

Errors, Omissions & Malicious Obfuscation Analysis (EO & MO)

RE: ECMCC's 20250325 BH-Treatment Plan

by Brenna Fox

PART I

I, Dorenda Moore, refute ECMCC's 20250325 BH-Treatment Plan ("Plan") with the following evidence-laden errors ("E"), omissions ("O") and malicious obfuscation ("MO"). Statements that are true or false have also been identified with a T or F, respectively. The Plan's statements have been numbered and stored in my 20250331 Court Submission at pages 1.003-1.009, *Dorenda Moore*

I BH Treatment Plan

A Individual Crisis Prevention Plan

1 = MO Dorenda Moore ("Moore") began to realize that her husband, John Kiska ("Kiska") cared not about her and their children ("Sean & Kate") by January 2013. Massive arguments about lifestyle choices and estate planning differences ensued throughout February; Moore experienced her first bout of Abuse-induced Defensive Dysregulation ("ADD") on 20130228 and she has been attempting to divorce Kiska ever since. According to Canadian, American and European social workers, counsellors and/or psychologists, Kiska's machinations are identical to those of a:

- a) covert, malignant narcissist,
- b) high-functioning sociopath and/or
- c) individual with severe "Cluster B" personality disorders

The threats that Moore has endured for the past 12 years include, but are not limited to, " [being framed] for the murder of her children " as noted by Erie County Medical Center Corporation ("ECMCC") Not-A-Physician Brenna Fox ("NAP Fox") on page 1 at statement 1 of her Plan.

2=E Once in a hospital environment, Moore does not experience fear because, among other reasons, one cannot be framed for much when in a locked-down facility. Frustration, however, is typically expressed:

- a) casually, at first, to multiple staff members²;
- b) formally, if required, via written, evidence-supported correspondence³
- c) if "news worthy", in a letter to her Power of Attorney ("POA") and publisher of choice⁴.

3=F As detailed to ECMCC Occupational Therapist ("OT") Katie and accompanying Brenna [Not-Fox] on 20250326 at ~09:45, Moore developed a personal, multi-step process to "relax in crisis" (that is, an Anxiety-Disseminating, Action-focused Preservation Technique ("ADAPT")), while attending an inpatient Occupational Therapy program at The Ottawa Hospital ("TOH") in 2015. ADAPT utilizes CNS depressants as a tool of last resort⁵.

4=F As clearly explained to the Kaleida healthcare facility ("Kaleida") and ECMCC staff, if the "crisis" involved any concern regarding ^{Moore's} "mental capacity" then the POA (documented in ^{Moore's} Canadian passport, published on Moore's corporate website⁶ and contained in her confiscated-by-ECMCC property) was to be contacted immediately.

5=T Moore will no longer consent to any injection since learning more about those which were mandated in haste throughout the world in 2021 ~~without~~ fully-informed consent even being possible. Accordingly, only drugs that can be ingested are acceptable.

6=T As a sociable introvert, when incompetence, negligence and/or criminality clearly re-surfaces — even if no "situational crisis" is the provoked response — Moore usually self-secludes.

B RN/MO Treatment Plan

7-EO
7-MO Following:

- a) 15 days of nothing-but-excusas from the Canada Revenue Agency ("CRA") regarding the direct deposit of Moore's \$50,000 in tax refunds/return of funds⁷,
- b) ongoing inaction of Ottawa's Family Court clerks regarding continued access to:
 - i/ File number FC-15-002446⁸ and
 - ii/ File number FC-19-CP0000089,
- c) continued incompetence, negligence and/or criminality of Ottawa-based social services¹⁰ with respect to the temporary financial support upon which Moore has been dependent because Kiska has:
 - i/ paid zero in legislated spousal support since February 2023¹¹ &
 - ii/ paid zero in legislated occupational rent since December 2016¹²
- d) zero assistance from Buffalo's "emergency services" (due to Moore's lack of "illegal immigrant status" (13) or its Cornerstone shelter for women,
Moore decided to take precautionary measures by requesting U.S. prescription for Ativan (prn) from Katerda in case anxiety began to manifest.¹⁵

B=MO The 20250320-20250331 (12, 12 days and counting) hospitalization could have been avoided if the Katerda and/or ECMCC-positioned, so-called healthcare providers prescribed the Ativan (prn) as requested and contacted CRA with Moore to advocate on her behalf given the obvious financial urgency.¹⁶

- 9-EO
MO As a follower of Christ with rock-solid conviction, "suicidal ideation" is not likely to occur:
- a) Chapter 8 Verse 32 of both Saint Matthew and Saint Luke are very clear about that which causes so-called "suicide"¹⁷
 - b) Saint Mark's 8:32^{sealed} may expectations for purification from/of sin — which has been severely ill-defined and
 - c) Saint John's 8:32 provides reassurance that has proven to be true.

