



Courts and Tribunals Judiciary

R

-v-

MICHAEL HARKIN

Bristol Crown Court
Sentencing Remarks of The Hon. Mr Justice Bryan
11 October 2024

1. Michael Harkin, you have been tried before me and a jury on a three count indictment, Count 1 a count of murder that on 5 June 2023 you murdered Daniel Childs (a fellow inmate at HMP Prison Bristol and your cell mate on the night of 4-5 June 2023 who you strangled overnight with a co-axial cable), Count 2 a count of wounding with intent in relation to Shane Joyce (a fellow prisoner in HMP Bristol who you slashed with an improvised weapon shortly after departing your cell where Mr Childs lay dead on the top bunk) and Count 3 a count of attempted wounding with intent in relation to Jake Owen (a prison officer who sought to intervene in your attack on Shayne Joyce).
2. There was no dispute at trial that you intended to cause Daniel Childs at least really serious harm when you strangled him and as such were guilty of his murder unless you were able to rely upon:
 - (1) A defence of insanity, a complete defence to criminal responsibility, or
 - (2) A partial defence of diminished responsibility which would result in a verdict of not guilty, but guilty of manslaughter by reason of insanity.
3. The total defence of insanity was also potentially available to Count 2 (wounding with intent) in relation to which it was not in dispute that you wounded Shayne Joyce and intended to cause him really serious injury), and Count 3 (attempted wounding of Jake Owen), in relation to which it was in issue whether you attempted to wound Jake Owen with intent.
4. The jury heard evidence from three eminent forensic psychiatrists, Dr Sandford and Dr Khisty on behalf of the defence, and Dr Jayawickrama on behalf of the prosecution. They all agreed that at the time in question you were suffering from a severe psychotic mental illness in the form of schizophrenia / schizoaffective disorder and that the partial defence of diminished responsibility was available to you (the requisite elements for such a partial defence being made out), the only issue between them being whether you knew that what you did was legally wrong for the purpose of the insanity defence.
5. In the light of their written and oral evidence and the evidence heard in the trial as a whole, the prosecution reviewed the evidence and consulted with and provided advice to the CPS, the Police and the bereaved family of Mr Childs, and advised that it would not be appropriate to seek to pursue a murder verdict and that the prosecution should accept that the overall evidence (including the psychiatric evidence) established that the defence of

diminished responsibility had been made out to the requisite standard of proof, advice that was accepted. Accordingly, and as the jury were directed in consequence, the available verdicts on Count 1 were either “not guilty, but guilty of manslaughter by reason of diminished responsibility” or “not guilty by reason of insanity”; the available verdicts on Count 2 were “not guilty by reason of insanity” or “guilty”; and the available verdicts on Count 3 were “not guilty”, “not guilty by reason of insanity” or “guilty”.

6. On Count 1, the jury returned a verdict of not guilty but guilty of manslaughter by reason of diminished responsibility, on Count 2 a verdict of guilty, and on Count 3 a verdict of not guilty. Accordingly, the jury were not satisfied, on the balance of probabilities, that you did not know that what you were doing was legally wrong, thereby rejecting the verdict of not guilty due to insanity.
7. I must now sentence you in relation to Counts 1 and 2, in the light of the verdicts returned by the jury, set against the backdrop that you remain profoundly mentally unwell, and have been detained in, and remain detained in, Broadmoor Hospital, where it is common ground you will need to remain for treatment for the foreseeable future. Your treating consultant forensic psychiatrist in Broadmoor, Dr Payne, from whom I have heard oral evidence today, cannot foresee a time when it would be appropriate or safe for you to be returned to the prison system.
8. Turning to the circumstances of your offending. On 25 May 2023 you were released from HMP Erlestoke on licence from a custodial sentence you had been serving there. You had in fact initially refused to leave your cell as you did not want to leave prison and you barricaded yourself into your cell and threatened staff with makeshift weapons. Fortunately, no one was injured, and it proved possible to de-escalate the situation, and you were duly released. At some point during this incident, you had made a threat to kill people if you were returned to HMP Erlestoke, and you said that you had no intention of complying with your licence conditions.
9. You were released on licence and taken to the train station and you made your way to Bristol. On arrival, you went to your sister’s flat, and left with her a large number of books that you had had with you in prison, as well as a very considerable amount of collage type artwork and a large makeshift black wooden cross all of which had been made by you during your time in HMP Erlestoke. It is clear that in your deluded state you considered that such artwork, which had been formed from putting together extracts from books including the Bible and works by Shakespeare, contained special messages to you and was of very high value, whereas, in reality, it was of no value to anyone other than yourself. Such items included a wooden stick with a brown stain at one end, which you considered to be a magical wand blessed with your own blood and which had attached to it artwork in the form of maps of the Bay of St Michael (one of your delusional beliefs being that you were St. Michael).
10. You made your way to the hostel in Bristol, but within 24 hours you were recalled to prison for breach of your licence conditions. As you were in Bristol you were taken to HMP Bristol on 27 June 2023 to continue to serve your sentence. You refused a medical screening on arrival, and were not referred to mental health services or the prison GP prior to the subject matter of Counts 1 and 2.

