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**HOUSE BILL NO. 489**  
FLOOR AMENDMENT IN THE NATURE OF A SUBSTITUTE  
(Proposed by Senator Perry  
on March 11, 2026)

(Patron Prior to Substitute—Delegate Hope)

A *BILL to amend and reenact § 63.2-1509 of the Code of Virginia and to amend the Code of Virginia by adding in Title 19.2 a chapter numbered 1.4, consisting of sections numbered 19.2-11.15 and 19.2-11.16, relating to restorative justice practices; mandatory reporting for certain persons in their professional or official capacities; penalty.*

**Be it enacted by the General Assembly of Virginia:**

**1. That § 63.2-1509 of the Code of Virginia is amended and reenacted and that the Code of Virginia is amended by adding in Title 19.2 a chapter numbered 1.4, consisting of sections numbered 19.2-11.15 and 19.2-11.16, as follows:**

*CHAPTER 1.4.*  
*RESTORATIVE JUSTICE PRACTICES.*

**§ 19.2-11.15. Definitions.**

*As used in this chapter, unless the context requires a different meaning:*

*"Restorative justice communication" means all communications, memoranda, work products, documents, and other materials, written or oral, that are made in the course of, or in connection with, any phase of a restorative justice practice.*

*"Restorative justice facilitator" means a person who does not serve as legal counsel, an investigator, or an advocate for any party or participant in a restorative justice practice and has been certified by a recognized third party organization in restorative justice facilitation.*

*"Restorative justice practice" means a voluntary participatory process in which parties who have caused harm, parties who have been harmed, or other participants gather with one or more restorative justice facilitators to (i) identify and repair harm to the extent possible, (ii) address trauma, (iii) reduce the likelihood of further harm, or (iv) strengthen community ties by focusing on the needs and obligations of all parties involved. "Restorative justice practice" includes all phases of such a process, including referral, preparation, pre-enrollment, enrollment, post-enrollment, facilitated dialogue or meeting, and post-dialogue phases of the process.*

**§ 19.2-11.16. Effect of participation in restorative justice in current or subsequent legal proceedings; confidentiality of statements.**

*A. Upon written agreement of the victim, the defendant, and the attorney for the Commonwealth, participation in a restorative justice practice shall not be used as evidence or as an admission of guilt, delinquency, or civil liability in current or subsequent legal proceedings against any participant.*

*B. Except as provided in this section or by written agreement of the parties, restorative justice communications shall not be admissible in, or subject to discovery for, any legal proceeding. Disclosure of such communication shall not be compelled in any judicial or administrative proceeding, arbitration, or mediation if the parties have executed a confidentiality agreement to that effect.*

*C. No person involved in a restorative justice practice may testify in any judicial or administrative proceeding, arbitration, or mediation about any phase of the restorative justice practice except as required by subsection D.*

*D. The privilege afforded by this section does not apply if:*

- 1. Disclosure is necessary to prevent death or serious harm;*
- 2. Disclosure is necessary to comply with another law;*

*3. A court, tribunal, or administrative body requires a report on a restorative justice practice. However, unless the parties agree in writing to include additional information, such report shall be limited to the fact that a restorative justice practice has taken place, an opinion regarding the success of the restorative justice practice, and whether further restorative justice practices are expected;*

*4. A person who participated in a restorative justice practice, including a practitioner, is called to testify by a party. However, such testimony shall be limited to the fact that a restorative justice practice has taken place, an opinion regarding the success of the restorative justice practice, and whether further restorative justice practices are expected; or*

*5. The parties have waived such privilege pursuant to a written and signed agreement.*

*E. Evidence that is otherwise admissible or subject to disclosure or discovery shall not be inadmissible or protected from disclosure or discovery solely because such evidence was discussed or used in a restorative justice practice.*

**§ 63.2-1509. Requirement that certain injuries to children be reported by physicians, nurses, teachers, etc.; penalty for failure to report.**

SENATE SUBSTITUTE

HB489S2

3/11/26 10:23

60 A. The following persons who, in their professional or official capacity, have reason to suspect that a child  
61 is an abused or neglected child, shall report the matter immediately to the local department of the county or  
62 city wherein the child resides or wherein the abuse or neglect is believed to have occurred or to the  
63 Department's toll-free child abuse and neglect hotline:

- 64 1. Any person licensed to practice medicine or any of the healing arts;
- 65 2. Any hospital resident or intern, and any person employed in the nursing profession;
- 66 3. Any person employed as a social worker or family-services specialist;
- 67 4. Any probation officer;
- 68 5. Any teacher or other person employed in a public or private school, kindergarten, or child day program,  
69 as that term is defined in § 22.1-289.02;
- 70 6. Any person providing full-time or part-time child care for pay on a regularly planned basis;
- 71 7. Any mental health professional;
- 72 8. Any law-enforcement officer or animal control officer;
- 73 9. Any mediator eligible to receive court referrals pursuant to § 8.01-576.8;
- 74 10. Any professional staff person, not previously enumerated, employed by a private or state-operated  
75 hospital, institution or facility to which children have been committed or where children have been placed for  
76 care and treatment;
- 77 11. Any person 18 years of age or older associated with or employed by any public or private organization  
78 responsible for the care, custody or control of children;
- 79 12. Any person who is designated a court-appointed special advocate pursuant to Article 5 (§ 9.1-151 et  
80 seq.) of Chapter 1 of Title 9.1;
- 81 13. Any person 18 years of age or older who has received training approved by the Department of Social  
82 Services for the purposes of recognizing and reporting child abuse and neglect;
- 83 14. Any person employed by a local department as defined in § 63.2-100 who determines eligibility for  
84 public assistance;
- 85 15. Any emergency medical services provider certified by the Board of Health pursuant to § 32.1-111.5,  
86 unless such provider immediately reports the matter directly to the attending physician at the hospital to  
87 which the child is transported, who shall make such report forthwith;
- 88 16. Any athletic coach, director, or other person 18 years of age or older employed by or volunteering  
89 with (i) a public or private sports organization or team or (ii) *the athletics program of a public or private*  
90 *elementary or secondary school, including interscholastic teams and clubs*;
- 91 17. Administrators or employees 18 years of age or older of public or private day camps, youth centers  
92 and youth recreation programs;
- 93 18. Any person employed by a public or private institution of higher education other than an attorney who  
94 is employed by a public or private institution of higher education as it relates to information gained in the  
95 course of providing legal representation to a client;
- 96 19. Any minister, priest, rabbi, imam, or duly accredited practitioner of any religious organization or  
97 denomination usually referred to as a church, unless the information supporting the suspicion of child abuse  
98 or neglect (i) is required by the doctrine of the religious organization or denomination to be kept in a  
99 confidential manner or (ii) would be subject to § 8.01-400 or 19.2-271.3 if offered as evidence in court; ~~and~~
- 100 20. Any person who engages in the practice of behavior analysis, as defined in § 54.1-2900; *and*
- 101 21. *Any restorative justice facilitator, as defined in § 19.2-11.15, who has reason to suspect that a child*  
102 *who is a participant in a restorative justice practice, as defined in § 19.2-11.15, is an abused or neglected*  
103 *child. Notwithstanding the confidentiality provisions set forth in § 19.2-11.15, a restorative justice facilitator*  
104 *shall not be relieved of any duty to report pursuant to this section on the basis that such suspicion arose from*  
105 *information obtained during a restorative justice practice.*

106 If neither the locality in which the child resides nor where the abuse or neglect is believed to have  
107 occurred is known, then such report shall be made to the local department of the county or city where the  
108 abuse or neglect was discovered or to the Department's toll-free child abuse and neglect hotline.

109 If an employee of the local department is suspected of abusing or neglecting a child, the report shall be  
110 made to the court of the county or city where the abuse or neglect was discovered. Upon receipt of such a  
111 report by the court, the judge shall assign the report to a local department that is not the employer of the  
112 suspected employee for investigation or family assessment. The judge may consult with the Department in  
113 selecting a local department to respond to the report or the complaint.