It goes without saying that Moore has never experienced "homocidal ideation" and NAP Fox's choice of vocabulary is borderline libel.

ENDNOTES

- 1 See Moore's 2019 Mail Campaign article "Fear vs. Paranoia", her response to Maclean Magazine's Anne Kingston's article "We are the dead" which exposed, among other things, how many sociopaths murder their spouses and/or children — whether suspicions about their true nature, have emerged or not.
- 2 See Moore's 20250320 to 20250330 journal upon request.
- 3 See samples of Moore's frustrations at her 20250331 court submission (pages 1.002, 2.001-3.006, 14.001-14.002, 15.001-15.002 and 16.001-16.010)
- 4 See 20250326 letter to Dr. Jack White at CS1 pages 1.001-1.019.
- 5 Ideally, 2-3 ounces of a high-quality tequila (such as Hornitos Gold or Black) or gin (such as that produced by Ontario's Lannan Distillers (any grade)) would be available as a central nervous system (CNS) depressant because — in Moore's experience — it is more effective, less addictive with fewer potential "adverse reactions" (i.e. states of disease) than any prescribed drug. Ativan, however, has worked as a temporary substitution in the past.
- 6 As of 20250320, one of SAQOTU Inc.'s websites — www.twb.rocks — has been removed from public view due to the 20250320 missed payment of \$57.01.
- 7 See sample of CRA documentation at CS1 pages 1.016-1.019, evidence of Moore's 20250308 - 20250319 efforts in her Kalendar/Emcee-confiscated property and/or, when viewable, SAQOTU Inc.'s March 2025 Archives stored at www.twb.rocks/archives
- 8 That is, the 10-year, 12-volume, evidence-laden "impossible-to-divorce" file that incriminates not only Kiska, but his legal team at Bell Baker & numerous Superior Court of Ontario judges and more.
- 9 That is, the iron-clad, rock-solid evidence that Ottawa's — and, arguably, Toronto's — legal-judicial services systematically circumvent Canada's *federal Divorce Act* ("DA") which has federal paramountcy over Ontario's *provincial Child, Youth and Family Services Act* ("CYFSA"). As explained to Kalendar/Emcee-positioned individuals over and over, this violation of the Doctrine of Federal Paramountcy is illegal. In other words, the jurisdiction for determining the "custody" and "access" of Sean & Cate was *not* provincial.

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ENDNOTES continued

- 10 As of 2025.03.19, Moore's monthly temporary financial support had not yet been confirmed: evidence of their "Tormant Via Inaction" ("TVI") - arguably, the crime "Mischief" as defined in section 430 of Canada's Criminal Code ("CC") - and more - is linked to the March 2025 Archives section at www.twb.rocks.
- 11 Fraudulently obtained to amount to merely \$1,230/month, Kiska has chosen to pay zero and permit Ontario taxpayers to cover Moore's food and rent: court-enabled taxpayer fraud is so rampant in Canada, it inspired a series called "Unbridled Power & Insatiable Greed".
- 12 The matrimonial home in which Kiska continues to reside could not at least \$5,000/month in rental income. As codified in Canada's DA, Moore has been entitled to receive half of "that" amount from Kiska each month since her third and final departure by December 2016:

$$1+96+3 \times 2,500 = 299,000$$

$$\text{ERROR: } (1 + (8 \times 12) + (3 \times 12)) \times \$2,500 = (1 + 96 + 36) \times \$2,500 = \$332,500$$
Among other things, Kiska is a fraudster and a thief; however, as far as Moore is aware, she remains co-owner of her 5-bedroom home on the water from which she has been "illegally banned" by Kiska's accomplices (see pages 1.010 - 1.015).
- 13 Evidence of Moore's recent attempts for "emergency financial assistance" are in her E&MCC-confiscated property.
- 14 Moore has an unfilled Canadian pen prescription for serena; however, she currently has no means to have it filled in the United States.
- 15 As noted at paragraph 5 on page 5.002 of this EO & MO, Moore's participation in TDH's program enabled her to recognize the manner in which fear/anxiety manifested in her.
- 16 Moore has not used a cell phone (other than to receive a text from CRA) since August 2024.
- 17 To comprehend the etymology of the term "suicide", start with the Greek word for "pig". (EOW) and then consider Matthew & Luke Chapter 9 Verse 32.)

