



R v Oyekan

### Sentencing remarks

Jason Thompson was “a massive, truly massive West Ham supporter”, he was the glue in his family, a light that has been extinguished. I have had the benefit and privilege of reading a number of statements from his family Veronica Thompson, Kariba Rhooms and Lianne Audain and I have heard from Barbara Thompson reading her statement. They collectively speak warmly of the affection and love that they had for their son, brother, uncle and cousin. Jason was a man who had the ability to enrich the life of anyone who he came into contact with, he was one of a kind. He bought joy and happiness anywhere he was.

He could make his family members belly and cheeks hurt from laughing so much. He was a bright soul whose laughter filled a room with warmth and whose kindness touched everyone he met. His family feel his loss and his absence, as they put it “the empty chair in the dining room and the phone that does not ring”.

No sentence that I impose today will feel sufficient to his family who have lost such a special man.

Jason Thompson was killed on the 11<sup>th</sup> July 2023 by his step-son Adejuwan Oyekan. Mr Oyekan was 30 years of age at the time he stabbed his step-father to death. He is now 32 years of age. He is a business man educated to university level. He has two sons. He has a very limited history of mental health difficulties. He suffered from depression in 2015 but he has no inpatient history or history of behaviour causing significant concern. He was not prescribed any anti-psychotic medication at the time of the killing.

I have read a number of letters from family and friends and from those who have worked with you during your time in custody. They speak consistently of a warm

loving caring person. A man with an infectious and buoyant personality, a kind empathetic and respectful man with a strength of character.

Mr Oyekan, you have written me a letter. You are clearly an articulate and intelligent man. You have used your time in custody in a positive way and you appear to be working hard to address your mental health whilst in hospital.

I have also considered what you and your family wrote about Mr Thompson. He was a part of their lives for over 20 years and they too feel his loss in a profound way.

I have read both counsel's helpful written submissions.

Mr Oyekan, you have a limited criminal history. You have a conviction for driving with excess alcohol. In 2018 and 2022 you were convicted of possession with intent to supply drugs. Your last conviction, related to events in 2019 when you were dealing drugs at a music festival and you resisted the search of vehicle which resulted in a suspended sentence being imposed. That order was for 24 months imprisonment to be suspended for 24 months on conditions that you undertook unpaid work and rehabilitation activity requirements.

I do not know how much of that order was undertaken. This offence of manslaughter was committed during the currency of that order. It is plainly a more serious offence than possession with intent to supply class A drugs, that would normally necessitate the activation of the whole term of imprisonment. However it would be unjust for me to activate that sentence today because of the circumstances of the commission of this offence. I bear in mind that the community requirements have now expired. I cannot activate the order or add to the hours so I impose a fine of £500 on each offence concurrently so £500 in total. I set a period in default of payment of one day and I say that due to your time in custody that payment is made by your time served.

Mr Oyekan you pleaded guilty to the offence of manslaughter by reason of diminished responsibility on the 24<sup>th</sup> February 2025. I accept that was the earliest opportunity for you to do so as your plea was contingent on the Prosecution properly considering the report of Dr Alexis Acosta- Armas dated 27<sup>th</sup> November 2023 and commissioning their report from Dr Blackwood dated 28<sup>th</sup> January 2025. There was

some considerable delay in obtaining Dr Blackwood's report due to the waiting list for you to be moved from the prison to the hospital estate. I am sorry to everyone involved that it has taken well over a year for the reports in this case to be obtained.

I deal only briefly with the facts of this case as they have been set out in some detail by Miss Oakley.

On the 27<sup>th</sup> June 2023 you and your business partner went to Ibiza. You went there to meet with some business clients. Whilst there you consumed on your own admission cocaine and ecstasy. You may have taken other drugs. Your business partner Sam Webber described you as going on a four to five day binge. The consumption of these drugs seem to have triggered the psychotic episode that ultimately led to you killing Mr Thompson. I accept that by the time that you killed Mr Thompson those psychotropic drugs were no longer in your system and were no longer effecting you but they do appear to have been a considerable catalyst to your psychotic episode.

There is no doubt from what I have heard and read that you were suffering some symptoms of mental illness at the time you went to Ibiza. You were unnaturally suspicious of your friend and business partner and your company accountant. You were also experiencing some considerable stress arising out of a failure to charge VAT on some customer accounts when your company passed the VAT threshold before registration. The development of your mental illness has probably had a much longer genesis, you told the doctors that you had been suspicious and paranoid since your mid-20s and this appears to have been increasing in the three months before you went to Ibiza.

You rapidly became seriously unwell in Ibiza following your drug consumption. Your business partner saw a change in you. Your family who you were in contact with also became concerned at your behaviour. One of your sisters who visited you in Ibiza was also worried about how you were behaving. In the last few days when you were in Ibiza you started to give away valuable items of property (a Rolex watch and Louis Vuitton luggage) and some clothing. You were talking about people following you. You told your sister you had a passcode to tell everyone. You phoned your father asking him to pray with you on a number of occasions.

