



IN THE CENTRAL CRIMINAL COURT

Mrs Justice McGowan

REGINA

-V-

Jonty Bravery

SENTENCE

1. On 4th August 2019 you went to the 10th floor of the Tate Modern. Once there, you went to the viewing platform, looked around and spotted the victim and his family. You went towards them took hold of M and threw him over the railing. He fell 100' and suffered catastrophic injuries. The fear he must have experienced and the horror that his parents felt are beyond imagination.
2. You had intended to kill someone that day. You almost killed that 6 year old boy. On 6th December 2019 you pleaded guilty to an offence of attempted murder. We know a lot about what you were thinking from what you had researched on the internet, what you had previously said, your query of a member of the public about the whereabouts

of a tall building and what you have said since the incident to those investigating this offence and those considering your detention and treatment.

3. You searched the internet on the day and the previous day for information about killing people and what effect autism would have on sentencing. You had also carried out similar searches over many months before. You investigated different methods of murder.
4. The injuries you caused are horrific. That little boy has suffered permanent and life changing injuries. He has made some progress, more than originally predicted but his life will never be the same. He will be 100% care dependant for an unpredictable time, at the very least for the next year. I have heard the statements from his parents about the devastating impact on the whole family. They have spoken with great dignity about their bewilderment and horror, and their suffering. They have been forced to leave their home and jobs as their son is being cared for in a hospital too far away from their home. They have given up their lives to care for their son.
5. Dealing with the expert evidence about you, I have reports from four experts. I bear in mind all that I have read and heard about your childhood, your condition and the prognosis for your future. At today's date I have to assume that your condition will remain stable, although, as you age you may mature.
 - a. Dr. Cummings, who dealt with the fact that you are fit to plead and that you understand what you did and its consequences.
 - b. Dr. Dow is the treating clinician. She gives evidence that a place is available under maximum security conditions in Broadmoor Hospital. She says you have an autism spectrum disorder and a personality disorder, the relationship between these two diagnoses is complex and there is overlap. Those conditions alone do not explain your offending and your general behaviour. She says that the risk you present is grave and immediate. She advocates the making of a hospital order, with an order restricting your release. She recommends that course because therapeutic measures are available in hospital and, in her view, detention will not provide the best environment for any prospect of rehabilitation that there might be in your case. She says that the treatment available would be individually tailored in Broadmoor but would be more general in custody. She fears that someone with your complex needs would not

fare well in custody. You are vulnerable. You are still only 18 and there is still the potential for further development and that could be prevented or restricted by detention in prison. Her initial view that you would not cooperate has altered because you have demonstrated a greater willingness to engage with the clinical team. She commends very strongly the need for consistency in care and the team that provides that care. She has described how the pattern of care and control at Broadmoor can be modified immediately as a response to your behaviour. The level of care required would not be available in custody, even if you were in a specialist unit. In addition, she fears that you would be likely to manipulate the system if detained in custody with the prospect of being transferred. Autism spectrum disorder cannot be treated but Broadmoor would be better able to “educate” you to be better able to manage your personality disorder, in particular those aspects of your disorder which means you have little or no control over your violent behaviour as a reaction. She recognises the realistic possibility that you could remain in hospital for ever without any, or any meaningful, progression. If a hospital order was made and you refused to engage, it would be open to you to apply for release on the basis that no treatment was available. Dr Dow testifies that release would not automatically follow from that because a broader treatment regime would always be available and therefore you would not succeed in such an application. That refusal to engage could be manifest in annual applications to the tribunal for release. Her opinion is that a hospital order with restrictions would provide public protection as you could not be released without the approval of a tribunal taking into account the views of the Secretary of State. In her view it is “hard to envisage” that you would ever get beyond the stage of medium security.

- c. Dr Murray, who supports the conclusions that Dr Dow reached and provides the second opinion that would be required for the making of an order under the Mental Health Act.
- d. Dr. Blackwood describes the autism spectrum disorder and your personality disorder as overlapping but severable. The presence of an autism spectrum disorder does not explain the offending. The considered violence in this offence tends to suggest psychopathy. He accepts that treatment in Broadmoor

could reduce your propensity to reactive violence but would not affect the tendency to considered violence such as shown in this offence. His view is that Broadmoor cannot offer more than a special unit in prison. If he is wrong and Broadmoor could offer more, then the treating clinician would seek a transfer to hospital under s.47 with restrictions under s.49. He recommends detention for the better protection of the public because it will also provide clinical flexibility for your treatment and rehabilitation. In other words, whilst the prison system can provide therapeutic provision it also has the flexibility of returning you to maximum security conditions in hospital if necessary. He agrees that there may be some hope for the future. In terms of public protection, the possibility of release is a vital consideration. If serving an indeterminate sentence, you could apply to the Parole Board for release but if you were in hospital under s.47 and s.49 you would also have to apply to the tribunal. He agrees that consistency is good for you but your ability to manipulate is known and any institution would guard against that. He testifies that prison does not mean any lack of consistency. You would not be able to make annual applications, a process which he fears might undermine the effectiveness of any long-term therapy in hospital. An individual programme will be developed for you once admitted to custody, based, in large measure on what has been done already at Broadmoor. Dr Dow describes “a therapeutically optimistic moment”. Dr Blackwood says that there is not one key moment.

