APPENDIX A - SOURCES OF INFORMATION:

Interviews with Parties

March 25 and June 3, 2018

Interviews with the Mother

March 25 and June 3, 2018

Interviews with the Father.

Observational Visits with the Children and the Parties

April 22, 2018

Home visit to the home of the mother. Present for the visit were the

mother, the two children and the Clinician.

April 21, 2018

Home visit to the father's home. Present for the visit was the father,

the children and the Clinician.

Interview with the Children

April 21 and 22, 2018 Sean Kiska was interviewed in private at each parents' residence.

April 21 and 22, 2018 Cate Kiska was interviewed in private at each parents' residence.

June 27, 2018

Cate was interviewed via telephone.

Collateral Contacts

May 4, 2018

Interview with Dr. Coupland regarding counseling for the family.

May 15, 2018

Interview with Dr. Chow regarding the family.

April 6, 2018

Interview with Dr. Jackson regarding her involvement with the

mother.

June 2, 2018

Interview with Dr. Cardoso regarding his involvement with the

parents.

April 23, 2018

Interview with Nadine Crowley

June 22, 2018	Interview with Dr. Mercer
April 10, 2018	Interview with Dr. Matheson
April 9, 2018	Interview with Jennifer Borrel-Benoit, Principal Sir Winston Churchill School

Written Reports Reviewed

April 17, 2018	Montfort Hospital provided information regarding Ms. Moore
May 8, 2018	The Ottawa Police Service provided information regarding the family.
May 16, 2018	The Children's Aid Society of Ottawa provided information regarding their involvement with the family.
Apríl 12, 2018	Queensway Carleton Hospital provided information regarding Ms. Moore
April 27, 2018	Eastern Ottawa Resource Centre provided information regarding their involvement with Ms. Moore.
June 11, 2018	Ottawa Hospital provided information regarding the family.
June 13, 2018	Academic reports from Sit Winston Churchill School.

Court Documents Reviewed

The following documentation was provided:

Provided by the Ms. Moore

Form 14: Notice of Motion dated November 9, 2015, July 18, 2017, January 31, 2018 Form 14A: Affidavit dated July 27, 2017, May 8, 2017, April 20, 2017, April 11, 2017, July 7, 2017, March 7, 2017, July 18, 2017, August 3, 2017, March 19, 2018, January 31, 2018, March 9, 2018, November 9, 2015, July 13, 2017, April 17, 2018, Form 14B: Motion dated April 11, 2017, April 20, 2017, March 7, 2017, July 7, 2017, May 8, 2017

Form 14C: Confirmation dated August 25, 2017, March 20, 2018, January 24, 2018

Form 22: Request to Admit dated July 28, 2017August 3, 2017 Form 22A: Response to Request to Admit dated August 11, 2017 Form 4: Notice of Change in Representation dated September 12, 2017, January 23, 2018, January 1, 2017, February 12, 2017

Form 17: Conference Notice dated August 23, 2017, February 24, 2016, June 19, 2017

Form 6B: Affidavit of Service dated August 23, 2017, June 19, 2017, July 7, 2017, July

28, 2017, January 23, 2018, January 30, 2018, March 20, 2018, February 1, 2017,

February 14, 2017, March 7, 2017

Endorsement dated February 26, 2016, February 6, 2017

Endorsement dated March 14, 2017, April 27, 2017, June 28, 2017, July 13, 2017

Endorsement dated November 16, 2017, December 5, 2017, and January 26, 2018

Endorsement dated March 22, 2018, August 29, 2017, January 26, 2018

Form 25: Order Temporary dated January 26, 2018, April 27, 2017, June 28, 2017,

March 22, 2018

Form 13A: Certificate of Financial Disclose dated November 9, 2015, January 14, 2016 Offer to Settle dated March 19, 2018

Reply dated March 20, 2018

Form 22: Request to Admit dated March 6, 2017

Interim Parenting Agreement dated December 13, 2016

Form 10: Answer dated January 27, 2018, January 14, 2016, June 21, 2017

Form 13.1: Financial Statement dated March 19, 2018, June 21, 2017, January 19,

2018, March 9, 2018, November 9, 2015, January 12, 2016

Form 13B: Net Family Property Statement no date, March 8, 2018

Form 17C: Settlement Conference Brief dated January 19, 2018, December 13, 2016, January 29, 2018

Form 35.1: Affidavit in Support of Claim or Access dated March 18, 2018, January 12, 2016, January 23, 2018

Form 17A: Case Conference Brief dated February 24, 2016 Form 17C: Settlement Conference Brief dated June 21, 2017

Mr. Wade Smith provided via email

Form 17C: Settlement Conference Brief dated December 13, 2016, January 23, 2018

Form 8: Application dated November 9, 2015

Form 6B: Affidavit of Service dated November 10, 2015

Form 35.1: Affidavit in Support of Claim or Access dated November 9, 2015

It should be noted that Ms. Moore provided a number of documents such as emails and more.