114 If the information is received by a teacher, staff member, resident, intern or nurse in the course of  
115 professional services in a hospital, school or similar institution, such person may, in place of said report,  
116 immediately notify the person in charge of the institution or department, or his designee, who shall make such  
117 report forthwith. If the initial report of suspected abuse or neglect is made to the person in charge of the  
118 institution or department, or his designee, pursuant to this subsection, such person shall notify the teacher,  
119 staff member, resident, intern or nurse who made the initial report when the report of suspected child abuse or  
120 neglect is made to the local department or to the Department's toll-free child abuse and neglect hotline, and of  
121 the name of the individual receiving the report, and shall forward any communication resulting from the

122 report, including any information about any actions taken regarding the report, to the person who made the  
123 initial report.

124 The initial report may be an oral report but such report shall be reduced to writing by the child abuse  
125 coordinator of the local department on a form prescribed by the Board. Any person required to make the  
126 report pursuant to this subsection shall disclose all information that is the basis for his suspicion of abuse or  
127 neglect of the child and, upon request, shall make available to the child-protective services coordinator and  
128 the local department, which is the agency of jurisdiction, any information, records, or reports that document  
129 the basis for the report. All persons required by this subsection to report suspected abuse or neglect who  
130 maintain a record of a child who is the subject of such a report shall cooperate with the investigating agency  
131 and shall make related information, records and reports available to the investigating agency unless such  
132 disclosure violates the federal Family Educational Rights and Privacy Act (20 U.S.C. § 1232g). Provision of  
133 such information, records, and reports by a health care provider shall not be prohibited by § 8.01-399.  
134 Criminal investigative reports received from law-enforcement agencies shall not be further disseminated by  
135 the investigating agency nor shall they be subject to public disclosure.

136 B. For purposes of subsection A, "reason to suspect that a child is *an* abused or neglected *child*" shall, due  
137 to the special medical needs of infants affected by substance exposure, include (i) a finding made by a health  
138 care provider within six weeks of the birth of a child that the child was born affected by substance abuse or  
139 experiencing withdrawal symptoms resulting from in utero drug exposure; (ii) a diagnosis made by a health  
140 care provider within four years following a child's birth that the child has an illness, disease, or condition that,  
141 to a reasonable degree of medical certainty, is attributable to maternal abuse of a controlled substance during  
142 pregnancy; or (iii) a diagnosis made by a health care provider within four years following a child's birth that  
143 the child has a fetal alcohol spectrum disorder attributable to in utero exposure to alcohol. When "reason to  
144 suspect" is based upon this subsection, such fact shall be included in the report along with the facts relied  
145 upon by the person making the report. Such reports shall not constitute a per se finding of child abuse or  
146 neglect. If a health care provider in a licensed hospital makes any finding or diagnosis set forth in clause (i),  
147 (ii), or (iii), the hospital shall require the development of a written discharge plan under protocols established  
148 by the hospital pursuant to subdivision B 6 of § 32.1-127.

149 C. *For purposes of subsection A, "reason to suspect that a child is an abused or neglected child" includes*  
150 *any suspected violation of §§ 18.2-370 through 18.2-370.6 and any suspected violation of Article 5*  
151 *(§ 18.2-372 et seq.) of Chapter 8 of Title 18.2 or § 18.2-374.3 involving a child.*

152 D. Any person who makes a report or provides records or information pursuant to subsection A or who  
153 testifies in any judicial proceeding arising from such report, records, or information shall be immune from  
154 any civil or criminal liability or administrative penalty or sanction on account of such report, records,  
155 information, or testimony, unless such person acted in bad faith or with malicious purpose.

156 ~~D.~~ E. Any person required to file a report pursuant to this section who fails to do so as soon as possible,  
157 but not longer than 24 hours after having reason to suspect a reportable offense of child abuse or neglect,  
158 shall be fined not more than \$500 for the first failure and for any subsequent failures not less than \$1,000. In  
159 cases evidencing acts or attempted acts of rape, sodomy, aggravated sexual battery, or object sexual  
160 penetration as defined in Article 7 (§ 18.2-61 et seq.) of Chapter 4 of Title 18.2, a person who knowingly and  
161 intentionally fails to make the report required pursuant to this section is guilty of a Class 1 misdemeanor.

162 ~~E.~~ F. No person shall be required to make a report pursuant to this section if the person has actual  
163 knowledge that the same matter has already been reported to the local department or the Department's  
164 toll-free child abuse and neglect hotline.