6. Both Doctors recognise that you present a grave and immediate danger to the public. Each has given detailed and well-argued reasons for the difference between them as to the best course. Detention or a hospital order. Dr Dow makes the point that the regime in Broadmoor is better able to deal with the complex mix of problems from which you suffer. Dr Blackwood gave evidence that if an order is made for detention, therapy and medical care would be available and that the ability to move you back to hospital if necessary for treatment gives those responsible for your care greater flexibility. Given the likelihood that you will spend the greater part, if not all your life detained, that flexibility is a very important consideration. He emphasises that that is not a process by which you would move often and easily from one institution to another.
7. Having heard the expert opinions in this case, I must decide. Rehabilitation is a very important part of the sentencing process, so also is the protection of the public and the

punishment of offenders. You are very young and I must consider with particular care whether there are realistic prospects of rehabilitation that would be greatly enhanced or diminished by following a particular course. I am afraid that the prospects of rehabilitation are not high in this case, whichever of the two alternatives I follow. That being so public protection and the requirement for punishment play a greater part in the process that might be so if there was a better prospect of rehabilitation.

8. In my view detention is the appropriate course in this case. That is to reflect the need to protect the public, to mark the terrible thing you have done with a penal sanction and, in so far as is possible, to offer support for any prospect of rehabilitation, if such a prospect is ever viable. The next question is to decide what type of sentence.
9. I will explain the way in which I have arrived at the appropriate sentence in this case. I will do it in a little detail because this is such an exceptional case and quite rightly, the public interest is very great.
10. The first consideration is, whether you are dangerous within the statutory definition. All the Doctors agree that you are dangerous and I have no doubt that they are right. What you did on the day of this offence, the way in which you have behaved before and since the offence prove that you are and will remain a grave danger to the public. One of the primary purposes of sentencing is the protection of the public and in this case that must be a priority. The only sentence I can impose is detention for life.
11. The next step is to fix the minimum term. That is the term you must serve before you will even be considered for release. You may never be released.
12. I must decide what the determinate term would be for an adult who had contested the trial and been found guilty, I take that as a guide. Sentences are constructed in a series of steps, although this is an exceptional case, I must follow those steps and apply the relevant guidelines.
13. I must apply the guideline for offences of attempted murder. That requires an assessment of the harm caused, first to the child himself. In this case that falls at the very worst level, little short of fatal. You thought out how best to kill someone. You considered different methods of killing and likely sentences. You choose a small child because of his vulnerability. The impact of his injuries is catastrophic and life altering. The effect on his family; both of the trauma on the day and the burden of his

continuing incapacity and suffering, are also at the top of the range. This is a level 2 offence. So that the public understand why, level 1 is reserved for offences such as where there is an attempt to kill with a gun or to kill many people or by someone who has killed in the past. In level 2 the range is 15-25 years, I must go beyond the top of that range to mark the devastating consequences on the boy and his family, his vulnerability and your culpability. Both Doctors used the word “callous”. You planned this, you worked out which buildings you might try, based on height and cost of admission and you appear to have revelled in the notoriety. I recognise the effect of your condition and your personality disorder but notwithstanding that, your culpability is high. In the case of an adult the determinate sentence would be in the order of 30 years after trial.

14. You have accepted responsibility and pleaded guilty. That must be acknowledged by the full amount of credit and that would reduce that term to 20 years in the case of an adult
15. You were only 17 at the time of offence, and are still only 18. Notwithstanding the fact that you were 18 by the date of conviction, I have considered the guideline for sentencing young persons and children. You have a very serious mental disorder and a personality disorder and your age and immaturity must also be reflected. You have no previous convictions but there are many examples of behaviour that is criminal, anti-social and potentially very dangerous, both to yourself and others.
16. Those would be the steps in reaching a determinate sentence. They only provide a framework. This is an exceptional case and I am not bound by that guide. Where there is good reason, as in this case, I am obliged to depart from that guide. The danger you present to the public is marked by the indeterminate nature of the sentence. I must also fix the minimum term. I have considered carefully how that should reflect the appalling facts of this exceptional case as previously outlined. This is not a strict arithmetical exercise. I must look at all the circumstances and reflect the seriousness of the case as a whole.
17. Balancing all those factors I set the minimum term at 15 years.
18. I cannot emphasise too clearly that this is not a 15 year sentence. The sentence is detention for life. The minimum term is 15 years. Your release cannot be considered before then, you may never be released.

19. I wish to express my thanks to counsel, all the experts, in which group I include Mr Charles de Lacy at this court and to all the court staff and the Prison Escort staff who have made all the difficult and special arrangements necessary to hear this case now.