Disclosure Meeting

A disclosure meeting was held on June 28, 2018 via teleconference with the father present with his counsel and the mother present at her residence. The Parties were requested to bring to this writer's attention any factual corrections shared during the disclosure meeting. Ms. Moore indicated some errors in fact that Mr. Kiska agreed with and which were corrected. No additional errors were reported by either Party.

APPENDIX B - COLLATERAL INFORMATION

PROFESSIONAL

Dr. Coupland was involved with the family around September 2014 and November 2015. Dr. Coupland reported the following:

The mother was seen post hospitalization and was upset with her hospital experience. The mother attended five sessions, the father attended three sessions and as a couple they attended two sessions.

One of the goals for the mother was how to understand her difficulties and what to do about them. The mother's last session was June 4, 2015. The mother was described as receptive to counselling. She was very focused on the hospitalization and the diagnosis of Bipolar. She wanted her file "locked up" during one of her delusional episodes. She was "grid locked" around the finances and considered her ex-husband to be a "bully". Dr. Coupland described the father as "an accommodating man". There were arguments regarding a housekeeper and the amount it cost for her services, the cost for an expensive bed, which agitated the father. The father developed sensitivity as to when the mother would have an episode, which presented with her increase in alcohol consumption and decreased sleep.

The mother requested a referral to Dr. Soo, who completed a comprehensive report, taking into account the files from all the hospitals the mother was involved with. He administered MMPI (Minnesota Multiphasic Personality Inventory). Dr. Soo explained his results to the mother: Bipolar. Dr. Soo did not rule out Brief Psychotic Disorder. He was of the opinion that the mother should be treated with antipsychotics and could live a relatively normal life. Dr. Soo additionally felt that the mother should be closely monitored as she disregarded her medications, and the "door to hospitalization should be kept open". Dr. Coupland shared that the mother wrote "scathing" emails to Dr. Soo.

Dr. Coupland is of the opinion that the mother has difficulties understanding others' motivation and this gets worse when she has periods of delusion. Her last reported one was June 2015. Dr. Coupland added that the father reported another hospitalization October 2015, when the mother turned 50 years of age. She exhibited abnormal behaviors and spent \$2300 on a bed. The mother portrays herself as a "mistreated woman" and "ran the show". Dr. Coupland shared that the children are "scared" of their mother, "she talks to herself and tells the children that dad lies".

The father presented as concerned for the children, and has a combination of anger and guilt in his ability to protect the children. The father felt the mother lacked empathy, as

she made threats and increased her drinking. The father was angry with the mother, as she was aware that she was having challenges with her mental health. At one point, the school alerted the Society, as the mother picked up the children.

Dr. Coupland explained that the mother became "very aggressive with people and would get worked up". She was "not easy to work with". The mother was "resistant to increasing her understanding of others". To others, the mother presented as "resentful, insensitive to the needs of others, immature and antagonistic against authority". She is a mistrusting person, who worked towards developing a trusting relationship.

Dr Chow shared that she has known the family for a long time. Dr. Chow added that emotionally the family situation has affected the father, as well as the children and the mother. Dr. Chow described the father, and the mother, as both very caring and engaged with their children. Prior to the parental separation, both parents were involved in attending the office with the children.

With regards to the father, Dr. Chow shared that apart from stepping on some glass in 2001, he is a healthy and active male, and makes efforts to remain so. With the recent custody and access issues, and his concerns for his children, along with the changes in the family unit, he has been prescribed medication for his blood pressure. Otherwise, the father has not required medication. The father has shared his concerns for the safety and the wellbeing of the children in regards to the mother's mental health. He has not come to the office for emotional support for himself, as he has family support that he is comfortable with and seeks out when he feels he needs to talk with someone.

With regards to the mother, Dr. Chow shared that she prefers to support the mother through the mother's symptomology, which has been supportive and productive. Dr. Chow is of the opinion that the mother has been better able to "read the road signs" when she is stressed, but still gets into some hypomania and manic episodes. The mother has had episodes that have required hospitalization and that have presented themselves without warning. The mother has acknowledged insomnia and behavioural characteristic of mania. The mother has been proactive in seeking supports. Dr. Chow describes the mother as "extremely intelligent" and a "high functioning individual". She did not present with any of the traditional "red flags" associated with mental health concerns, such as post-partum depression. The mother has prescribed medications to address her challenges and has been open with Dr. Chow with how she uses them.

Cate is described as "extremely bright, bubbly, happy, and a girly girl". She has presented as doing better in the last year with the changes in the family unit. She is very involved in activities and loves both her parents. She has a close relationship with her brother. According to Dr. Chow, Cate is aware of the adult conflict.

Sean has been the quiet teen. He was involved in counselling, as was Cate, with Nadine Crowley in 2016 (no report was provided to Dr. Chow). He is described as a "nice boy, and aware of what's going on, and understands the implications". He tends to worry about his mother. He is involved in many activities, as is Cate. He has experienced migraines that appear to have decreased more recently. Sean engages but presents as cautious. Dr. Chow is of the opinion that Sean spends too much time on the "screen", and has less sleeping time. She would prefer that he spend his time outside.