with love from

www.twb.rocks



Errors, Omissions & Malicious Obfuscation Analysis (EO & MO)

r2

re: ECMCC's 20250325 BH-Treatment Plan

signed by Brenna Fox & Michael Gruppenberger

Part II

I, Deidre Moore, refute ECMCC's 20250325 BH-Treatment Plan ("Plan") with the following evidence-laden errors ("E"), omissions ("O") and malicious obfuscation ("MO") analysis. Statements that are true or false have also been identified with a "T" or "F", respectively. The Plan's statements have been numbered and stored in my 20250331 Court Submission at pages 1.003-1.009.

n/a? Not Applicable. n/i? Not Interested.

Filed in Moore by 20250402

I BH-Treatment Plan (continued.)

C BH Problem #1: Psychotic Symptoms

10 = F Deidre Moore, ("Moore") is not harmless: she is abusive/ass. This fact is well-explained in the Plan EO & MO Part I of her 2025031 Court Submission ("CS1") at Endnotes 12 and 11 of page 5.005.¹⁸

Moore does not display any symptoms of paranoia: paranoid individuals do not post their picture and personal information online as she does.¹⁹ Formerly a professional speaker and writer²⁰, there is nothing "hyperverbal" or "rambling" about her speech. Not-A-Physician ("NAP") Brenna Fox ("Fox") seems simply incapable of comprehending Moore's vocabulary and/or is envious of Moore's breadth and depth of knowledge.

C.1 Long-term Goals: April 7, 2025

11 = n/a Moore has not exhibited any "psychotic behaviours"; NAP Fox's testimony is pure fiction. Noteworthy is the fact that NAP Fox is impersonating an Attending Physician in ECMCC medical files and, now, in its ~~and~~ its lawyers' (that is, Magister Magareen Grimm LLP ("MMG LLP") legal files as well. Not only is NAP Fox ~~not~~ an Attending Physician as claimed on her Plan ~~(see CS1 page 10.001)~~ (see CS1 pages 4.001 and 4.007) and her Treatment Over Objection Evaluation²¹ (see CS1 page 10.001), she is not even a Resident Physician. She is merely a Nurse Practitioner who presents as someone with a severe Cluster B personality disorder.²²

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I BH-Treatment Plan (continued)

C.1 Long-term Goals: April 7, 2025 (continued)

12. n/a Moore has not experienced any hallucinations or delusions; this statement is mostly another piece of NAFox fiction. Furthermore, it appears that NAFox is not aware of the definition of delusional in the Diagnostic Statistical Manual ("DSM-5") which defines delusional as: "[...] the maintenance of false beliefs when shown evidence to the contrary." As NAFox has refused to acknowledge Moore's former confiscated documentation/evidence, let alone refute it, the facts effectively rendered any legitimate opinion of Moore's beliefs impossible.

Given the fact that NAFox's tendency to reach goals [11] - [12], is April 7, 2025, she also seems to have trouble comprehending "long-term."

C.2 Short-term Goals: March 31, 2025

13. n/a "Ultimately, the deadline for NAFox's intention to "drug out of Moore" her demonstrable creativity²² will have expired before this matter is heard.
14. n/a This libelous statement was already addressed at paragraph 12.
15. n/a Ecom staff such as NAFox, "Cheryl Nurse" Balth²³ and Unit Manager (Kambir) do not appear capable of engaging in reality-based conversations.
16. n/a Again, hallucinations are part of NAFox's fiction; this [allegation] was already addressed in this EO 4 MO at paragraphs 12 and 14.
17. F As noted at paragraph 12 above, NAFox has not met the DSM-5 criteria for labeling Moore as "delusional"; and, unless NAFox's proposed drug combinations involve a state of fear, Moore will have no reason to submit to NAFox's coercion/abuse/abuse attempts, as NAFox's false allegations of Moore's experiencing paranoid-based thoughts and actions were already addressed in this EO 4 MO at paragraph 10, sentence 2.
19. n/a In addition to fictional and libelous, NAFox's entire "BH Problem #1 - Short-term Goal" section is now... state-dated.

