

## Early Learning and Childcare Facility Inspection Report

Type of Inspection:  
Monitoring Inspection

Pursuant to section 21 of the *Early Childhood Services Act*, operators of licensed early learning and childcare facilities must post their most recent inspection report in a clearly visible and prominent place in the facility.

Name of Operator <b>M&amp;K Talbot Childcare Centre Inc.</b>		Inspection Date <b>March 20, 2026</b>
Facility Name <b>Wee College Hildegard Campus 1</b>		Licence Number <b>2015906</b>
Address <b>31 Hildegard Drive Moncton NB E1G 2G5</b>		Telephone Number <b>(506) 830-2400</b>
Type of Facility <b>Full-time Early Learning and Childcare Centre</b>	Maximum Number of Children <b>34</b>	Ages of Children <b>INFANTS PRESCHOOL</b>
ELCC Licensing Staff <b>Sophie Powers</b>	Position Title <b>Quality Assurance Monitor</b>	

Order for Compliance	Regulation	Date to be corrected	Date corrected
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<p><b>General Comments</b></p> <p>The Quality Assurance Monitor is on site to conduct a monitoring inspection. During the visit, the following elements were verified:</p> <ul style="list-style-type: none"> <li>- Child record files</li> <li>- Incident records</li> <li>- Daily activities</li> <li>- Daily routine</li> <li>- Child guidance</li> <li>- Rest area</li> <li>- Washrooms</li> <li>- Storage space</li> <li>- Diaper changing</li> <li>- Nutrition</li> <li>- Safety</li> </ul> <p>Ratio was respected during the inspection. Children were observed playing outdoors and transitioning to indoor play and lunchtime. When the QAM left the facility, children were getting ready for nap time.</p> <p>The QAM had a discussion with the administrator regarding designation requirements. The administrator confirmed that all eligible educators are on track to completing their 10 hours of professional learning. (renewal coming up in June)</p>
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original signed by  
**Sophie Powers**

**March 20, 2026**

Signature of Early Learning and Childcare Licensing Staff

Date

original signed by

**Stéphanie Williams-Burke**

**March 20, 2026**

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Signature of Operator/Designated staff

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Date

*"I hereby acknowledge receipt of this report"*