

License Exempt Provider Health and Safety Standards

License Exempt Provider Types	
License Exempt – Related	Related to all the children as a grandparent/great-grandparent, sibling living in a separate residence, an aunt or an uncle by blood or marriage. Must be 18 years or older. Care for relative providers may be in the child’s home or in their own home.
License Exempt - Unrelated	This is typically a cousin, friend or neighbor that is 18 years of age or older who is selected by the parent. Care must be provided in the child’s home and requires health and safety visits.

License exempt providers in Michigan apply and are enrolled through an eligibility process that requires health and safety training and background checks in addition to other eligibility requirements. The requirements and additional information for applying can be found on MiLEAP Child Development and Care [Providers \(michigan.gov\)](http://michigan.gov) site .

Starting October 1, 2024. Michigan license exempt providers must follow the *License Exempt Provider Health & Safety Standards* that are listed in this document. Training for the standards is introduced in the required License Exempt Provider Preservice Training (LEPPT) and are reviewed during the Michigan Annual Ongoing Refresher Trainings. These standards are monitored using the Standards - Health & Safety Checklist that is used when coaches complete the required health and safety visits for the license exempt-unrelated providers.

The following sections outline the 12 health and safety topics that are required by the Child Care Development Block Grant (CCDBG) ([eCFR :: 45 CFR 98.41 -- Health and safety requirements.](#)) . Each template identifies the standard and contains the following information.

Section Title	Information
Regulation Number	The number of the federal regulation where the rule for this topic is located.
Corresponding Plan Number	The number of the Michigan CCDF State Plan where the standard is identified for implementation by the state to meet the federal rule.
Topic Area	The federal rule that is required to be met by providers and monitored by the lead agency.
Brief Description	The health and safety topic that the standard meets.
Standard Requirement	This column lists the health and safety requirements for the license exempt providers.
Caring for Our Children	National Health and Safety Performance Standards Guidelines for Early Care and Education Programs. This column identifies the related standard for the health and safety requirement that is listed.
Requirement or the subsection of the rule it relates.	If a federal regulation has multiple parts this column will identify what subsection the standard requirement is meeting.
LEPPT Slide Number	This identifies where in license exempt provider orientation training that the health and safety topic is addressed.
Annual Ongoing Training Refresher	This identifies where in the Annual Ongoing Refresher Training that the health and safety standard is met.

License Exempt Provider Health and Safety Standards

<p>Regulation Number: 98.44(b)(1)(i) and (iii)</p> <p>Corresponding Plan Number: 5.3.1.b, 5.3.2.b, 5.3.6.b, 5.3.7.b, 5.3.10.b, 5.3.11.b, 5.3.12</p>	<p>Topic Area: Health and Safety Requirements - Child Development Training</p>			
<p>Brief Description: The Lead Agency implements required training for five areas of Child Development.</p>				
Standard - Requirement	Caring For Our Children Standard	Requirement or the subsection of rule it relates	LEPPT Slide Number	Annual Ongoing Training Refresher
Social Emotional Development		Required Topic		
Physical Development		Required Topic		
Approaches to Learning		Required Topic		
Cognitive Development		Required Topic		
Language Development		Required Topic		

License Exempt Provider Health and Safety Standards

<p>Regulation Number: 98.41(a)(1)(i) Corresponding Plan Number: 5.3.1 (a)(vi) 5.3.1(b)(vi)</p>	<p>Topic Area: Health and Safety Requirements - Prevention and Control of Infectious Diseases</p> <p>(a) Provide the standards, appropriate to the provider setting and age of children, that address the prevention and control of infectious diseases for the following CCDF-eligible providers:</p> <p>(b) Provide the standards, appropriate to the provider setting and age of children, that address that children attending child care programs under CCDF are age-appropriately immunized, according to the latest recommendation for childhood immunizations of the respective State public health agency, for the following CCDF-eligible providers:</p>			
<p>Brief Description: Prevention and Control of Infectious Diseases for License-Exempt Unrelated providers.</p>				
<p>Standard - Requirements:</p>	<p>Caring For Our Children Standard</p>	<p>Requirement or the subsection of rule it relates</p>	<p>LEPPT Slide Number</p>	<p>Annual Ongoing Training Refresher</p>
<p>Children and Child Care Provider practice hand hygiene.</p> <p>a. Use 5 step method for washing hands covered in orientation training.</p> <p>b. Wash hands when handling food, before and after eating, after going outside, after using toilet or/and changing diapers.</p>	<p>CFOC 3.2.2.1 CFOC 3.2.2.2 CFOC 3.2.2.3</p>	<p>(a)</p>	<p>S 48</p>	<p>Ref. 2023 3.16, 3.22, 3.24(V)</p>
<p>Cleaning, sanitizing, and disinfecting is done daily, weekly and monthly using non-toxic solution following recommended schedule. More frequently if household member has been ill. *Handout provided to providers on cleaning frequency recommended by CFOC</p>	<p>CFOC Appendix J CFOC Appendix K</p>		<p>S 46 S 47</p>	<p>Ref 2023 3.16 3.17 3.18</p>
<p>Provider is aware of immunization schedule and shares updates with parent. *Handout given to provider: EPSDT.</p>	<p>CFOC 7.2.0.3 CFOC Appendix G CFOC Appendix H</p>	<p>(b)</p>	<p>S 49</p>	<p>Ref 2023 Sec 3.7</p>