Your family were concerned for you and met you at the airport on the 10<sup>th</sup> July 2023. They took you back to the family home so they could keep an eye on you. Your behaviour that day continued to concern and in due course frighten them. A family friend, who was a psychiatric nurse, came to see you and said that if you didn't get any sleep your family should call an ambulance. Your family tried to get you help multiple times on that evening.

There came a point when your sister phoned 999 in order to try to get you assessed she told the operator she was worried that you were going to hurt someone. The ambulance service were not able to attend and you were encouraged to go to Accident and Emergency. You did not go. You said you wanted to sleep. You subsequently reported to doctors that you had not slept for the previous seven days.

Your paranoia continued to grow and you went to your room taking a large knife with you for what you said was your own protection. When family members went to check on you in the early hours of the morning of the 11<sup>th</sup> July 2023 you were in the grip of your psychotic episode. Your sister told the 999 operator you "had lost your mind" and you Mr Oyekan attacked Mr Thompson telling those near you at the time that you were "extinguishing the darkness" and you told the doctors that you believed the figure in the room was the devil. It is clear that you did not recognise your step-father with whom you enjoyed a good relationship. The attack on Jason Thompson was not motivated by any hostility towards him.

Such was the fervour of your psychotic episode that when the police attended and tasered you that had no effect on you and a firearms unit had to be called. Mr Metzger is right to draw attention to the difficult and dangerous circumstances they encountered when they arrived at the scene.

When you were arrested you could not believe what you had done expressing love for your father referring to Mr Thompson. You were unfit to be interviewed.

Your attack on Mr Thompson was frenzied and you were described by the police as seeming "possessed." I do not propose to repeat the detail of your attack but you caused him 44 knife wounds, the most serious to his neck and chest.

The unified view of all the psychiatrists who have provided me with reports (including your current responsible clinician) is that this cannot be said to be a wholly drug induced psychotic episode as by the time of your attack the illegal drugs were no longer in your system and they also point to the very long time it has taken for you to recover.

There are sentencing guidelines that provide a framework for my approach to sentence.

The first thing I must do is consider the level of your retained responsibility for your offence.

I am satisfied by the evidence of Dr Blackwood that your degree of retained responsibility for your actions was at the lower end of the spectrum. You retain some responsibility in that you were not insane at the time of the assault, and would have had an awareness of the potential dangers of your substance misuse.

However, there was substantial impairment of your ability to form a rational judgment and to exercise self-control, and the fatal assault would very likely not have occurred but for your psychotic symptoms and their emotional impact on you (such as fear and arousal). I accept Dr Blackwood's conclusion that the offending was largely attributable to your mental illness (when the same is conceived of as a constellation of abnormalities including your psychotic illness and your substance misuse). I note that Dr Acosta- Armas shares the opinion that your impairment was substantial as did Dr Dujic, your responsible clinician, in her evidence this morning.

Accordingly I place this case in the lower category. This has a starting point of 7 years with a range of 3 to 12 years imprisonment.

Whilst you voluntarily consumed drugs in the week before your attack on Mr Thompson you did not know that would cause you to become so catastrophically unwell, your previous drug use had not resulted in any known psychotic episode. At the time of your attack on Mr Thompson your mental illness had not been diagnosed and was untreated. In the immediate period before you attacked Mr Thompson your

family had been trying to get you help. Those factors enable me to take a starting point for your sentence of five years.

I turn next to factors that increase or reduce the seriousness.

I identify the following aggravating factors:

1. The use of a large knife
2. Mr Thompson experienced significant mental and physical suffering
3. Others were nearby at the time of your attack and could have been hurt
4. The offence was committed during the currency of a suspended sentence order.

I am not satisfied on the toxicological evidence that you were under the influence of illegal drugs at the time of the assault.

I identify the following mitigating factors:

1. You have no previous convictions for violence or weapons
2. You have expressed considerable and genuine remorse
3. There was no planning or premeditation to your attack.
4. You had a difficult time in childhood when your mother's partner was abusive to her and to you. You have supported your mother who also has mental health issues.

I consider the aggravating and the mitigating factors balance each other out.

I must next consider whether you are dangerous. There can be little doubt on the facts of this case that if your mental illness is untreated you pose a significant risk to members of the public of further specified offences.

You currently do not have insight into your mental illness. I note that both Dr Blackwood and Dr Dujic agree that without proper adherence to medication and psychiatric and psychological interventions you pose a considerable risk to members of the public.

This is not a case where the offence is such that a life sentence is necessary or justified. Your criminal record includes no history of violence or use of weapons. Your responsibility for your actions was significantly impaired.

I turn therefore to consider the mental health disposals. Dr Blackwood and Dr Dujic who are both s12 approved psychiatrists agree that you suffer from paranoid schizophrenia. Dr Dujic considers that schizoaffective disorder may form part of the diagnosis as there may be a mood component.