In summary, Dr. Chow is of the opinion that the parental separation has been felt by the family members, who may still be healing. The parents are described as very caring and loving, and involved with their children.

Dr. Jackson is a psychologist who has been involved with the mother. Dr. Jackson is of the opinion that the mother is very insightful regarding her reactions and process. She manages her illness well and has a safety plan in place for the children. She has also asked CAS to keep her file open to support the children and their needs. The mother believes the daughter is now being targeted by the father, which Dr. Jackson suggests may be happening.

According to Dr. Jackson, the mother attended 8 sessions in 2017, and presented as stabilizing. She was referred for support and a second opinion. According to Dr. Jackson, the mother was initially diagnosed with Bipolar Disorder, which was based on what the husband provided to the doctor. However, Dr. Jackson explained that the information provided by the father has been disproved by the mother with receipts and documentation. The father had made claims that she was overspending at the casino, when this is false. According to Dr. Jackson, the father took the DSMV and regurgitated the traits to the doctor to get the mother diagnosed.

Dr. Jackson's diagnosis is Brief Psychotic Disorder. She explained that Dr. Mercer's diagnosis is Psychotic Disorder NOS, which is not contrary to Dr. Jackson's diagnosis. The mother is on medications, and has been very good at regulating when she requires it. Her episodes are impacted by the stressors of the situation, or by those that are created by the husband. Dr. Jackson reports that the husband went so far as to try and get the maternal grandfather to have the mother's rights taken away and deemed incapacitated. Dr. Jackson explained that the mother does not meet the criteria and does not require this. Dr. Jackson has not had contact with the husband. First appointment was January, 2016. The mother remains in contact with Dr. Jackson and continues to attend sessions.

Dr. Jackson was interviewed a second time on June 26, 2018. She shared that the mother has great insight in to her illness and self regulates well with the support of her medications. She has her children's best interest at heart and is dedicated to them. In response to the mother taking the children out of school yesterday, Dr Jackson explained that the mother was focused on having a fun day with the children and going wall climbing and such. The errands that the mother did in the morning with the children present did not take long and the mother did not share the contents of the documents that she was dropping off. Dr Jackson is of the opinion that there was no negative impact on the children with the dropping off of documents, as the children were happy you have a day with their mother doing fun activities, especially since there is no academic learning at school at this late date of the academic year.

Dr. Jackson has seen evidence contrary to the father's statements made in relation to Ms. Moore's diagnosis of Bipolar, such as spending \$10,000 at a casino when that never occurred, sleeping for a month, when Ms. Moore was involved at the gym and with activities with the children and other people. Dr. Jackson has spoken to Ms. Moore about her correspondences and has suggested that she curb them, which Ms. Moore has done more recently.

Ms. Moore is described by Dr. Jackson has a very intelligent person, very well organized and committed to her children and herself. She has made it clear that the emails are a means of protecting herself, if something should occur, which Dr. Jackson supports.

Dr. Jackson explained that Ms. Moore has been feeling alone, as Mr. Kiska had taken great effort in convincing her family members that she is unstable and unable to care for the children. This has been very difficult for Ms. Moore, who is grieving her loss of her family.

Dr. Cardoso has been involved with the parents, who have attended 8 or 9 sessions. The couple started their sessions March 27, 2018. According to Dr. Cardoso, Ms. Moore self-referred. The parents had different goals: Ms. Moore wanted Dr. Cardoso to "covertly assess" Mr. Kiska as a psychopath, while Mr. Kiska's goal was to work on the couple's communication and co-parenting.

Dr. Cardoso is of the opinion that Ms. Moore is stuck in a "loop" and feels she is persecuted by Mr. Kiska. Dr. Cardoso feels this may be residual from Ms. Moore's "psychotic breaks". The relationship between Mr. Kiska and Ms. Moore is described as "toxic" by Dr. Cardoso. It marred with stone walling and defensiveness.

Ms. Moore appears to make progress within the sessions but Dr. Cardoso is of the opinion that she often regresses once she leaves. Ms. Moore presents as wanting to engage but there appears a capacity issue, as she reverts to "persecutory ideas" with a "delusional flavor".

With regards to "gaslighting", Dr. Cardoso stated that "there might be a kernel of truth but it is difficult to flush out". He feels that the mother is struggling with her" initial wound" and has difficulty seeing her role in the couple's conflict. Dr. Cardoso describes the couple's conflict as "legal warfare" and adds that this adds tension to the relationship and tension in to the homes. "This warfare is not useful". There are moments in the couple's relationship that are positive, but that then get impacted with the "barrage of emails and the accusation of being a psychopath" on the part of Ms. Moore towards Mr. Kiska.

A treatment team approach is the recommendation Dr. Cardoso feel may support Ms. Moore at this time. She is emotionally expressive in the sessions and engages in the process with slight flexibility. He acknowledges that this couple is highly intelligent and loves their children very much. "The family needs to come together and heal with the transition, and learn to navigate and communicate amicably". He adds that he is pleased to have the couple continue with the sessions.

