Breastfeeding Data

mPINC™ Frequently Asked Questions

For Everyone

MARCH 24, 2025

WHAT TO KNOW

Get answers to some of the most frequently asked questions about the Maternity Practices in Infant Nutrition and Care (mPINC) survey.

2024 mPINC survey

CDC's 2024 mPINC Hospital Reports have been sent to participating hospitals.

An electronic version of each hospital's report was sent to the e-mail of the survey recipient in November 2024. If you are unable to locate your hospital's mPINC report, please e-mail mpinc@cdc.gov with your request and include the hospital name and address. We also invite you to sign up for our CDC-mPINC-UPDATE listserv where we send out periodic updates about CDC's mPINC survey.

Se ha enviado a los hospitales participantes el informe correspondiente a cada hospital en relación con la encuesta de los CDC sobre las mPINC del 2024.

En noviembre de 2024 se envió a la dirección de correo de la persona encargada de recibir la encuesta en cada hospital, una versión electrónica del informe sobre el hospital correspondiente. Si usted no puede encontrar el informe sobre las mPINC correspondiente a su hospital, escriba a mpinc@cdc.gov para solicitarlo e incluya el nombre y la dirección del hospital.

How do I get a copy of my facility's mPINC report?

2018, 2020, 2022, and 2024 hospital reports are available. If you cannot locate your hospital's mPINC report, you may request a copy. Email the hospital's name and address to mpinc@cdc.gov.

How do hospitals benefit from participation in the mPINC survey?

Once data collection and analysis are complete, CDC sends participating hospitals an individualized, confidential report. The report includes their survey-results summary and a comparison of their results to national, regional, and similar-sized hospital results. Hospitals can use these results to celebrate strengths and identify improvement areas in their practices and policies affecting infant feeding.

What kind of questions does the survey ask?

The mPINC survey contains six core sections and one additional section for hospitals with a special care nursery or neonatal intensive care unit. The six core sections cover:

- Hospital demographics and data.
- Early postpartum care practices.

- Feeding practices.
- Education and support of mothers and caregivers.
- Staff and provider responsibilities and training.
- Hospital policies and procedures.

Learn more.

Who receives the mPINC survey?

CDC's contractor begins survey administration by calling each hospital that participated in CDC's previous mPINC survey using the phone number of the person who submitted the prior survey answers.

CDC's contractor then screens all other hospitals. The contractor calls the hospital switchboard and asks for the mother-baby nurse manager or, if not available, the labor and delivery unit manager. After determining eligibility, CDC's contractor asks that manager to identify the best person to complete the survey.

Because of how the survey is administered, the person identified to receive the survey one year is not necessarily the person identified to receive the survey in a later cycle. If you would like to update your hospital's mPINC survey point of contact, please email your name, phone number, and hospital name and address to mPINC@cdc.gov.

Who completes the mPINC survey?

No single person may be best able to answer all survey questions. CDC encourages the person completing the survey to get input from other key personnel as needed.

Can you send me the mPINC survey without going through the screening process?

No. It is crucial for survey validity that we follow the same protocol to identify the survey recipients at each hospital as described above. You may want to talk with your hospital's mother-baby nurse manager(s) or labor and delivery unit manager(s) to describe the mPINC survey's purpose and timing. Let these managers know that they may receive a phone call from the contractor about the mPINC survey. Discuss with them the best person to respond to the survey on your hospital's behalf.

Are the survey responses kept confidential?

Yes. All responses are treated in a secure manner. They are not disclosed unless required by law. CDC will not include the names and personal identifiers of the hospital or personnel designated to complete the survey in presentations of results. We will only report responses in summary form so individual responses cannot be identified. We will combine data to generate state-specific, regional, and national reports. Data also may be used to answer other research questions.

Upon request, data with hospital identifiers (hospital name and address) may be shared under a data use agreement with state, tribal, and territorial health departments for the development of public health programs. Deidentified data may be released under data use agreements for additional approved purposes such as answering research questions. Information from this survey will also assist CDC with program planning.

Email mPINC@cdc.gov to learn more and to receive a data request form.

How can the public access mPINC data?

The public has access to the combined data in state, regional, and national reports available on this site.

Why was the mPINC survey redesigned in 2018?

Maternity care practices and policies in the United States have changed since CDC administered the first mPINC survey in 2007. We redesigned the mPINC survey in 2018 to reflect these changes.

How do surveys from 2018 and later differ from previous years?

Changes to the mPINC survey beginning in 2018 include:

- Collecting data via the web only (no paper surveys).

- Surveying hospitals only (no freestanding birth centers).
- Updating survey content to reflect changing maternity care practices and policies.

Why aren't freestanding birth centers included in the revised survey?

We no longer include freestanding birth centers in the survey because many practices assessed do not apply to birth center settings. For example, these include questions about time spent rooming-in because stays are shorter and about cesarean sections. In addition, less than 1% of U.S. births occur at birth centers compared to more than 98% of U.S. births in hospitals.

Will hospitals be able to look at year-to-year trends?

We updated the mPINC survey questionnaire in 2018. Results from the mPINC surveys 2018 and later cannot be compared with results from 2007 to 2015 mPINC surveys. Multiple years of data from the updated survey (that is, 2018, 2020, 2022, and later) will be comparable.

How can I keep up-to-date on the mPINC survey status?

CDC developed a CDC-mPINC-UPDATE listserv to inform hospitals and other partners about future mPINC surveys. We also use the listserv to provide periodic updates on the mPINC survey status and related information. Signing up for this listserv is voluntary, and most messages will be sent during mPINC data collection. Listserv participants may opt out at any time. If you have questions about the mPINC survey or want to sign up for the listserv, email mPINC@cdc.gov. Include your full name and email address. Your contact information will not be connected to survey responses or scores.

Still have questions?

For more information, email mPINC@cdc.gov.

SOURCES

CONTENT SOURCE:
National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)