

May 7, 2026

D-2026-Case Management-003

TO: REGIONAL CENTER EXECUTIVE DIRECTORS

SUBJECT: NEW STABILIZATION, TRAINING, ASSISTANCE AND REINTEGRATION HOME REFERRAL PROCESS

The purpose of this letter is to provide regional centers with updated information, clarification, and step-by-step guidance regarding the standardized Stabilization, Training, Assistance and Reintegration (STAR) Home referral process, transition planning requirements, and post-placement follow-up expectations. This memo supersedes the March 1, 2013 memorandum outlining the admission process for individuals in acute crisis to state-operated facilities.

STAR homes provide person-centered support and crisis stabilization to help individuals safely transition to the most appropriate, least restrictive community living setting. This updated STAR referral process is intended to promote consistency statewide, improve the timeliness of response, and comply with statutory requirements pursuant to Welfare and Institutions Code (WIC) Sections 4418.7 and 4418.25.

Purpose of the Changes

The STAR referral, admission and transition process has been standardized to:

- Streamline STAR referrals and reduce administrative delays by utilizing the [Online Referral Form](#).
- Clarify required documentation prior to admission.
- Establish clear documentation requirements and procedural expectations during STAR admission, throughout transition planning, and during post-placement follow-up to ensure continuity, accountability, and compliance with statutory timelines.

Effective immediately, all STAR referrals requiring a WIC 4418.7 assessment must be submitted using the official online referral form. Incomplete submissions will delay the scheduling of the required assessment. Please refer to Attachments A-C for detailed procedures for STAR admission, placement, and transition and discharge.

For additional information please contact the State Operated Facilities Division, at (916) 654-1963 or via email at StarReferrals@dds.ca.gov.

Sincerely,

Original Signed by:

CHRIS GEPHART, Deputy Director
State Operated Facilities Division

Attachments

cc: Regional Center Administrators
Regional Center Directors of Consumer Services
Regional Center Community Services Directors
Association of Regional Center Agencies

ATTACHMENT A
**REQUIRED STEPS PRIOR TO ADMISSION TO A STABILIZATION, TRAINING,
ASSISTANCE AND REINTEGRATION HOME**

Admission to a Stabilization, Training, Assistance and Reintegration Home (STAR) is for individuals experiencing an acute crisis and when community-based services cannot safely meet the individual's needs. Prior to admission to STAR, the following must occur:

1. Regional Center Determination of Acute Crisis

If the regional center determines an individual is experiencing an acute crisis and STAR admission may be necessary, regional centers must:

- a. **Appropriate Notifications:** Notify the individual, parent/guardian, legal guardian, or conservator (as applicable), Clients' Rights Advocate, and receive regional center Executive Director approval.
- b. **Utilization of Statewide Specialized Resource Services (SSRS):** Pursuant to Welfare and Institutions Code (WIC) Section 4418.25, the regional center must request assistance locating placement resources across the State from the SSRS prior to pursuing STAR admission to determine whether additional or alternative community-based services can stabilize the individual. The SSRS may be accessed by emailing the SSRS section at the Department of Developmental Services (Department) at SSRS@dds.ca.gov or by calling (916) 651-6309 and requesting to speak with an SSRS representative.

2. Submission of a STAR Referral:

Regional centers need to:

- a. Complete the required online [STAR Referral Form](#).
- b. Enter all requested regional center and individual information. Review for accuracy prior to submission.
- c. As part of the STAR referral submission, include required documentation within the online referral form. The referral form contains designated sections addressing SSRS consultation and outreach efforts/outcomes, and this information is reviewed by the Regional Resource Development Project (RRDP) during the assessment process. The regional center must provide:
 - A summary of SSRS consultation results.
 - Documentation of what community-based services and supports have been considered and attempted.
 - A description of provider outreach efforts and the outcomes of those efforts.
 - An explanation of why the identified services and supports were insufficient to safely meet the individual's needs at the time of referral.

- d. Submit the STAR Referral Form once fully completed. If unable to complete the form in one session, the "Finish Later" option remains active for 10 days.
- e. Email required supportive documentation to: StarReferrals@dds.ca.gov.
 - Subject line format: First Initial and Last name of the individual (Example: J. Doe).

Please note: Incomplete documentation may delay assessment scheduling.

3. 4418.7 Assessment Process

- a. RRDP Staff will acknowledge receipt of the STAR referral to regional center contacts as listed in the STAR Referral Form.
- b. The RRDP Staff will contact the referral source to coordinate and schedule next steps.
- c. Within 10 business days of receiving a completed STAR Referral, RRDP Staff will schedule and complete the 4418.7 assessment. While every effort will be made to meet this timeframe, certain circumstances outside of the control of Department of Developmental Services (Department) or the RRDP may impact scheduling (e.g., pending jail clearance, limited access to the individual, or delayed responses from providers or regional centers). In such instances, the assessment will be completed as expeditiously as possible once barriers are resolved.
- d. Within the 10 business days the RRDP will arrange for a 4418.7 assessment that includes:
 - the individual; and,
 - Identifying barriers to community integration; and,
 - Recommending services and supports necessary to maintain the individual's safety in the community.
- e. The completed 4418.7 assessment and recommendations will be submitted to the referring regional center.
- f. RRDP will request monthly status updates from the regional center, including updated SSRS consultation information and transition efforts, until a final admission determination is made or community stabilization is achieved.