You are currently on medication and are receiving treatment which is managing your paranoid schizophrenia. There is a bed for you at Three Bridges Hospital.

In Dr Dujic's opinion although this is your first episode of psychotic illness the length of the episode in the absence of access to illicit substances indicates that it is highly likely that your illness is of a relapsing and remitting nature. It is currently of a nature and degree that makes it appropriate for you to be detained in hospital.

I bear in mind the authorities helpfully summarised in Miss Oakley's note of R v Vowles [2015] 2 Cr App R(S) 6 para 51-55 and R v Nelson [2020] EWCA Crim 1615

Dr Blackwood and Dr Dujic both are of the opinion that the correct disposal is a hospital order with restriction rather than what has been referred to in court as a hybrid order. I am not bound by their opinion.

I am however entirely satisfied that you need ongoing, probably lifelong, treatment. You are receiving both medication and psychological treatment. Without medication and an understanding of the importance of it you will rapidly become very unwell.

Your offending was substantially attributable to your mental disorder. You have no history of violence and you enjoyed a close relationship with your step-father. There was no history of animosity between you and no suggestion of any argument or ill will on the 11<sup>th</sup> July 2023. You have expressed considerable remorse at your actions that caused the loss of someone to whom you were very close. There is nothing to suggest that had you not been in a psychotic state you would have used any force on Mr Thompson.

In my judgement your mental illness effectively overwhelmed you. Absent any mental disorder the offence would never have been committed. In my judgement punishment is not required.

I have no doubt that the public will be best protected by you, Mr Oyekan, receiving hospital treatment and a regime on release that would lead to mental health professionals having oversight of you and being able to place conditions on you. I bear in mind the problems of returning someone to custody and the prevalence of illegal drugs in prison.

I bear in mind in particular Dr Dujic's evidence as to the different regimes on release "the regime of s37/41 is the better course as during his time in hospital risks are managed by regular reviews and there are steps to manage his release such as leave outside of hospital is managed. There is a very slow process of release into the community. With a prison sentence when the sentence comes to an end they are released and it is for the probation service to manage him. This can be a difficult time as at release there are risks and stress is part of the problem that could trigger psychotic symptoms. He needs intensive psychiatric support in the community. Release under s41 is overseen by Ministry of Justice. If there is deterioration it is assessed by mental health professionals and risks are well contained... Probation officers are not as well placed to notice subtle changes. If the illness returns and he is subject to s 41 he will be well treated and swiftly returned to hospital – possibly within hours."

I am satisfied that hospital order and restriction order are clearly the best way of managing your return to the community in due course if that is appropriate.

I am satisfied that the criteria to impose a hospital order are met. I am satisfied that there is a risk to the public that supports the necessity of the imposition of a restriction order.

I stand back and consider the disposal. If I were to impose a sentence of imprisonment and having applied a full discount for your guilty plea you would by now have served almost all of that custodial sentence. You are not currently well



enough to return to the prison estate. Any intended penal element therefore would be spent in a hospital environment. The regime on release, even with a licence period requiring supervision, would not be able to appropriately manage your mental health issues. You need, whenever and if ever you are safe to be released, supervision by those trained in managing mental health disorders.

As indicated I would give Mr Oyekan full credit for his plea.

Formally therefore: Having heard the medical evidence which has been given in court today by Dr. Dujic and having read the reports prepared by Dr Blackwood, Dr Acosta-Armas and Dr Dujic all of whom are approved by the Secretary of State under s.12(2) of the Mental Health Act 1983:

I am satisfied that you are suffering from a mental disorder, namely paranoid schizophrenia; this disorder is of a nature which makes it appropriate for you to be detained in a hospital for medical treatment; and appropriate medical treatment is available for you at Three Bridges Hospital.

I am of the opinion that because of all the circumstances of your case, including: the nature of the offence of manslaughter to which you have pleaded guilty; and your character and your past antecedents; and having considered all the other available ways in which I might deal with you, the most suitable method of dealing with your case is by making an order under s.37 of the Mental Health Act 1983.

I therefore make an order that you will be re-admitted to and detained and remain at Three Bridges Hospital.

I have also considered whether this order should be subject to special restrictions which are specified in s.41 of the Act. Having heard the evidence of Dr Dujic. I am satisfied that because of the nature of your offence and the work that needs to be undertaken to address your insight into your illness and to the risk that you will commit further offences if you are not detained, it is necessary to protect the public from serious harm and it is not possible to say for how long that will be so.

Accordingly, I order that you will be subject to the special restrictions set out in s.41 of the Mental Health Act 1983.

Putting it as simply as possible what this means for you Mr Oyekan is you will stay in a hospital. You will continue to receive treatment within a hospital setting while your illness makes it appropriate for you to be there and until your release presents no risk to your own health and safety and for the protection of others. If you are released, because it is not possible at present to say how long your treatment will take, you will continue to be monitored by mental health professionals.

Can I finally thank the family for their dignity in court through his hearing.

HHJ Alexia Durran

10<sup>th</sup> April 2025