11. At the end of May 2023 Shayne Joyce (the complainant in Count 2) had been in Cell 7 on the Fourth Floor Landing of G Wing for about a month. He had redecorated the cell and made it his own. On 31 May 2023 you were to be “2-padded” in his cell, i.e., you joined him in his cell as his cell mate. You objected strongly to this, shouting, “You ain’t padding me up, I can’t get padded up”, but in the absence of any perceived reason why it was considered that you should be single celled, you were placed in the cell. Shayne Joyce endured only one night with you in the cell that he had made his own over the previous month. He expressed the perceptive view the next day that he needed to get away from you “cause you ain’t right in the head”. Despite an incident involving him flushing the toilet in the night, there is nothing to suggest that you bore him any animosity. So keen was he to get away from you that he abandoned the cell he had redecorated, and moved to another cell.
12. Mr Joyce was replaced in the cell by Daniel Childs. Soon after he joined you in your cell he was to tell another inmate, that he was in fear of you, that you had made death threats to him, and that you had said to him that if he was to fall asleep you would kill him. The inmate was to say that it appeared like Daniel hadn’t slept for days. Daniel was to say to another inmate, “My cell mate won’t let me sleep, he tells me if I go to sleep he’ll suffocate me”.
13. You and Mr Childs were locked up in Cell 7 on the night of Sunday 4 June 2023 into Monday 5 June 2023. At some point you killed him by strangling him with the co-axial cord from the cell TV. It appears from the pathology evidence that you may have strangled him whilst he was asleep as there is no physical evidence of a struggle. It appears you then “tucked him up” in his sheets on the top bunk.
14. When the cell was opened in the morning you walked out of the cell as if nothing had happened, and CCTV on the landing captures you walking around the landing and interacting with others, no one being aware that Mr Childs was lying dead in his cell. You returned a vape to Mr Joyce in his new cell, and there was no suggestion of any animosity towards him. However it is clear from CCTV footage that you were watching Mr Joyce’s movements, and the shower block on the Fourth Landing.
15. Mr Joyce went into the showers and began showering facing away from the shower doors. Whilst he was showering, naked, and covered in shampoo and soap, you entered the showers and attacked him from behind with an improvised weapon consisting of two prison issue razor blades, tied together with some prison bedding to form a handle. You slashed him repeatedly with the weapon, resulting in deep cuts to his left shoulder and neck, that have resulted in permanent scarring. He thought he was going to die, as well he might if others had not intervened, and he had bled out.
16. His screams were heard by another prisoner who tried to fend you off with a long-handled mop. The screams also drew the attention of Prison Officer Jake Owen who entered the shower. Following his arrival you dropped the blade. After that you were unnaturally calm, and Prison Officer Owen was able to return you to your cell without protest, where you were locked in with the body of Mr Childs.