I BH-Treatment Plan (continued)

0.3 RN/MD Interventions

- 20=n/a Moore already verbalizes "thoughts and feelings" (see journal notes upon request) as well as the fact that ECMCC's Bone 6-2 is guilty of committing, at a minimum, insurance-company and taxpayer fraud as evidenced throughout this submission and CS1.
- 21=n/a Moore's schedule leaves little room for entertaining NAFPO et al.
- 22=n/a Moore has zero interest in attending ECMCC's groups unless they would like her to deliver seminars on "Understanding Predators", "Gaslighting", "Government Corruption", "Organized Crime", "Taxpayer Fraud", etc.
- 23=MO If and when ECMCC offers a group that discusses that which was formerly labelled "Brief Psychotic Disorder with marked stressors" — a mental state that can be provoked with severe domestic violence — Moore would gladly participate and contribute.
- 24=n/c Moore objects to ECMCC's proposed drug combinations with grounds including, but not limited to:
- a) zero diagnostic process^{*}
 - b) zero evidence of symptoms alleged,
 - c) zero information^{*} regarding drug efficacy and
 - d) zero information regarding change in respiratory once drugs are combined;
- 25-27
=n/a Moore sleeps exceptionally well; and, with a very clear conscience.

* that is, legitimate process or useful information.

(to be continued)

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18.003 7/8/12

ENDNOTES

- 18 NAP Fox even acknowledged Moore's home ownership in her Plan (see CS2 at page 17.003 statement 45).
- 19 See, for example, her Twitter profile @CaeJax at www.x.com or her "Homemade Dark Comedy" (re. #twibRocks #KaraokeCover) posted on her YouTube account @sagotu2097.
- 20 Moore's 30-year career is summarized in the résumé which was confiscated by ECMCC and has been published at www.twib.rocks since 2019/2020.
- 21 Pathological lying is a top characteristic of sociopathy.
- 22 As evidenced in Moore's detailed journal notes — and could be proven upon review of ECMCC surveillance video — NAP Fox dictated her scathing 20250329 Treatment Over Objection Evaluation ("TOOE") approximately 22 hours before their first (and only), 30-minute, 20250325 11:30 "clinical interview" (see timestamp of NAP Fox's self-incriminating TOOE in CS1 at page 10.001).
- 23 See CS1 pages 16.001-16.010; and, multiple references in 20250323-20250401 journal notes upon request.
- 24 Ditto for "Marilyn" who has been allegedly ^{been} replacing Karen Kimble who has allegedly been on some indeterminate-duration vacation since I arrived (see unanswered correspondence at CS1 pages 1.002 and 3.001-006; and, journal note 20250401 1-2/5 & CS2 page 21.001).
- 25 Is it possible that ECMCC's Zone 5-2 is using such heavy patient coercion/extortion to produce "trial results" desired by the drug manufacturers? Noteworthy: three of the six drugs being pushed by NAP Fox are Johnson & Johnsons.

Errors, Omissions & Malicious Obfuscation Analysis (EO & MO)

re: ECMCC's 20250325 BH-Treatment Plan
signed by Brenna Fox and Michael Guppenberger

PART III

I, Deirdre Moore, refute ECMCC's 20250325 BH-Treatment Plan ("Plan") with the following evidence-laden errors ("E"), omissions ("O") and malicious obfuscation ("MO") analysis. Statements that are true or false have also been identified with a "T" or "F", respectively. The Plan's statements have been numbered and stored in my 20250331 Court Submission #1 at pages 1.003-1.009.

n/a? Not Applicable ~~is~~ n/c? Not interested

Deirdre Moore by 20250420

I BH-Treatment Plan (continued)

▷ BH Problem #2: Acute Manic Symptoms

28 = F There is nothing "hyperverbal", "elevated" or "grandiose" about Moore's speech. As already noted at page 18.001, #10 of her Court Submission #2 ("CS2"), Brenna Fox ("Fox") may simply be envious of her linguistic skills and/or role as an independent journalist and/or trail-blazer.