Dr. Mercer shared that the mother was referred on June 14, 2013 by Dr. Charbonneau, after the mother had been admitted to the hospital. The diagnosis at the time of the admission was Bipolar Affective Disorder (BAD). Most of the information at the time of the mother's admission was provided by the husband, as the mother was experiencing a psychotic episode. The husband had shared that the mother had disorganised emails, did not sleep today, and planned a trip to Mexico.

Dr. Mercer is part of the Urgent Care program, which offers short term psychiatric treatment. The referral to Dr. Mercer was for follow up for psychiatric treatment after the mother was discharged from the hospital.

During the period that Dr. Mercer was involved with the mother, Dr. Mercer did not have concerns regarding the mother's involvement with the children. As such, Dr. Mercer did not contact child protection services. Although the mother was initially diagnosed with BAD, Dr. Mercer shared that the mother's presentation was mild mania and her baseline was hyperthymic.

The mother was seen again in July 2013 by Dr. Mercer, who described the mother to be at her baseline. The mother was seen again at the end of July and presented as mildly depressed.

In 2014, the mother was admitted to the hospital for similar reasons. She was referred to the program but cancelled and then did not present herself for the subsequent appointment.

In July 2015, the mother's family physician called, as there were some concerns. The mother was admitted in October 2015 and seen again by Dr. Mercer in December. Dr. Mercer shared that at that time, the diagnosis of Bipolar wasn't a definitive diagnosis. The mother was experiencing much stress related to the issues with her husband. The diagnosis of psychosis NOS was considered and the mother's presentation appeared to be more in line with such a diagnosis. The mother was started on medication in hospital.

In January 2016, the mother was seen again by Dr. Mercer. The mother expressed that she was doing well and feeling better but still encountering a lot of stress related to the issues with her husband. The former couple reunited for a short period. In March 2016, the mother subsequently stopped her medication, as she felt they were not working.

In June 2017, the mother was seen at the request of her family physician. She was responding to medications, which had been started by her family physician. The mother did not present as distressed, and she was not psychotic.

Appointments for October 31 and December 1, 2017 were scheduled for the mother but she cancelled them. Given that the program is an urgent and short-term program, the mother would require another referral to be seen by Dr. Mercer.

Dr. Mercer wanted to highlight that although the initial diagnosis was Bipolar Affective Disorder, the mother presents as hyperthymic as her general state, and she has experienced brief psychotic episodes related to the stress she has experienced, and has responded well to medications.

Cate Kiska was referred to **Dr. Matheson** for a learning assessment January 2018. Dr. Matheson met with the parents individually prior to the assessment. Cate was receptive to the testing and completed the testing. Dr. Matheson stated that she was not involved in personal counselling but recognised that this was a high conflict case.

Queensway Carleton Hospital provided information regarding Ms. Moore. On May 23, 2014, Ms. Moore attended the hospital and asked to be admitted for one night. Final diagnosis, Bipolar vs hyperthymic Temperament Disorder, possible Hyperthymic episode.

Montfort Hospital provided information regarding Ms. Moore. Ms. Moore was admitted July 3, 2014 and discharged July 5, 2014. Ms. Moore reported a domestic dispute with Mr. Kiska and was looking for shelter and counselling support. Most responsible diagnosis: Acute Adjustment Disorder. Comorbidity diagnosis: preadmission: Bipolar affective disorder, Cluster B personality Traits. Stressors related to marital conflict, and peri-menopausal symptoms. Ms. Moore was referred to psychiatry and seen a by a social worker. Ms. Moore was assessed and formed 1 and found to be in an acute manic episode with possible pit /chotic features. "Our impression is that at the current time, she is likely experiencing symptoms but remains able to function in her day to day life. She does not express any intent of self-harm or harm to others. She expresses thoughts of wanting to be in her home environment to better manager her symptoms and any marital conflict".

The hospital information system noted two prior hospitalizations for Bipolar affective disorder: March 3-5, and April 16 to May 28, 2013. The March admission noted that Ms. Moore had not slept in days, sent disorganized emails, impulsively booked a trip to Mexico, and had discussed starting a mental health company.

The April admission related to Ms. Moore was brought in by an outreach worker from the Cornerstone women's shelter. Ms. Moore had been sending paranoid emails, and felt that all forms of communication were being monitored by the government. This information was not confirmed by Ms. Moore at the time. She was prescribed medication that appeared to be contrary to what its intended effect should be. She was followed by Dr. Mercer as an outpatient, as well as her family physician.

Ottawa Hospital provided information regarding the family. The information includes the antenatal and postnatal information regarding the births of Sean and Cate Kiska, and the operation for the delivery of Sean, blood work and ultrasound results.

