Maternity Practices in Infant Nutrition and Care (mPINC) Survey, 2013

Contra Costa County Benchmark Report

Contra Costa County Overview

- 6 Birthing Hospitals
- 6 Hospitals (100%) Participated in mPINC Survey in 2013

Breastfeeding Statistics for Participating Hospitals

- Average Any Breastfeeding: 95%
- Average Exclusive Breastfeeding: 77%

Establishing maternity practices supportive of breastfeeding in California hospitals will help meet *Healthy People 2020* breastfeeding objectives and improve maternal and child health.

For assistance with breastfeeding promotion efforts visit the CDPH, Breastfeeding and Healthy Living web-site at: **http://cdph.ca.gov/breastfeeding**

For further information about the mPINC Survey visit **www.cdc.gov/mpinc**

California Composite Quality Practice (Total mPINC) Score*: 83

Contra Costa County Composite Quality Practice (Total mPINC) Score*: 79

mPINC Dimension of Care	County Sub-scale Score*	State Sub-scale Score*	Ideal Response to mPINC Survey Question	Percent of Facilities with Ideal Response (N = 6)
Labor and Delivery Care	85	86	Initial skin-to-skin contact is w/in 1 hr (vaginal births)	100
			Initial skin-to-skin contact is w/in 2 hr (cesarean births)	67
			Initial breastfeeding opportunity is w/in 1 hr (vaginal births)	100
			Initial breastfeeding opportunity is w/in 2 hr (cesarean births)	33
			Routine procedures are performed skin-to-skin	33
Feeding of Breastfed Infants	78	86	Initial feeding is breast milk (vaginal births)	67
			Initial feeding is breast milk (cesarean births)	50
			Supplemental feedings to breastfeeding infants are rare	0
			Water and glucose water are not used	80
Breastfeeding Assistance	93	92	Infant feeding decision is documented	100
			Staff provide breastfeeding advice & instructions	100
			Patients are taught breastfeeding cues	100
			Patients are taught not to limit suckling time	50
			Staff directly observe & assess breastfeeding	100
			Standard feeding assessment tool is used	100
			Pacifiers are rarely provided to breastfeeding infants	33
Contact Between Mother and Infant	89	90	Mother-infant pairs are not separated for postpartum transition	83
			Most mother-infant pairs room-in at night	100
			Most mother-infant pairs are not separated during the hospital stay	67
			Infant procedures, assessment and care are in the patient room	0
			Non-rooming-in infants are brought to mothers at night for feeding	60
Facility Discharge Care	74	71	Staff provide appropriate discharge planning (referrals & other multi-modal support)	0
			Discharge packs containing product marketing infant formula samples are not given to breastfeeding patients	100
Staff Training	55	72	New staff receive appropriate breastfeeding education	0
			Current staff receive appropriate breastfeeding education	0
			Most staff received breastfeeding education in the past year	50
			Annual assessment of staff competency in breastfeeding management & support	50
Structural & Organizational Aspects of Care Delivery	82	84	Breastfeeding policy includes all 10 model policy elements	0
			In-service training	40
			Prenatal breastfeeding classes	25
			Asking about mothers' feeding plans	83
			Initiating breastfeeding within 60 minutes (vaginal) or after recovery (cesarean)	100
			Showing mothers how to express milk and maintain lactation	83
			Giving only breast milk to breastfeeding infants	83
			Rooming-in 24 hours/day	100
			Breastfeeding on-demand and duration/frequency of feedings	100
			Pacifier use by breastfed infants	50
			Referral of mothers to appropriate breastfeeding resources	33
			Breastfeeding policy is communicated effectively	100
			Facility documents infant feeding in patient population	100
			Facility provides breastfeeding support to employees	40
			Facility does not receive infant formula free of charge	50
			Breastfeeding is included in prenatal patient education	100
			Facility has a designated staff member responsible for coordination of lactation care	67

* The Centers for Disease Control and Prevention (CDC) administered the mPINC Survey of all U.S. maternity care facilities in 2013. Scores were calculated for each survey item, then item scores were averaged to create a score for each of the 7 dimensions of care ("subscales"). Averages of the subscale scores were used to create a Composite Quality Practice or "total mPINC" score. Possible scores ranged from 0—100, with higher scores denoting better maternity care practices. Facilities may not have responded to all individual mPINC survey questions; "ideal response" rates exclude facilities with missing data for a given survey item.

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