



**All Departments**

**Tel:**

**Fax:**

**London Borough Redbridge Multi Agency Referral Form**

Do you want to know more information about how the MARF referral works?	
Reason For Referral	Request for service
Date of referral	05/01/2026

**Consent**

Is the child/young person aware of the contact?	No
Is the parent/carer aware of the contact?	Yes
Has the parent/carer specified that this information should not be shared with a particular person/agency?	No
Have they given consent for this referral?	Yes
Who gave consent?	Mother Ms Fatima South
Is the Child's residential address in Redbridge or are they receiving a service funded by Redbridge Council?	Yes

**Your information**

**This section of the form is to add your personal details, as the person who is making the referral**

**Portal User**

First name	Julia
Last Name	Westwood
Email	<a href="mailto:Julia.westwood@acornnursery.gov.uk">Julia.westwood@acornnursery.gov.uk</a>
Telephone	02087080044
Building	
Street No	75
Street	Hacton Lane
Locality	
Town	Ilford
County	
Postcode	IG5 6SS
Your Organisation & Role	Acorn Nursery Manager
Preferred contact information	<a href="mailto:Julia.westwood@acornnursery.gov.uk">Julia.westwood@acornnursery.gov.uk</a> / 02087080044

**Details of person being referred**

**This section of the form is to add all of the details of the Children being referred**

**Service User**

Relationship	Nursery Manager
First Name	Darren
Last Name	South
Date of birth	03/08/2023
Pronouns	
Sex	
Gender Identity	Male
NHS Number	0045985764

NI Number						
Email						
Telephone						
Organisation						
Secondary Name						
Building						
Street No	32					
Street	Barleylands Grove					
Locality						
Town	Seven Kings					
County						
Postcode	IG3 2GG					
Please add all the children's name who are being referred						
Does the Parent /carer/ or child have any communication difficulties? No						
Additional information about the child or young person (including other referred siblings)						
Other children – under 18						
Other Significant Adults						
Please add the Adults details to the table below						
Name	Relationship to Children	DOB	Ethnicity	Address	Contact details	Does this person hold Parental Responsibility?
Ms Fatima South	Mother	27/03/2001	Black British	32 Barleylands Grove, Seven Kings IG3 2GG	07456000142	Yes
Mr David South	Father	Not known	Black British	Not known	07766543127	Not known
Ms Daisy Fisher	Family Friend (aunty)	Not known	Not known	Not known	07888994231	
Please add contact details of the main carer:						
Ms Fatima South 07456000142 Mr David South 07766543127						
Reason for referral						
Summary Reason for this contact		<p>This referral is being made due to concerns that Darren may be experiencing neglect in the care of his mother, Ms South who appears to not be prioritising his needs. The nursery is concerned that Ms South is not taking advice on board in providing Darren with a balanced diet and routines and access to appropriate services. Ms South has shared that her mental health is low and was advised to speak with the GP which we understand has not yet been actioned. If Darren is not brought into nursery, the nursery have no contact apart from Ms South. The relationship is complicated with father, Mr David South, as he is not around, and we have not seen him although Ms South mentioned that recently that he is back in contact. We have previously been informed that the relationship is complicated, and Ms South and Darren do not have contact with him.</p> <p>The concern is that Ms South is not prioritising the needs of Darren to access appropriate services and not providing Darren with opportunities to have access to a variety of stimulating activities especially in the outdoors; not giving Darren the appropriate support to eat more healthily; Ms South sends in foods that are heavily carbohydrate based e.g. chips, with rice or noodles, plantain, doughnuts, or yoghurt.</p> <p>With nursery events, Ms South has not contributed to any craft activities we have suggested to carry out with the children at home to encourage more parent and child involvement.</p> <p>Ms South is seen holding Darren's hand while going home, she will sometimes use endearing tone when talking with Darren, but Darren makes no expression.</p>				

	<p>In terms of stimulation, Darren has limited experience as Ms South has not taken steps to expose Darren to a variety of activities which are free and local. Ms South has reported that Darren has begun to ‘scream’ more and we have also noticed that Darren will shriek when something is bothering him e.g. when another child is touching his lunch box or he will tap his head when he is over-stimulated with noise at home time.</p> <p>Darren is a quiet child who can play for a long time by himself, he does not seek out others to play with him, but he may push when another child tries to take a toy or he wants something that they have, he does not have the understanding of sharing or turn taking yet. He likes to skip across the room and may bump into other children and not notice them.</p> <p>Ms South has shared that she struggles with her mental health, but she has not sought any help yet. She has talked of feeling isolated in Ilford as she is away from her family in Lambeth. Nursery had recently helped Ms South with a referral to children center for fussy eating help and activities to widen her social experience (completed with Ms South’s consent) but then when the appointment was given to discuss the support, Ms South did not attend.</p> <p>Ms South seems to agree with the advice or concerns raised but the follow-through is the issue, hence there is delayed progress and it seems that Darren’s needs are not prioritised especially when he presents as having additional needs.</p>
Current location of the child / Young person	
Did the Incident take place at a different address to a Home address?	
Any other additional needs or concerns you have?	Darren has difficulties with his social communication

Additional information about the concerns if required:			
<b>Information on Statutory status</b>			
Any child in family is/has been subject to a child protection plan?	Not known		
Any child or other family member is/has been looked after by a local authority?	Not known		
Any child in the family is/has been on the disability register?	Not known		
<b>Key Agencies involved</b>			
Please detail any other key agencies involved			
Organization & Role	Name of professional	Telephone	Email
Greensleeves Surgery	GP	02077658831	

<b>Supporting Documentation</b>
<p>You will only be able to attach the following file types:</p> <ul style="list-style-type: none"><li>• Word Documents</li><li>• PDF Files</li><li>• Images (in jpg / jpeg / png format)</li></ul>

<b>Attachments (0)</b>
Attachments
There are no attached documents