With regards to Ms. Moore, she was seen June 14, 2013. Impression Bipolar V, hyperthymic temperament with manic episodes vs manic episode, partially remitted mild manic. No concerns noted today regarding the safety of the children or patient. July 2, 2013 Ms. Moore was seen with the same impression. It is noted that she is doing well and getting back to normal slowly. July 29, 2013 seen with impression Bipolar D/O ? mildly depressed.

14/10/02 Latuda samples provided.

October 28, 2014 Ms. Moore did not attend for her appointment and the file was closed. July 2015. The husband called and shared his frustration with Ms. Moore denying her diagnosis and not taking medication. The family was referred back to their family physician.

December 4, 2015 notes indicate 5th admission in four years. With impression psychosis NOS ? schizoaffective, anxiety related to divorce/separation.

December 15, 2015 impression psychosis NOS r/a baseline anxiety resolved. (Ms. Moore is of the opinion that the date should read November and not December) December 30, 2015 impression psychosis NOS not manic not psychotic anxiety secondary to stress of marital discord/separation.

January 11, 2016 impression psychosis NOS not mania not psychotic anxiety resolved improvement likely secondary to resolution financial/divorce related stress.

February 22, 2016 psychosis NOS remitted. Ms. Moore has called when stressed. April 25, 2016 Ms. Moore informed the doctor of the negative effects of the medication on her.

Ms. Moore requested a follow up appointment that occurred on May 6, 2016.

Impression Bipolar vs psychotic NOS improved with Lamotrigine.

February 17, 2017 cancelled at request of client.

October 13, 2017 impression Ms. Moore's diagnosis is difficult to determine. Past diagnoses have included bipolar + schizoaffective disorder vs brief psychotic episodes. Preferred diagnosis is Brief Psychotic Episodes.

October 31, 2017 appointment offered and declined.

December 1, 2017 cancelled appointment.

December 4, 2017 Ms. Moore could not be offered another hour session.

April 11, 2018 notation by Dr. Saul stating that Ms. Moore would like to speak with him about the diagnosis he gave in 2013. Dr. Saul declined and redirected Ms. Moore to Dr. Mercer.

Nadine Crowley was involved with the family January 2016. She received a call from Dr. Chow for the family for support, with both parents "on board". The first meeting was with the parents on February 18, 2016. Ms. Crowley's role was therapeutic support to the children and to assist the parents in talking with the children with a smooth transition. Mr. Kiska wanted to tell the children about the separation and thought that a mutual statement may be appropriate.

The children were seen without their parents for five sessions. The parents were seen for four sessions, which Ms. Crowley describes as "abrasive and argumentative". Ms. Crowley last saw Ms. Moore on September 20, 2017, Mr. Kiska on December 19, 2017

and the children on October 20, 2017. The children were nice and stated that they were coping with the changes but they were not "keen" on talking about the separation.

Sean is described as a "gentle soul, protective of both parents, cautious, and deferred to Cate during the sessions. He was very affectionate towards his sister." Concerns regarding Sean were shared, as he tends to bottle his feelings up and has been aggressive at times. Sean shared that he was scared when the incident occurred at the Hilton. He felt that Ms. Moore was acting differently the four days he was with his mother. He added that his mother tries to get him to talk to her or anyone he would want to see. But he is not interested in counselling. Ms. Crowley stated that Sean is guarded and has refused to talk about other incidents with her.

Cate was quite open and engaged. She had difficulty with her self-esteem and threatened to run away. Cate shared the event that occurred at the Hilton. She shared that at home her parents would argue often and she would hide in her closet.

Ms. Crowley shared that Ms. Moore "blamed" Mr. Kiska for everything, including the misdiagnosis. The children shared that Ms. Moore shared negative comments regarding the father with the children, which was brought to Ms. Moore's attention and that she should not involve the children in the adult conflict. Ms. Crowley added that Mr. Kiska presented as trying to be patient with Ms. Moore and was concerned about Ms. Moore's behaviors and how they impact the children.

The parents disagreed on how their saw the children. The family talked about life in general, the changes and what was going on with them. Ms. Crowley stated that "the children are working hard at staying out of the adult conflict".

Jennifer Borrel-Benoit, Principal at **Sir Winston Churchill School** shared Cate is not supported by an IEP. Ms. Borrel-Benoit shared that it is her understanding that Cate will be having a psychological assessment, as she displays gaps in learning, reading, comprehension and recall. The school has a social worker involved with the school, however, Cate is not involved with them. According to Ms. Borrel-Benoit, both parents have shared a lot of information regarding the ongoing adult conflict. She is also aware of the involvement of the Society.

According to Ms. Borrel-Benoit, there is a lot of social drama with students with Cate at school. Cate "appears sad and needs academic support". With regards to Sean, he doesn't share. Both parents adore their children. There have not been any concerns regarding hygiene and such.