License Exempt Provider Health and Safety Standards

Regulation Number: 98.41(a)(1)(ii) Corresponding Plan Number: 5.3.2(a)(vi)	Topic Area: Health and Safety Requirements - Sudden Infant Death Syndrome Prevention/Use of Safe Sleep Practices			
Brief Description: Sudden Infant Death Syndrome Prevention for License-Exempt Unrelated providers.				
Standard - Requirements:	Caring For Our Children Standard	Requirement or the subsection of rule it relates	LEPPT Slide Number	Annual Ongoing Training Refresher
Infants & toddlers are sleeping and napping in cribs, bassinets, or pack-n-plays only, with firm mattresses and tight-fitting sheets.	CFOC 3.1.4.1 CFOC 3.1.4.5 CROC 5.4.5.2	The most current refresher training is provided through the State of MI Safe Sleep Training	S 31 S 33	Ref. 2021 S 10 S 12
Infants are positioned on their backs to sleep.	CFOC 3.1.4.1	The most current refresher training is provided through the State of MI Safe Sleep Training	S 31 S 32 S 33	Ref. 2021 S 13
No items (toys, pillows, blankets, positioners, etc.) are in the crib with the infant.	CFOC 3.1.4.1 Center for Disease Control Safe for Sleep Program	The most current refresher training is provided through the State of MI Safe Sleep Training	S 31	Ref. 2021 S 12 S15-22

License Exempt Provider Health and Safety Standards

Regulation Number: 98.41(a)(1)(iii)	Topic Area: Health and Safety Requirements - Medication Administration			
Corresponding Plan Number: 5.3.3(a)(vi) 5.3.3(b)(vi)	5.3.3 (a)(vi) Is consent 5.3.3 (b)(vi) Is administration			
Brief Description: Medication Administration for License-Exempt Unrelated providers.				
Standard - Requirement	Caring For Our Children Standard	Requirement or the subsection of rule it relates	LEPPT Slide Number	Annual Ongoing Training Refresher
All medications, whether prescription or Over the Counter are: <ul style="list-style-type: none"> Kept in their original containers. Stored out of reach of children. Properly disposed of when order expires. Dosage must not exceed the recommended dosage unless written permission is given from a physician. 	CFOC 3.6.3.1 CFOC 3.6.3.2	5.3.3(b)(vi)	S 51	Ref 2023 1.2(V) 1.3
Providers ensure that before they administer medication, both prescription and over the counter, they have: <ul style="list-style-type: none"> Written permission from the parent/ guardian Written permission child’s physician in the form of a note from the doctor or the prescription bottle. 	CFOC 3.6.0.1	5.3.3(a)(vi)	S 54	Ref 2023 1.2(V) 1.3
Child Care Providers can list the ‘Five Rights’ to follow before, during, and after administering medication. (The right Child, Medication, Dose, Time & Route)	CFOC 3.6.0.1	5.3.3(b)(vi)	S 53	Ref. 2023 1.9

