

Early Learning and Childcare Facility Inspection Report

Type of Inspection: Follow-Up 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 Licence 1 | | Numb | er | Ins | Inspection Date | | |
|--|--|---------------------------|----------------|----------------------|------------------|----------------|--|
| Unicorn Children's Center Inc. 322001 | | | | Aug | August 29, 2019 | | |
| Facility Name | | | | Tel | Telephone Number | | |
| UNICORN CHILDREN'S CENTER | | | (506) 387-4160 | | | | |
| Address | | | | • | | | |
| 500 CLEVELAND Avenue Riverview NB E1B 1Y2 | | | | | | | |
| Name of Early Learning and Childcare Licensing Staff | | Position Title | | | | | |
| Nancy Glendenning | | Quality Assurance Monitor | | | | | |
| Order for Compliance | | Regulation | | Date to be corrected | | Date corrected | |
| 24(1) For the purposes of subsection 20(1) of the Act, the following records and documents shall be maintained on the premises of a licensed facility: (c) staff member records that include (iv) a signed declaration confirming that the staff member has read and understood his or her obligations under the Act and this Regulation. Comments: Deficiency is now compliant | | 24(1)(c)(iv) | | Aug 26, 2019 | | Aug 29, 2019 | |
| 24(1) For the purposes of subsection 20(1) of the Act, the following records and documents shall be maintained on the premises of a licensed facility: (c) staff member records that include (vii) a copy of a valid first aid certificate and a valid cardiopulmonary resuscitation certificate for each administrator and educator. Comments: Deficiency is now compliant | | 24(1)(c)(vii) | | Aug 26, 2 | 019 | Aug 29, 2019 | |
| General Comments | | | | | | | |
| Original signed by Nancy Glendenning Signature of Early Learning and Childcare Licensing Staff Date | | | | | | | |
| Signature of Operator/Designate | | | Date | | | | |