WRITTEN REPORTS & DOCUMENTATION

Psychological Assessment Report by Matheson Psychology (provided by Ms. Moore)

Date of Report March 27, 2018 regarding Cate Kiska

Cate is in grade 5 in French immersion. She has no IEP. The assessment indicates a "generally cohesive profile of cognitive abilities, ranging from high to low average, with the exception of Cate's Fluid Reasoning Skills, which were in the very low range". "Cate's academic achievement are generally the same as other children her age, with the exception of Math". She scored very low in Fluid Reasoning with 3 percentile, well below average 8 percentile in Math Fluency. Cate has significant struggles with inattention that significantly impacts her functioning at home and at school. "Cate's teacher reported that without significant and intensive one-on-one support, Cate would not be accessing the curriculum and meeting grade level expectations successfully". The report also indicates that Cate is described as increasingly withdrawing from the classroom discussions and group assignments. Additionally, it is noted that over the past three years, "Cate's challenges with inattention have increased significantly". Cate is described as anxious and having difficulty coping with big feelings and struggles with sadness and over-excitement. The report includes a number of recommendations to support Cate.

Sylvain Math and Reading Assessments (provided by the mother)

Cate was assessed on May 7, 2018. Cate's score for math was 8th percentile and 3.6 grade level. This means that her math skills at a grade 3 level, with 92% of other students performing higher. With regards to reading, Cate scored at the 27th percentile and grade 4.6. This means that 73% of students score higher than Cate within the same grade level. Sean's scores indicate 91percentile for reading assessment.

Eastern Ottawa Resource Centre provided information regarding their involvement with the Ms. Moore, who first accessed the program February 2018. She started meeting with a Violence Against Women Counsellor for individual support. At the time, Ms. Moore had attended three sessions, scheduled on a monthly basis. Safety concerns and legal bullying and gaslighting, among other topics were discussed and explored in-depth.

Ottawa Police Service provided information regarding the family.

April 16, 2013, the Ottawa Police was approached by a complainant in regards to Form 2. When located please contact the complainant and take to the Ottawa Hospital, Civic

for psychiatric evaluation. Ms. Moore was subsequently located and brought to the hospital.

July 3, 2014, police were dispatched to Lampman Crescent regarding a female hiding in the washroom from her husband, Mr. Kiska. Ms. Moore stated that her husband threatened by stating "I'm threatening you Deirdre". Ms. Moore wanted to see a physician. No charges laid and Ms. Moore was taken voluntarily to the hospital.

July 5, 2014, police were dispatched to Tim Horton's, as Mr. Kiska wanted to report Ms. Moore missing. Ms. Moore was discharged from the hospital today but did not return home. Ms. Moore was subsequently located in Quebec at a Bed and Breakfast.

July 8, 2014 the police were called to the Lampman residence where Mr. Kiska wanted to report Ms. Moore as missing and off her medications for Bipolar Disorder. The police spoke with Mr. Kiska, Ms. Moore and Dr Chow. Ms. Moore was cooperative with the police. Dr. Chow was called and Ms. Moore met with Dr. Chow. Ms. Moore was not formed. No charges laid.

July 9, 2014 the police were dispatched to Lampman Crescent. Ms. Moore stated that Mr. Kiska made threats towards her. The police found no grounds of threats. Ms. Moore had taken Mr. Kiska's purse and refused to return it. The police attended the bank with Ms. Moore who retrieved the purse from the safety deposit box and returned it to Mr. Kiska commenting that he took hers earlier. No charges laid.

July 9, 2014 the police were called by Ms. Moore to attend Tim Horton's. Ms. Moore feared for her safety and the children's while in the care of Mr. Kiska. No charges laid. Ms. Moore was not apprehended under the MHA. She wanted to attend the Civic Hospital. Mr. Kiska would be bringing the children to their maternal grandparents for a few days.

May 5, 2015, Mr. Kiska reported a kayak stolen from his dock.

May 26, 2015, Ms. Moore reported her laptop stolen from her workplace.

June 14, 2015, (may be a mistake and should be October 14, 2015) Police contacted Mr. Kiska as lead investigator related to Partner Assault. File. There was no further action in this file at this time. Ms. Moore had been admitted to the hospital voluntarily and diagnosed with schizoaffective disorder. Support services were provided to Mr. Kiska.

October 9, 2015; Mr. Kiska complainant regarding Ms. Moore taking the children without his consent or knowledge. The report indicates that Ms. Moore took approximately \$10, 000 from the bank account on October 8, 2015 and has a lawyer do a power of attorney naming an old boyfriend from 15 years ago as her power of attorney. The children's passports, pillows and small amount of clothing were also taken.

Ms. Moore was located by the police and it was deemed after speaking with her that she was in no danger to herself or the children. The money was money transferred to a credit card and not cash. The police were in contact with Ms. Moore, Mr. Kiska and the children. No charges were laid.

October 10, 2015, Ms. Moore attended the police detachment to register criminal charges harassment charges against Mr. Kiska. Her children were with her. It was determined that the children were in good health, didn't appear to be fearful of their mother or the situation. The children were properly dressed and happily playing with their toy animals. Mr. Kiska was reassured that the children appeared fine. But because of the allegations of harassment, no other information could be provided. Ms. Moore returned to the detachment later. Ms. Moore shared that Sean wanted to speak with his father, so he contacted his father but she told Sean that he couldn't tell his father where he was. Sean was spoken to by the police and reassured. Sean stated that "he felt safe but would feel safer if he was at home with both his parents, in his own bed". Sean mentioned that his mother was talking to herself.