D.1 Long-term Goals: April 7, 2025

29 = MO Moore does not "intrude" upon anything other than a group of nurses yakking in a hallway when she asks them to perform some assigned/duty/mental task that she is prevented from doing herself.

30 = MO Again, this libellous statement suggests Moore has some chronic illness — of which ECMCC has presented zero evidence — that requires symptom management. It also boldly implies that Moore uses illegal substances!

31 = MO Moore's "mood" has been stable since she arrived 20250320; namely, disgust in the degree of incompetence, negligence and criminality at ECMCC.

32 = F Again, Moore's alleged bi-polar disorder is merely ECMCC's fiction so they can commit, among other things, insurance-company fraud. ²⁶

²⁶ Although, as Moore intentionally allowed her healthcare insurance to lapse, ^{10/12}

I BH-Treatment Plan (continued)

D.2 Short-term Goals: March 31, 2025

33=n/a Moore would be happy to share her 8-step program, ADAPT® (as noted at CS1 page 5.002 #3), with Zone 5-2 staff, notwithstanding that any suggestion Moore has "explosive episodes" is simply more of Brenna Fox's fiction and libel.

34-37 = F Moore has not exhibited any symptoms of mania or anxiety: ECMCC has simply created a fictional version of Moore to "pad the file" while committing "Medicaid Fraud" (or equivalent) — except, Moore permitted her health insurance to lapse in 2022. Ergo, ECMCC's bills will remain unpaid.

38-43 = n/a Since illegally obtaining their Treatment Over Objection order on 20250402, none of 38-43 has occurred. These six statements must be part of ECMCC's BH-Treatment Plan template that is used for each new arrival.

44=n/a Having zero health issues and taking zero medications, Moore must have presented as an ideal 60 year-old, female research/trial subject (see NY's SPARCS program at CS3 page 30. E12).

II Social Work/Discharge Planning

45-54 = EO 4 MO

This entire section has ignored Moore's testimony and evidence entirely. Moore was simply in Buffalo on a working holiday as she:

- a) launched her company's Investigative Journalism contest (see CS3 36.001),
- b) awaited a large deposit from the Canada Revenue Agency (see partial evidence at CS1 pages 1.016-1.019),
- c) continued to publish materials relating to her scandalous 12-years-and-counting divorce (see damages permitted at www.CanLii.org "Kiska v. Moore, 2017 ONSC 6872") and
- d) access the spousal support and occupational rent that's been denied by her fraudster husband since 2016.

The section does acknowledge her permanent address (1244 Lampman Crescent, Ottawa, Ontario K2C 1P8) at paragraph 45 while stating she is "homeless" at paragraph 10. ECMCC's Zone 5-2 is wilfully blind to severe domestic violence?

II Social Work/Discharge Planning (continued)

55-56
= F Moore is not covered by any health insurance plan. ECMCC's Zone 5-2 is emotionally, psychologically, physically and financially abusing Moore ... for free (ie. for sport).

57
= ? No one can explain what a score of "4" means, if anything.

58
= ? Moore does not live here and does not intend to live here: she .. was .. a .. tourist!

A.1 Problem #1: Psychosis

59-60
= F Moore ^{merely} ~~more~~ voiced her interest in obtaining a U.S. version of her Canadian prescription ~~for Ativan~~ and why. As of 20250420, no one can describe a single delusional thought that Moore is alleged to have had.

61=MO Moore already can identify the pre-cursors to a psychotic break and knows how to manage it (as already described in CSI page 5.002 #3 re ADAPT®). Again, this statement must be Zone-5-2; standard, template rhetoric with zero foundation (ie. "padding the file" to commit insurance-company/medicaid fraud).

62-63
= ? At time of writing, 20250420 07:23, none of these things — other than invitation to "group" — has occurred.

A.2 Problem #2: Substance Use

64-71
= F A lack of access to her own funds was literally rendered substance abuse impossible. Again, there is zero evidence that Moore has any addiction issues: the statement is pure fiction.

III Recreational Therapy

72=? Interestingly, the technique that Moore ~~uses~~ first to dissipate anxiety is ... absent — as are all of the signatures that are supposed to be on the following page.

What. A. Racket.

12/12