License Exempt Provider Health and Safety Standards

<p>Regulation Number: 98.41(a)(1)(iv)</p> <p>Corresponding Plan Number: 5.3.4 (a)(vi) 5.3.4 (a)(vi)</p>	<p>Topic Area: Health and Safety Requirements - Prevention/Response to Emergencies due to Food and Allergic Reactions</p> <p>5.3.4 (a) Provide the standards, appropriate to the provider setting and age of children, that address the prevention of emergencies due to food and allergic reactions for the following CCDF-eligible providers:</p> <p>5.3.4 (b) Provide the standards, appropriate to the provider setting and age of children, that address the response to emergencies due to food and allergic reactions for the following CCDF-eligible providers:</p>			
<p>Brief Description: Prevention and response to emergencies due to food and allergic reactions for License-Exempt Unrelated providers.</p>				
Standard - Requirement	Caring For Our Children Standard	Requirement or the subsection of rule it relates	LEPPT Slide Number	Annual Ongoing Training Refresher
Food is prepared in a clean sanitized area and stored properly.	CFOC 4.8.0.1 CFOC 4.9.0.1 US Food & Drug Administration (FDA)	(a)	S 81	Ref 2023 3.12 3.4 3.6
Any remaining formula or breast milk is discarded after 2 hours.	CFOC 4.9.0.1 US Food & Drug Administration (FDA)	(a)	S 81	Ref 2023 3.6
Measures are in place to minimize potential food allergy reactions. a. Reading labels for items in processed foods. b. Avoiding cross contamination. c. Following care plan for children with food allergies.	CFOC 4.2.0.10	(a)	S 83	Ref 2023 2.6
Child Care Provider displays ability to identify and act upon mild and severe food allergy symptoms, including administering Epinephrine (EpiPen) if warranted.	CFOC 4.2.0.10	(b)	S 82 S 83	Ref. 2023 2.3 2.4

License Exempt Provider Health and Safety Standards

<p>Regulation Number: 98.41(a)(1)(v)</p> <p>Corresponding Plan Number: 5.3.5 (a) 5.3.5 (b) 5.3.5 (c)</p>	<p>Topic Area: Health and Safety Requirements - Building and Physical Premises Safety. (a) Protection from building and physical premises hazards. (b) Protection from bodies of water. (c) Protection from vehicular traffic hazards.</p>			
<p>Brief Description: Identification of and protection from (a) building and premises hazards (b) bodies of water (c) vehicular traffic.</p>				
Standard – Requirement	Caring For Our Children Standard	Requirement or the subsection of rule it relates	LEPPT Slide Number	Annual Ongoing Training Refresher
<p>Children are properly supervised by Child Care Provider.</p> <ul style="list-style-type: none"> a. Children under age 6 are under constant supervision by sound and sight. b. Visual checks are done frequently while napping. c. Children over the age of 6 are supervised based on individual needs identified by the parent. 	CFOC 2.2.0.2	(a)(b) and (c)	S 37	Ref 2025 1.6(V), 1.7, 1.8
<p>Children are directly supervised when outdoor hazards like traffic, bodies of water, and unsafe playgrounds are identified.</p>	CFOC 6.2.1.1, 6.3.1.2, 6.3.1.1, 6.3.1.11, 6.3.1.7, 6.3.2.1	(a)(b) and (c)	S 42	Ref 2025 1.34
<p>Child Care Providers to protect children from insect bites, animal bites, and sun exposure. Following recommendations from orientation assessing and monitoring surroundings/environment.</p>	CFOC 3.4.2.1, 3.4.2.2, 3.4.5.1, 3.4.5.2	(a)	S 41	Ref 2025 1.36
<p>Child Care Providers identify any areas that may be at risk of lead and prevent children from being exposed to lead poisoning.</p>	CFOC 5.2.6.3 CFOC 5.2.9.13	(a)	S43 S44	Ref. 2023 4.5
<p>Inside and outside are free of hazards. (i.e. Not Chemicals, power equipment, tools). Children kept off of areas where any lawn pesticides/fertilizers were spread.</p>		(a)		
<p>All weapons and ammunition are stored in a lock box out of reach and out of site of children.</p>		(a)		
<p>Safety items such as smoke alarms, gates, outlet covers, cupboard door locks are used when applicable.</p>		(a)		
<p>Driveway safety is observed:</p> <ul style="list-style-type: none"> a. Children do not play near parked vehicles. b. Children are never left in vehicles. <p>Drivers check that no children are nearby before driving.</p>	CFOC 6.5.2	(c)	S 42	Transportation 4.1, 4.2, 4.3, 4.4, 4.5, 4.6