4. STAR Admission Assessment

Once there is an available vacancy for a STAR bed and the individual is determined a priority for admission due to the nature of the crisis, the STAR Program Director and Home Administrator, with input from the Individual Behavior Support Team (IBST), will conduct an assessment and review all submitted documentation to determine whether the STAR home can safely and appropriately meet the prospective individual's service and support needs.

Based on this assessment, a recommendation will be submitted to the Department's Director or designee, who will make the final determination regarding admission.

5. Court Order Requirement

If the Department approves the individual's admission to STAR, the regional center must obtain a court order authorizing admission for crisis stabilization pursuant to WIC Section 4418.7. There are two court commitments that permit admission to STAR:

- a. WIC Section 6506
 - Allows a court to issue an emergency temporary commitment for an individual with developmental disabilities when immediate placement is necessary to protect the health or safety of the individual or others. This order can authorize short-term admission to STAR on an emergency basis, allowing time for the regional center to subsequently pursue a longer-term commitment under WIC Section 6500(c)(2) if continued placement is needed.
- b. WIC Section 6500
 - WIC Section 6500(c)(2) Court Commitments are for a six-month short-term. If the planning team determines it is necessary, there can be a 6-month extension, bringing the total to 12 months. In some circumstances, the court can be petitioned for a one-month extension. In no case can the court commit a person to STAR for a cumulative period exceeding 13 months.
 - The order must specifically name the designated STAR home as the placement location.
 - The order should also identify the appropriate WIC Section 6500 commitment, which is WIC Section 6500(c)(2).

Admission to STAR cannot proceed without appropriate court authorization.

6. Pre-Admission Meeting

Prior to admission, the local RRDP will schedule and convene a pre-admission meeting. Participants must include:

- STAR clinical and administrative representatives
- Regional center representatives
- The individual
- Parent/guardian, conservator, or authorized representative (as applicable)
- Current service provider(s)

- Family members and other members of the individual's support team, as appropriate.
- Notify Disability Rights California (DRC) upon the Department's approval of admission to STAR and an invitation to the pre-admission meeting.

The purpose of the pre-admission meeting is to:

- Clarify immediate stabilization goals.
- Identify safety considerations and behavioral/medical needs.
- Review court authorization status.
- Establish communication protocols.
- Plan for transportation to STAR.
- Confirm required documentation prior to moving in.
- Determine a proposed placement date.

Admission to STAR will occur only after court authorization is obtained, the pre-admission meeting has been completed, and all admission paperwork has been received.

ATTACHMENT B
**FOLLOWING ADMISSION TO A STABILIZATION, TRAINING, ASSISTANCE AND
REINTEGRATION HOME**

Once admitted to a Stabilization, Training, Assistance and Reintegration (STAR) acute crisis home, the following actions are required:

1. 24-Hour Planning Meeting

Within 24 hours of admission, the STAR team, the regional center, the individual, and the individual's circle of support must convene to identify an initial stabilization plan. A circle of support refers to the group of individuals involved in supporting an individual's well-being. This may include family members, guardians or conservators, service providers, clinicians, and other trusted individuals who participate in planning and supporting the person's care and decision-making.

The regional center must:

- Notify the Clients' Rights Advocate (CRA) of the admission.
- Notify the CRA of all subsequent Individual Program Plan (IPP) and Planning Team meetings. The CRA may participate unless the individual objects on their own behalf.

2. Comprehensive Assessment within 30 Days

A comprehensive assessment is conducted within 30 days of admission to evaluate the individual's behavioral, medical, psychiatric, and social support needs. The assessment includes recommendations regarding the services and supports needed for crisis stabilization, identification or development of community placement options, and a projected transition timeline.

The comprehensive assessment must be:

- Submitted to the committing court.
- Incorporated into the IPP/Needs and Services Plan.

3. Ongoing Planning Team Meetings

- The STAR home will convene Planning Team meetings no later than 30 days post-admission.
- Meetings will occur monthly (on or around the admission date) with a focus on stabilization, progress and transition readiness.

4. Extension Requests and Length of Stay

a. **First 90-Day Review:** If transition is not expected within 90 days:

- An IPP meeting must be held.
- Crisis status must be reviewed.
- An updated transition plan must be developed.
- The regional center must submit a written request for up to a 90-day extension to the Department of Developmental Services (Department) via the local Regional Resource Development Program.

- b. **Placement Exceeding Six Months:** An individual may not remain in STAR beyond six months unless all of the following occur prior to expiration:
- A new comprehensive six-month assessment confirms ongoing acute crisis and need for continued stabilization services at STAR.
 - The CRA is notified and included in extension discussion.
 - There is an updated transition plan with specific services and timelines.
 - Department approval is obtained.
 - The court reviews and extends the commitment.