October 11, 2015, the police were called to Lampman Crescent. Ms. Moore had not slept in four days according to the father. She hugged her daughter hard to the point that her daughter stated that Ms. Moore was hurting her. The police spent a lot of time trying to negotiate a resolution. In the end, the parents chose status quo, with everyone staying home instead of attending thanksgiving supper at the paternal grandparents (both Mr. Kiska and Ms. Moore agreed that the supper was at Mr. Kiska's sister in law).

October 12, 2015 Mr. Kiska received a call from the hospital advising him that Ms. Moore had voluntarily admitted herself and would be there for 72 hours.

January 27, 2017, Ms. Moore attended the detachment to report fraud under \$2000 by Mr. Kiska. The suspicion did not meet the threshold of evidence required for a criminal investigation.

March 12, 2017 police were dispatched to Ms. Moore's residence, who complained that Mr. Kiska and a disgruntled roommate had deliberately turned off her furnace. No

charges were laid and a repair person indicated that there was no tampering to the furnace just lack of maintenance.

July 20, 2017, Police were dispatched to 7 Vanson Drive. Ms. Moore was going through some difficult time and wanted to talk, which appeared to be what she wanted. Ms. Moore had been drinking as a means of coping. The police listened and left after a while. There was no reason to apprehend.

September 23, 2017, Ms. Moore contacted the police to provide them with information regarding Mr. Kiska and his activities such as hacking her electronics, placing a tin in the backyard, provoking her dog, picking her lock, and more. Ms. Moore had no evidence to provide and support her claims.

October 5, 2017, Ms. Moore called the police to report suspicious circumstances, such as Mr. Kiska entering her residence.

October 6, 2017, Ms. Moore dropped off what she believed to be evidence supporting her claims regarding Mr. Kiska. There is no evidence of a criminal offence.

October 7, 2017, Ms. Moore called the police regarding pop up messages and other issues that Ms. Moore reports involve Mr. Kiska.

October 9, 2017, Ms. Moore contacted the police to add information to a previous report. Ms. Moore also attended the detachment. Ms. Moore provided two binders. The constable wrote that all appears to be speculation and reading into events that take place. Her history shows that she suffers from schizophrenia. The constable believed there to be an underlying mental health issues and not a partner related incident.

October 11, 2017, Police attended Ms. Moore's residence, as the report will be considered final unless there is new leads. No safety concerns regarding the children at this time. Ms. Moore is open to seeing her psychiatrist.

October 29, 2017, Ms. Moore contacted the police regarding Mr. Kiska attempting to make her look crazy. She claims that Mr. Kiska is cyber stalking her, that he switched her account, and that there was a surveillance van parked outside, all in order to get custody of their children.

December 5, 2017, Ms. Moore contacted the detachment to share information regarding her electronics and Mr. Kiska hacking or getting someone to hack her electronics. Later

on this same day, Ms. Moore reported her two front tires had been deflated and she suspected that Mr. Kiska is responsible.

December 10, 2017, the police were called to Best Buy, as Ms. Moore was asked to leave the store and refused. This incident was regarding Ms. Moore wanting to return a laptop with the wrong receipt. Ms. Moore refused to leave or follow the police's directions, as such she was arrested for trespassing and resist. Her daughter was present for the argument and was crying. She was picked up by Mr. Kiska prior to the police arriving.

December 10, 2017, Ms. Moore contacted the detachment to clarify information, as she was afraid her husband would call and make a story about her making her look bad.

The Children's Aid Society of Ottawa provided information regarding their involvement with the family.

In March 2013 the school reported that Ms. Moore had attended the school to pick up the children and the school staff were concerned that Ms. Moore was presenting with mental health issues. During the investigation, Ms. Moore was taken to the hospital and formed for 72 hours. She received a potential diagnosis of Bipolar Disorder. On April 6, 2013, Ms. Moore was admitted to the hospital and remained until May 30, 2013 on the psychiatric unit. Ms. Moore had taken the children without proper clothing for the weather and refused to return to the family home. She was diagnosed with atypical bipolar disorder. The doctor at the time reported that there were no concerns for Ms. Moore or for her children. Mr. Kiska was acting protectively for his children. The file remained open on an ongoing basis until October 2013. The parents were accessing supports and resources.

On July 3, 2014, the Society received a report that Ms. Moore was brought to a local hospital and presenting with unstable mental health. The Society contacted Mr. Kiska who shared that he understands Ms. Moore's mental health cycles and that at no time would he allow his children to be in an unsafe situation. An investigation was not pursued.