License Exempt Provider Health and Safety Standards

Regulation Number: 98.41(a)(1)(vi)	Topic Area: Health and Safety Requirements - Shaken Baby Syndrome, Abusive Head Trauma, and Child Maltreatment			
Corresponding Plan Number: 5.3.6.(a)(vi) 5.3.6(b)(vi)	(a) Provide the standards, appropriate to the provider setting and age of children, that address the prevention of shaken baby syndrome and abusive head trauma and indicate the age of children it applies to for the following CCDF-eligible providers: (b) Provide the standards, appropriate to the provider setting and age of children, that address the prevention of child maltreatment and indicate the age of children it applies to for the following CCDF-eligible providers:			
Brief Description: Shaken baby syndrome, abusive head trauma, and child maltreatment for License-Exempt Unrelated providers.				
Standard - Requirement	Caring For Our Children Standard	Requirement or the subsection of rule it relates	LEPPT Slide Number	Annual Ongoing Training Refresher
<p>Child Care Provider identifies the three actions that can result in Abusive Head Trauma that were presented in orientation training.</p> <p>Child Care Provider identifies the following actions that can result in Abusive Head Trauma and Shaken Baby Syndrome that were presented in orientation and ongoing training. Vigorously shaking a baby or striking a baby head can cause damage to the brain, eyes, ribs and can cause death.</p> <p>Injury happens because: Babies heads are heavy and large in proportion to their body size. Babies have weak neck muscles. Babies have fragile undeveloped brains. Large size and strength difference between the victim and perpetrator.</p>	CFOC 3.4.4.3	(a)	S 24	Ref. 2024 3.1.1(V) 3.1.5
<p>Child Care Provider uses appropriate guidance to discipline and direct children and avoids corporal punishment. Training Slide: The State of Michigan manual for licensed childcare providers prohibits the following means of punishment: hitting, spanking, shaking, biting, pinching, restricting movement, and inflicting emotional or mental harm.</p>	CFOC 3.4.4.3	(b)	S 21 S 22	Ref. 2024 3.3.2 3.3.3
<p>Child Care Provider identifies appropriate safe actions to reduce their stress when frustrated by infants crying to avoid the risk of Shaken Baby Syndrome. Training Slides: Okay to ask for help. Have easy access to parent phone number and other support people. Know that it is okay to let an infant or toddler cry – if the child is safe. And step into another room to breathe.</p>	CFOC 3.4.4.3	(a)(b)	S 23 S25	Ref 2024 3.3.1 3.3.2 3.3.3

License Exempt Provider Health and Safety Standards

Regulation Number: 98.41(a)(1)(vii)	Topic Area: Health and Safety Requirements - Emergency Preparedness and Response Planning			
Corresponding Plan Number: 5.3.7				
Brief Description: Emergency Preparedness and Response for License-Exempt Unrelated providers.				
Standard - Requirement	Caring For Our Children Standard	Requirement or the subsection of rule it relates	LEPPT Slide Number	Annual Ongoing Training Refresher
Child Care Provider can share steps to take if a child is seriously injured or ill.	CFOC 3.4.3.1 CFOC Appendix A		S 69 S 70	Ref. 2025 2.18 2.19
Child Care Provider has written plan for evacuation during any type of emergency. Including individual instructions or accommodations for children any child with disabilities, infants, toddlers or chronic medical conditions. *Full plan includes location, communication with parent and reunification (relocation) with family following an emergency. Instructions for any individual needing individualized assistance.	CFOC 3.4.3.3	Federal Rule	S 72 S 74 S76	Ref 2025 2.10, 2.11, 2.15, 2.16 (V)
Child Care Provider has written plan to identify safest location in home or around home for shelter-in-place during and after emergency. (Including location, communication with parent and reunification with family following an emergency.)	CFOC 9.2.4.3	Federal Rule Requires: Shelter – in – place.	S 77	Ref 2025 2.15, 2.2
Child Care Provider does drills to practice for all potential emergencies. a. Fire Drill practiced every month 3 months b. Tornado Drill practiced 2x/yr. between March and November c. Lockdown practiced 1x/yr.	CFOC 9.2.4.3		S71 S74	Ref 2025 2.11
Provider works with the parent to develop a plan for continuity of operations. If the family becomes homeless the provider needs to contact CDC to request a temporary exception for location of services, if applicable.				