****Requests should be submitted at least two weeks prior to the end of the second 90-day period.****

c. **Placement Exceeding One Year**

Placement may exceed one year only when at least one of the following conditions applies:

- The regional center demonstrates significant progress toward implementing the transition plan; and
- Extraordinary circumstances beyond the regional center's control prevented timely transition.

If both criteria are met:

- The regional center may request a court-approved extension (not to exceed 30 days),
- Department approval is required.

Under no circumstances shall placement exceed a total of 13 months.

ATTACHMENT C **TRANSITION AND DISCHARGE PLANNING**

Transition planning must begin upon admission and remain the central focus of all Planning Team meetings. Reintegration to an individual's own community is the primary goal of Stabilization, Training, Assistance and Reintegration Home (STAR) placement.

The following steps are required to support a safe and successful transition from STAR:

1. Identification of a Community Provider

The regional center is responsible for actively identifying and securing an appropriate community provider as early as possible during the admission.

This includes:

- Conducting provider outreach within the regional center's catchment area;
- Conducting regional center outreach through a regional center Statewide Search; and,
- Utilization of the Statewide Specialized Resource Services (SSRS).
- Regional center documentation of outreach efforts and identified barriers must be maintained.

Consistent with the Department of Developmental Services' (Department's) May 31, 2023, [STAR Transition Calls](#) memorandum, regional centers must actively participate in structured, Department-facilitated transition calls (at least monthly) to monitor stabilization progress and advance timely community placement pursuant to Welfare and Institutions Code Section 4418.7(e). These calls require participation from Department staff, STAR home leadership, regional project liaisons, and designated regional center staff, with increased frequency and Executive Director involvement if transition barriers persist or no plan is identified by nine months, to proactively address obstacles and ensure timely discharge planning.

2. In-Person Meet and Greet

Once a potential provider has been identified, the local Regional Resource Development Projects (RRDP) will coordinate an official in-person Meet and Greet, which will occur between:

- The individual
- The proposed provider (administrator and/or direct support staff)
- Regional center representative
- STAR representative (as appropriate)
- Family/guardian or conservator (as applicable)

The purpose of the Meet and Greet is to:

- Introduce the individual and provider
- Assess compatibility and mutual willingness
 - Discuss expectations, routines, and support needs
 - Allow the individual to express preferences and consent

If the provider determines they can safely serve the individual, and the individual (or authorized representative) agrees to the placement, the regional center will provide notification to the RRDP of the successful meet and greet and the transition process may proceed.

3. Transition Planning Meeting

Following a successful Meet and Greet, RRDP will schedule a formal Transition Planning Meeting (TPM).

Participants must include:

- Regional center
- STAR clinical and administrative staff
- RRDP
- Identified provider
- The individual
- Parent/guardian/conservator (as applicable)
- Other relevant team members

The TPM will:

- Develop a detailed written transition plan.
- Establish a projected move date.
- Identify measurable transition goals.
- Outline required services and supports upon discharge.
- Define roles and responsibilities.

The transition plan must include in-person cross-training and orientation activities to support a safe and informed transition to the receiving placement:

Required in-person activities include:

- STAR clinical staff and the receiving provider's clinical staff participating in in-person clinical cross-training.
- STAR direct support staff and the receiving provider's direct support staff or family caregivers participating in in-person training and observation of daily supports.
- The individual visiting the prospective home to support familiarity with the environment and staff, when clinically appropriate.
- Cross-training must include instruction and demonstration related to behavioral strategies, crisis response protocols, medical or psychiatric considerations, communication supports, environmental supports, and daily routines. If barriers arise that prevent timely completion of in-person cross-training or visits, these barriers must be identified and discussed during the Department's STAR transition calls so that the Department and the RRDP may provide technical assistance and support to help facilitate completion of the required transition activities.

- The receiving provider must develop a crisis plan that outlines the steps the provider will take in the event of a behavioral crisis.

4. Transition Review Meeting (TRM)

Prior to discharge, a Transition Review Meeting will be held to determine readiness for placement.

This meeting will:

- Review all TPM goals.
- Confirm completion of required in-person cross-training.
- Verify that staffing and services are in place.
- Confirm that necessary funding authorizations are secured.
- Assess whether the individual is clinically and behaviorally stable for transition.

When the team determines that all transition requirements have been met and the individual can be safely supported in the community placement, a final discharge date will be established.

RRDP Post Placement Follow-Up

The local Regional Project will complete post placement follow up services for the 18 months following discharge from a STAR home. These in-person visits occur at the 5 days, 30 days, 90 days, and quarterly through an 18-month period post placement. There will be an informal check-in with the RC and provider at the 60-day mark.

The purpose of post-placement follow-up is to monitor stabilization, address emerging barriers, prevent re-crisis, and support long-term community success.