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January 27, 2026

Department of Health and Human Services
Centers for Disease Control and Prevention
OMB CONTROL NUMBER: 0920-0743
ICR REFERENCE NUMBER: 202601-0920-008

Attn: Jeffrey M. Zirger

RE: Assessment and Monitoring of Breastfeeding-Related Maternity Care Practices in Intrapartum Care Facilities in the United States and Territories (OMB Control No. 0920-0743, Exp. 3/31/2025)—
Reinstatement—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP),
Centers for Disease Control and Prevention (CDC)

Dear Mr. Zirger,

I am Brenda Bandy, Executive Director of the [Kansas Breastfeeding Coalition](https://www.ksbreastfeeding.org) (KBC). I am writing in strong support of continuing the Maternity Practices in Infant Nutrition and Care (mPINC) survey. The Kansas Breastfeeding Coalition represents over 3,000 individuals, including many in hospital settings, who support breastfeeding families. The KBC is committed to ensuring all families in Kansas have the support, resources, and accommodations to achieve their breastfeeding goals

As the KBC Executive Director since 2015, I have seen firsthand the practical value of mPINC data for both hospitals and those who support them. It informs the work of the KBC Hospital Section in developing targeted tools and education to help Kansas hospitals improve their maternity care practices, as captured on the bi-annual mPINC Survey. The Kansas "[High 5 for Mom & Baby](#)" program, which assists Kansas hospitals in improving health outcomes for breastfeeding women and their infants, uses mPINC data to tailor its technical assistance to hospitals.

In Kansas and across the nation, mPINC data plays a critical role in surveillance, program design, evaluation, and policy development. mPINC data allows us to measure our progress. Without mPINC, those of us in maternal and child health are "*driving a car at night without headlights*" - we cannot see where we are going. The ongoing data collection enables state, regional, and hospital-level benchmarking, which is essential for data-driven quality improvement in maternity care practices and, ultimately, for advancing maternal and infant health outcomes.

With increasing expectations on maternity facilities to report breastfeeding outcomes as a measure of quality, the ability to benchmark maternity practices and share best practices nationwide is more

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important than ever. The Joint Commission’s Perinatal Care Measures include PC-05: Exclusive Human Milk Feeding, which assesses the number of newborns exclusively fed human milk during their entire hospitalization. According to the Joint Commission, “Perinatal care measures aim to achieve integrated, coordinated, and patient-centered services throughout the prenatal, peripartum, and postpartum periods, with the goal of promoting safer outcomes for both birthing persons and infants.” The mPINC survey provides the contextual data that helps facilities improve performance on this and other perinatal quality measures.

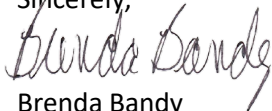
To ensure mPINC continues to reflect the full scope of infant feeding experiences and inform equitable improvements in care, the KBC recommends the following enhancements:

- **Post-Discharge Continuity:** Add items on referral linkages to community-based lactation support providers, WIC, outpatient peer support, and access to donor milk services to strengthen the continuum of care after discharge.
- **Patient Experience:** Include qualitative indicators (e.g., whether parents were asked about infant feeding goals, satisfaction with lactation support) to capture lived experiences alongside quantitative data.
- **Workforce Quality & Training:** Strengthen questions on staff training frequency, cultural and linguistic competence, and use of evidence-based lactation education.

For these reasons, the KBC strongly supports renewal of the mPINC survey and urges the CDC to integrate these enhancements. Doing so will expand the survey’s utility in guiding quality improvement and reinforcing breastfeeding support as an essential component of public health infrastructure.

Thank you for the opportunity to submit feedback. We look forward to continued collaboration to ensure that maternity care practices in hospitals support the health and thriving of families in Kansas. Please direct any questions to info@ksbreastfeeding.org.

Sincerely,



Brenda Bandy

Executive Director

Kansas Breastfeeding Coalition

Kansas

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