License Exempt Provider Health and Safety Standards

Regulation Number: 98.41(a)(1)(viii)	Topic Area: Health and Safety Requirements - Handling and Storage of Hazardous Materials +and Bio-contaminants Disposal (a) Provide the standards, appropriate to the provider setting and age of children, that address the handling and storage of hazardous materials for the following CCDF-eligible providers: (b) Provide the standards, appropriate to the provider setting and age of children, that address the disposal of bio-contaminants for the following CCDF-eligible providers:	Corresponding Plan Number: 5.3.8.(a)(vi) 5.3.8 (b)(vi)		
Brief Description: Handling and storage of hazardous materials and appropriate disposal of bio-contaminants for License-Exempt Unrelated providers.				
Standard - Requirement	Caring For Our Children Standard	Requirement or the subsection of rule it relates	LEPPT Slide Number	Annual Ongoing Training Refresher
Hazardous materials in and near home are: a. Properly labeled. b. In their original containers c. Safely stored out of reach of children.	CFOC 5.2.9.1	(a)	S 58	Ref. 2023 4.5, 4.6, 4.7, 4.8
Medications belonging to Child Care Provider and residents of home are safely stored out of reach of children.	CFOC 3.6.3.2	(a)	S 59	Ref. 2023 4.6 4.7
The telephone number for the Poison Control Center is either programmed into the Child Care Provider’s phone or posted in an easily visible location in the home.	CFOC 5.2.9.2	(a)	S 65	Ref. 2023 4.10(V)
All potentially hazardous materials, which include, but are not limited to, drugs, alcohol, cleaning and other poisonous or toxic materials, must not be used as they are a hazard to children. All potentially hazardous materials, which include, but are not limited to, matches, lighters, medicines, cleaning materials, detergents, aerosol cans, and other poisonous or toxic materials, must be used in a way that they will not contaminate play surfaces, food, food preparation areas or constitute a hazard to children.	CFOC 3.4.1.1 CFOC 9.2.3.15 CFOC 3.4.1.1 CFOC 9.2.3.15	(a)	S 45	Ref 2023 (Haz Mat) 4.5
A diaper changing procedure and all cleaning of bodily fluids is followed that minimizes the spread of germs. a. Location is removed from food prep and play areas. b. Child Care Provider disposes of any bodily fluids or diaper properly. a. Cleans & disinfects contaminated area, and washes hands immediately.	CFOC 3.2.1.4	(b)	S 46 S 48	Ref 2023 3.16 3.20 3.21

License Exempt Provider Health and Safety Standards

Regulation Number: 98.(a)(1)(ix) Corresponding Plan Number: 5.3.9(vi)	Topic Area: Health and Safety Requirements - Transporting Children			
Brief Description: Precautions in transporting children for License-Exempt Unrelated providers.				
Standard - Requirement	Caring For Our Children Standard	Requirement or the subsection of rule it relates	LEPPT Slide Number	Annual Ongoing Training Refresher
Children are using the appropriate transportation safety device for their size, be it a rear-facing car seat, a forward-facing car seat, a booster seat, or a seat belt.	CFOC 6.5.2.2		S 82 S 92	Transportation 5.0(V), 5.1, 5.1.1, 5.1.2, 5.1.3, 5.1.4, 5.15(V)
Provider self certifies that car seats are: <ul style="list-style-type: none"> • Installed according to manufactures recommendations. • Have not expired. • Have not been in an accident or recalled. 	CFOC 6.5.2		S 89 S90 S91	Transportation 5.2.1, 5.2.3, 5.2.2(V)
Child Care Providers display proper use of car seat harnesses: <ol style="list-style-type: none"> a. The harness clip is positioned across the child’s shoulders. b. The harness is snug and not able to be pinched. c. Children are not wearing bulky coats while in safety seats. 	CFOC 6.5.2		S 86 S87 S 88	Transportation 5.1.6, 5.3.1, 5.3.2, 5.3.3
Permission is obtained from parent prior to transporting child(ren).				

License Exempt Provider Health and Safety Standards

Regulation Number: 98.41(a)(1)(x)	Topic Area: Health and Safety Requirements - Pediatric First Aid and CPR			
Corresponding Plan Number: 5.3.10 (a)(vi) 5.3.10 (b)(vi)	<p>(a) Provide the standards, appropriate to the provider setting and age of children, that address pediatric first aid for all staff for the following CCDF-eligible providers:</p> <p>(b) Provide the standards, appropriate to the provider setting and age of children, that address pediatric cardiopulmonary resuscitation for all staff for the following CCDF-eligible providers:</p>			
Brief Description: Pediatric first aid and CPR requirements for License-Exempt Unrelated providers.				
Standard - Requirement	Caring For Our Children Standard	Requirement or the subsection of rule it relates	LEPPT Slide Number	Annual Ongoing Training Refresher
Provider has completed training or certification during orientation in Pediatric First Aide and age-appropriate CPR.	CFOC 1.4.3.1	(a)(b)	S 102	Ref 2024 1.2.4, 1.2.7 1.2.6