17. As a consequence of your attack on Mr Joyce, prison staff became concerned to establish the whereabouts and well-being of Mr Childs who had not attended his job in the workshop. Officers attended your cell. You were to tell one officer that Mr Childs was “fine, he’s sleeping”, and, when asked by another officer where Mr Childs was, you had pointed to the top bunk, implying that he was just up there, and that nothing was wrong.
18. Sadly, when officers entered the cell, it was clear that Mr Childs was dead, and had been dead for some time, being cold to the touch. A paramedic and doctor attended but it was clear that there was no possibility of his revival.
19. You were transferred to the segregation unit during which time you remained calm and compliant throughout. Thereafter you were transferred to a police station where you were found to be unfit to be interviewed. Subsequently you were on remand in HMP Long Lorton, before being transferred to Broadmoor Hospital for treatment in circumstances in which you remained very psychologically unwell. Following treatment with injectable anti-psychotic medication your condition stabilised such that you were found fit to plead and stand trial. You remain, however, profoundly unwell.
20. In due course you were seen by the consultant psychiatrists Dr Sandford, Dr Jackawickrama and Dr Khisty, and they considered your accounts, your medical records and the factual evidence that was before the jury.
21. It is clear that you had been becoming increasingly unwell over a period of time – perhaps for as long as 10 years. In the 18 months or so before the current events took place, you had been a serving prisoner at HMP Earlstoke. You were to tell your treating psychiatrist, Dr Payne, that you now recognised, following treatment, that you had become increasingly unwell whilst in HMP Earlstoke.
22. You had developed strange thoughts, in particular in relation to religion. These included “florid” deluded beliefs, such as hearing voices from birds and other animals, thinking you were variously Saint Michael, Jesus / Saviour of the World, the King of Norway and a witchdoctor, thinking the sun was turning black, thinking the sun and moon were communicating with you, thinking you “walked with the Holy Spirit” and that the “Holy Spirit was being beamed down from the sun” on to you. The initials “PPK” were important to you – short for Prothesis Prophet and King – as you believed you were all of these things. The phrase “Sabreenika Awandia” was also important to you – meaning “of no King or Queen”. You started manically collecting and reading books including the Bible and Shakespeare’s works and you took extracts from your books and put them together to form what you thought were hidden messages to you. As already mentioned, you made strange artwork that you thought was worth a lot of money and had a piece of wood you thought was a “magic wand” which you had blessed with your own blood.
23. It appears that none of these things were particularly picked up or noted by the prison authorities whilst you were serving your sentence at HMP Earlstoke, nor did knowledge of them accompany you to HMP Bristol.

24. In terms of why you killed Mr Childs, it appears that Mr Childs had the misfortune to have “child” in his name and this led you to the delusional belief that he was a paedophile, which was completely, and absolutely, untrue and had no basis in fact whatsoever. Your delusional belief is apparent from what you told Dr Khisty:

“Mr Harkin believed that the deceased victim, Daniel Childs, “was a paedophile” or that “he killed a little girl.” Mr Harkin said, “I was to save the soul...the little girl’s soul...by getting it back...because he had it.” He added, “the voices in my head were telling me...the birds and the books.” He said he was “thinking” then “hearing” or perhaps “hearing and thinking or hearing what I was thinking.” Mr Harkin said, “I was untouchable...St Michael and then it would change...I would be a witchdoctor”, but after harming Daniel Childs, Mr Harkin said, “I thought I had saved the soul...but the sky never turned black”.

25. As for Mr Joyce, it appears that his misfortune was to have “Joy” in his name, you having noted scratched graffiti in your cell bearing his name. As you were to say to Dr Sandford, you could not remember why you attacked Mr Joyce. You said that when you moved into the cell it had “Joy written all over it” and said, “there was joy everywhere and I thought that by killing him it would bring joy into the world”. You struggled to explain the logic of your thinking at this time. You said, “I’m not too sure, I really don’t know, it just happened”.
26. Neither Mr Childs nor Mr Joyce had done anything to offend you, and you took away Mr Childs’ life, and inflicted serious injuries upon Mr Joyce, for no rational reason at all. Your actions have had a devastating effect upon the family of Mr Childs, and have resulted in Mr Joyce suffering ongoing psychological harm.
27. No one can but be moved by the victim impact statements of Daniel Childs’ mother and sister, or by the dignified way in which they have attended throughout this trial. They speak of how Daniel Childs was a kind and caring, happy go lucky guy who would do anything for his sister and her daughters, and his death has changed all their lives forever. A mother has lost her son, a sister her brother and young nieces their uncle. There was no reason – still less any justification – for your actions, and they will have to live for the rest of their lives with the consequences of your actions.
28. As is clear from his victim impact statement, Shane Joyce has struggled with his mental health as a result of your actions. He has flashbacks to events and how close he came to death, not only in the shower room but also sharing a cell with you. He has daily panic attacks, and he has felt suicidal thoughts. Apart from the mental scars, he has also been left with physical scars to his neck and shoulder, which are a permanent reminder of events to him.
29. The events that occurred are an appalling tragedy, and no sentence that can be passed can ever undo the harm that you have caused.
30. You have a significant number of previous convictions over many years including thirteen offences against the person, a history of assaults on emergency workers and numerous

public order offences, numerous thefts and offences against property and a number of court related offences. I have no doubt that you were at the time of the offences, and remain, highly dangerous for the purpose of the relevant legislation, and by reason of your psychosis as a result of your schizophrenia you are a serious danger to the public.

