



## 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<br>679028 N.B. INC.                                  | Licence Number<br>2015093 | Inspection Date<br>July 06, 2023            |                |
| Facility Name<br>Riverview Youth Connection                           |                           | Telephone Number<br>(506) 387-4989          |                |
| Address<br>567 Coverdale Road Riverview NB E1B 3K7                    |                           |   |                |
| Name of Early Learning and Childcare Licensing Staff<br>Sophie Powers |                           | Position Title<br>Quality Assurance Monitor |                |
| Order for Compliance  | Regulation                | Date to be corrected                        | Date corrected |

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| <p><b>General Comments</b></p> <p>During the visit, the children and staff were not at the facility. A staff member from the other license advised QA monitor that they were out on an outing. QA monitor will return another day for a monitoring inspection.</p> <p>While walking through the facility, QA monitor noticed a water leak in one of the classrooms. A large puddle of water was on the floor and a bucket was collecting water that was dripping from the ceiling.</p> <p>Operator must contact public health to ensure the area is safe for children. Correct measures must be taken to rectify the water damage, if any.</p> <p>Since this situation is a reportable incident, the operator must complete an incident report and send it to the QA monitor.</p> |
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original signed by  
Sophie Powers

July 06, 2023

\_\_\_\_\_  
Signature of Early Learning and Childcare Licensing Staff

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Operator/Designate

\_\_\_\_\_  
Date