License Exempt Provider Health and Safety Standards

Regulation Number:	Topic Area:			
Corresponding Plan Number:	Health and Safety Requirements – Recognizing and Reporting Child Abuse and Neglect			
5.3.11(a)(vi)	(a) Provide the standards, appropriate to the provider setting and age of children, that address the identification of child abuse and neglect for the following CCDF-eligible providers:			
5.3.11(b)(vi)	(b) Provide your standards, appropriate to the provider setting and age of children, that address the reporting of child abuse and neglect for the following CCDF-eligible providers:			
Brief Description: Recognizing and reporting child abuse and neglect.				
Standard - Requirement	Caring For Our Children Standard	Requirement or the subsection of rule it relates	LEPPT Slide Number	Annual Ongoing Training Refresher
Child Care Provider displays an awareness of the responsibilities & immunity of being a Mandated Reporter. <ul style="list-style-type: none"> a. Understands the requirement to report if abuse is suspected. b. Displays an awareness of the process used to file a report. 	CFOC 3.4.4.1 CFOC 3.4.4.2 CPS Mandated Reporter Manual		S27	Ref. 2024 2.3.2 2.3.3 2.3.4 2.3.5
Child Care Provider shares a general knowledge of types of abuse and neglect and signs of each type.	CFOC 3.4.4		S27	Ref 2024 2.1.1, 2.2.1 2.2.11
Child Care Provider understands how to use the TEN-4-FACESp Bruising Rule to identify possible abuse in children under age 4.	CFOC 3.4.4 CFOC Appendix M		S 28	Ref 2024 2.2.4.1 2.2.4.2
5.3.11(b)(vi) State of Michigan requires all individuals that work with children to be identified as mandated reporters of child abuse and neglect. Michigan Child Protection Law reads: 722.623 Individual required to report child abuse or neglect; report by telephone or online reporting system; written report; contents; transmitting report to centralized intake; copies to prosecuting attorney and probate court; conditions requiring transmission of report to law enforcement agency; pregnancy or presence of sexually transmitted infection in child less than 12 years of age; exposure to or contact with methamphetamine production. Sec. 3. An individual is required to report under this act as follows: (a) A physician, dentist, physician's assistant, registered dental hygienist, medical examiner, nurse, person licensed to provide emergency medical care, audiologist, psychologist, physical therapist, physical therapist assistant, occupational therapist, athletic trainer, marriage and family therapist, licensed professional counselor, social worker, licensed master's social worker, licensed bachelor's social worker, registered social service technician, social 8 service technician, a person employed in a professional capacity in any office of the friend of the court, school administrator, school counselor or teacher, law enforcement officer, member of the clergy, or regulated child care provider who has reasonable cause to suspect child abuse or child neglect shall make an immediate report to centralized intake by telephone, or, if available, through the online reporting system, of the suspected child abuse or child neglect. Within 72 hours after making an oral report by telephone to centralized intake, the reporting person shall file a written report as required in this act. If the immediate report has been made using the online reporting system and that report includes the information required in a written report under subsection, that report is considered a written report for the purposes of this section and no additional written report is required. If the reporting person is a member of the staff of a hospital, agency, or school, the reporting person shall notify the person in charge of the hospital, agency, or school of his or her finding and that the report has been made and shall make a copy of the written or electronic report available to the person in charge. A notification to the person in charge of a				

License Exempt Provider Health and Safety Standards

hospital, agency, or school does not relieve the member of the staff of the hospital, agency, or school of the obligation of reporting to the department as required by this section. One report from a hospital, agency, or school is adequate to meet the reporting requirement. A member of the staff of a hospital, agency, or school shall not be dismissed or otherwise penalized for making a report required by this act or for cooperating in an investigation. 722.633 Failure to report suspected child abuse or neglect; damages; violation as misdemeanor; unauthorized dissemination of information as misdemeanor; civil liability; maintaining report or record required to be expunged as misdemeanor; false report of child abuse or neglect. Sec. 13. (1) A person who is required by this act to report an instance of suspected child abuse or neglect and who fails to do so is civilly liable for the damages proximately caused by the failure. (2) A person who is required by this act to report an instance of suspected child abuse or neglect and who knowingly fails to do so is guilty of a misdemeanor punishable by imprisonment for not more than 93 days or a fine of not more than \$500.00, or both.