31. Having heard the medical evidence that has been given in court by Dr Sandford, Dr Jayawickrama and Dr Khisty, the addendum report of Dr Jayawickrama, the written report of Dr Payne, and the oral evidence of Dr Payne at this sentencing hearing, all of whom are approved by the Secretary of State under section 12(2) of the Mental Health Act 1983, I am satisfied that you are suffering from a mental disorder, namely schizophrenia.
32. For reasons that I will explain in more detail, I consider that the appropriate way of dealing with your case is the imposition of a Hospital Order under section 37 of the Mental Health Act 1983, together with the additional imposition of a restriction order under section 41 of that Act. Your disorder is of a nature which makes it appropriate for you to be detained in a hospital for medical treatment. Section 37 and 41 orders are the recommendation of the psychiatrists who have considered disposal, namely Dr Sandford, Dr Jayawickrama and Dr Payne, and are the orders urged upon me by both the prosecution and the defence, it being common ground that a custodial sentence would be inappropriate. In coming to my conclusions, I have considered whether a so-called hybrid order under section 45A would be appropriate, but concluded for the reasons identified below, that it would not.
33. On the evidence before me, I am satisfied that there is a significant risk to members of the public of serious harm occasioned by the commission of further offences if your psychosis is not appropriately treated. The reduction in the risk to the public posed by you is dependent upon your response to psychiatric and psychological treatment and associated medication. It is not known at this stage how complete that response will be or how complete your recovery will be, with a risk of relapses and remissions (as identified by Dr Jayawickrama). Dr Payne identifies that you will require continuing treatment with anti-psychotic medication to treat your schizophrenia. There is no evidence before me to suggest that, save for your medical condition, you would be a danger to the public. Your risk to others is driven by your schizophrenia and associated psychotic illness, and such risk is best managed by forensic psychiatric specialists in the years ahead. If you are detained in this way you will remain in a secure hospital for many years, potentially indefinitely.
34. Accordingly, taking account of all the circumstances of your case, including the nature of the offences and the verdicts of the jury, your character and antecedents, your serious and continuing mental illness, and associated psychiatric evidence before me from four eminent psychiatrists, and having considered all the other ways in which I might deal with you, I am satisfied that the most suitable method of dealing with your case is by making an order under section 37 of the Mental Health Act 1983.
35. Having considered the report of Dr Sandford, the addendum report of Dr Jayawickrama, the report of Dr Payne and Dr Payne's oral evidence before me today, I also consider, having regard to such evidence, the nature of the serious offences you have committed, your antecedents, and the risk of you committing further offences if set at large due to your

mental health difficulties, that it is necessary for the protection of the public from serious harm from you, for you also to be the subject of a section 41 restriction.

36. As I have said, in coming to this conclusion, I have considered whether a section 45A hybrid order might be appropriate, but I am in no doubt whatsoever that it would not. I do not consider that the facts justify a penal element, and I am in agreement with the prosecution that a custodial sentence would be inappropriate. Mental illness was the driver for your actions and your degree of retained responsibility was, I am satisfied, low. Whilst it is recognised that previous drug induced psychoses may make a person more disposed to developing a psychotic disorder, no one is suggesting that the psychosis from which you suffer was either drug induced, or the result of drug withdrawal. Your treating consultant forensic psychiatrist in Broadmoor, Dr Payne, also cannot foresee a time when it would be appropriate or safe for you to be returned to the prison system, whilst Dr Jayawickrama is of the opinion that a transfer to prison would be likely to destabilise your mental disorder and escalate the risks you present.
37. I have also considered the comparative release regimes, should you ever be released into the community. In my judgment a hybrid sentence would not be desirable or appropriate in the present case. My preferred disposal will enable you to be treated. It will also provide the best protection of others and be potentially life long. The regime for deciding release is stringent. The nature of supervision after release from a section 41 restriction order involves ongoing expert psychiatric input and a rapid recall to hospital is available if your medical condition deteriorates and you relapse. I therefore make an order that you will be detained at Broadmoor Hospital. I am satisfied, on the evidence before me, that appropriate treatment and a bed are available at Broadmoor.
38. Accordingly, the sentence I impose on you in relation to each of Counts 1 and 2 is that you be detained in hospital without limitation of time pursuant to section 37 of the Mental Health Act 1983, and I make a Restriction Order pursuant to section 41 of that Act. The victim surcharge is imposed in the appropriate sum.