

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)

D BH Problem #2: Acute Manic Symptoms

28 = F There is nothing "hypervocal", "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, she'll be able to obtain a copy of ECMCC's outrageous, scandalous bill. 57.001

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 30.012).

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:

- launched her company's Investigative Journalism contest (see CS3 36.001),
- awaited a large deposit from the Canada Revenue Agency (see partial evidence at CS1 pages 1.016-1.019),
- 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
- 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? Is **that** an understatement.

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 ~~more~~^{merely} 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 has 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.