

TELEPHONE SERVICE REQUEST FROM A DEAF/HARD OF HEARING CONSUMER or FAMILY



Initial Contact with Reception or Switchboard

Is client/family deaf or hard of hearing?

No

Follow routine procedure

Yes

MHP Initiate Screening on Screening Form C-20 (Select ASL as language; and Interpreter needed; as appropriate)

Need for Services

Emergent

Urgent

Non-Urgent

Contact Deaf Services Hotline and request immediate assistance

Contact Deaf Services Hotline and request immediate assistance

Send e-mail to Deaf Services Hotline and request assistance

Interpreter or sign fluent clinician will be at the center or on video link within three hours

Sign fluent clinician will contact intake clinician with an appointment that is within two days

Deaf Services staff will contact client/family to schedule appointment

Deaf Services will update C-20 with appointment information as appropriate

HOTLINE Number
1-800-647-2066
deafhotline@scdmh.org
 Videophone: 803-339-3339

If no answer, contact:
 Dara Baril – dara.baril@scdmh.org 803-360-7914 (text)
 Holly May – holly.may@scdmh.org 803-667-0729

IN-PERSON REQUEST FROM A DEAF/HARD OF HEARING CONSUMER or FAMILY



Initial Contact with Reception

Is client/family deaf or hard of hearing?

No

Follow routine procedure

Yes

Contact Deaf Services Hotline and request immediate assistance

Video equipment available?

Yes

Deaf Services MHP will conduct screening using video

Deaf Services will complete C-20 as appropriate

No

Yes

ASL-fluent clinician will be at the center within three hours

ASL-fluent Clinician available?

No

An interpreter will arrive at the center within three hours

MHP Screening on Screening Form C-20 (Select ASL as language; and Interpreter needed; as appropriate)

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