On July 9, 2014, the Society received a call from Ms. Moore informing that she was fearful for her life and the life of the children. The police were also on the line and advised the Society that Ms. Moore wold be brought to the hospital for an assessment. Mr. Kiska was contacted and advised the Society that Ms. Moore had been released from the hospital on July 3. Ms. Moore did not return home and the police received a missing person report file by Mr. Kiska. Ms. Moore was located by the police and

presented as well and not formable. After a number of calls to the police, it was arranged for Ms. Moore to meet with her family physician. However, Ms. Moore was formed by the Ottawa Police before she could meet with her physician. Mr. Kiska was protective of the children and continued to ensure that the children were never left alone with Ms. Moore.

On October 9, 2015 the Society received a report from the Ottawa Police advising that Ms. Moore taken the children and their belongings, including their passport and \$10,000 and left without telling anyone. The police were aware of Ms. Moore's mental health problems and added that they formed her on four occasions between March 2013 and July 2014. Ms. Moore was located and returned home October 11, 2015. She was subsequently formed, although she was in agreement to stay in the hospital for treatment. The Society investigated and the children shared that they were frightened. They were unharmed. Mr. Kiska shared that he was concerned that Ms. Moore was not accepting her diagnosis of Bipolar Disorder and that she wasn't compliant with her medications. Ms. Moore was subsequently released and remained in the family residence but in the basement, as she and Mr. Kiska were in the process of divorcing. Ms. Moore advised that she was aware of "red flags" and would know when she needed to seek professional help. The Society verified that the children were being impacted by Ms. Moore's mental health, but the file was closed, as Ms. Moore was taking her medication and participating in out-patient psychiatry.

November 2016, the Society received a report from a community professional that Ms. Moore reported that Mr. Kiska was engaging in controlling behavior towards her and had also sexually assaulted her when the children were present in the home. Ms. Moore was concerned that Mr. Kiska was making deliberate attempts to undermine her mental health. The Society completed their investigation and did not find that Ms. Moore's mental health was impacting the children, rather it was noted that she appeared to be stable and her doctor has written a letter to that effect. The children reported some arguing between their parents, but did not describe being impacted by the arguments. The file was closed February 2017.

May 2017, received a request for legal disclosure.

September 2017, Ms. Moore contacted the Society to request support regarding issues related to Mr. Kiska and him "trashing her reputation".

October 19, 2017 the Society was contacted as Ms. Moore attended a local hospital with her children at 05:00, and had been formed, as she presented as psychotic and paranoid. Ms. Moore did not want the children to be returned to Mr. Kiska. Her plan was

to go to a local shelter with the children. The Society contacted Mr. Kiska who attended the hospital to pick up the children. The Society requested that Mr. Kiska contact them should Ms. Moore try to get the children back prior to being assessed to make sure that she is well enough to care for them. Mr. Kiska agreed.

Ms. Moore has a diagnosis of Bipolar Affective Disorder Type 1 and it is noted that she does have paranoia that usually revolves around Mr. Kiska. It was also noted that there is ongoing contentious custody dispute between Ms. Moore and Mr. Kiska, with allegations made by each on a regular basis. The children did not disclosure any safety concerns when in their mother's care, and Ms. Moore was in agreement to contact Mr. Kiska to come and pick up the children when needed. The file was closed January 2018.

Sir Winston Churchill School provided the children's academic information.

Sean is presently in grade 6, in French immersion. According to the report card, Sean has many strengths and abilities. He is noted to have some difficulty with organizational skills, and he is "not able to work without supervision or follow direct instructions during independent work periods." His grades vary between B+ and C-. He was absent for 5 days and late for 13. In grade 5, Sean was late 8 times and absent for 7 days. His grades ranged between A- and C. Although there are positive comments, much of the teacher's commentary is to encourage Sean with his organizational skills, maintain on task, completing work, etc. In grade four, the comments are positive and somewhat contrary to the comments for grade five. He was late for 7 days and absent for half a day. His grades range between A and B-. The comments in Grade 3 are positive with 4 late days and 2 absent days. His grade range between A and B. In grade two Sean was late for 3 days and absent for 6. The teacher has made many positive comments and has added that at times Sean needs to focus and remain on task. IN grade one, Sean was late for 4 days and absent for 14 days. His grade varied between A and B- with positive comments.

With regards to Cate, she is grade 5 in French immersion at the same school as her brother. She was late for 16 days and absent for 2.5 days. Her grade range between B+ and C. Although Cate appears to have some challenges, her teacher has positioned the comments in a positive way. In grade 4 Cate missed 1.5 days and was late for 9 days. Her grades ranged between B+ and C. The comments are positive even though Cate has some challenges. In grade 3, Cate missed 1.5 days and was late for 7. Her grades range between A and C+. The comments are positive even though Cate has some challenges. Grade 2 and 1 are similar with positive comments and no outstanding lates or absences.

Court File No.: F C-15-2446-0000

ONTARIO SUPERIOR COURT OF JUSTICE, FAMILY COURT

BETWEEN:

JONATHAN WILLIAM KISKA APPLICANT

-and-

DEIRDRE ANN MOORE RESPONDENT

AFFIDAVIT AND REPORT OF THE CHILDREN'S LAWYER

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