On July 1st and 2nd, 2014, the Centers for Disease Control and Prevention (CDC) consulted with non-CDC experts to obtain their views on CDC's Maternity Practices in Infant Nutrition and Care (mPINC) survey. These experts provided their views on improvements to the administration, content, and dissemination of CDC's mPINC survey as well as their views on the availability of data, frequency of data collection, clarity of instructions, reporting and reporting formats, and data elements to be reported. These individuals had expertise and experience in one or more of the following areas: clinical and public health medical care, nursing care, and lactation management and support, maternal and child health epidemiology, state public health program implementation, quality improvement, hospital accreditation and certification processes, and participation in and utilization of the mPINC survey. This document summarizes the views provided to CDC from expert consultation.

### Survey Administration

The experts provided their views and suggested improvements to 1) the screening strategy to better adapt to new modes of communication and use of current technologies; 2) guidance on how to complete the survey and improvements to the clarity of instructions; 3) monitoring of clinical domains of maternity practices for the survey administration and data elements; and 4) frequency of data collection and survey administration.

### Survey Content

The experts provided their views and suggested improvements to ensure that data elements to be reported and survey items align with the Baby-Friendly Hospital Initiative *Ten Steps to Successful Breastfeeding* and other best practice assessments. The experts suggested adding data elements to the survey to establish baseline prevalence of breastfeeding supportive practices that have become areas of focus since the mPINC survey was first launched in 2007. Experts suggested expanding the scope of survey and data elements to include items that relate to practices promoting the continuity of care from prenatal education to arranging follow up care for mother-infant dyads experiencing breastfeeding difficulties at the time of hospital discharge.

### Availability of Data and Dissemination of Survey Results

The experts provided their views on availability of data and suggested improvements to the communication infrastructure, such as enhancing reporting formats and report dissemination by engaging more stakeholders, providing standardized communication tools, and promoting awareness and use of mPINC data by state health departments. The experts provided their views regarding resources and funding for state health departments and breastfeeding coalitions, so that these stakeholders can provide technical assistance to maternity hospitals to help hospitals to understand and use their mPINC data to improve quality of maternity care practices supportive of breastfeeding.

### Discussions and Additional Suggestions

Experts provided their views on additional topics that arose during consultation. Experts provided views on the potential loss of the ability to analyze trends in hospital specific mPINC scores since the initiation of the survey in 2007, in the event that the mPINC survey items are revised beginning with the 2018 administration. Experts discussed the importance of ensuring that data elements and survey items are relevant to current practices, and that this relevance may outweigh the benefit of analyzing historical trends in hospital practices. Other topics experts provided their views on included electronic data collection and dissemination and data utilization.