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<i>Judgment: approved by the court for handing down (subject to editorial corrections)*</i>	ICOS No:	25/51609
	Delivered:	28/04/2026

**IN THE CROWN COURT IN NORTHERN IRELAND
SITTING AT LAGANSIDE COURTHOUSE**

THE KING

v

LLOYD LAVERY

**Mr K Mallon KC with Mr A Thompson (instructed by McCann & McCann Solicitors) for
the Applicant
Ms C McKay (instructed by the Public Prosecution Service) for the Crown**

SENTENCING REMARKS

HHJ LYNCH KC

Introduction

[1] The defendant stands to be sentenced on a total of 6 counts of indecent assault against four young girls in the time period 1974 to 1979 having been convicted after trial. The victims were all pupils at Richmond Lodge Grammar School where the accused was, at the time a history teacher.

Facts

[2] LD was aged about 13 at the time of the offences:

- (i) Counts 3 and 4 relate to two types of touching of a sexual nature, stroking her hair and running his finger up and down her back on a number of occasions.
- (ii) Count 5 relates to the defendant touching her armpit/breast and groin area two or three times on the pretence of showing her where bubonic plague affected the sufferers in medieval times. These assaults took place in a storeroom in the school. All touching in respect of these offences was over her clothing.

- (iii) Count 8 refers to victim NB, when the defendant touched her naked vagina under her clothing in the French stationery cupboard having effectively pursued her and manipulated her to that location so he could carry out the assault. This was in her second year at the school and therefore would also have been about 13 years of age.
- (iv) Count 9 concerns victim SR who was reading a notice board in the school corridor when the defendant grabbed her bottom and then just he moved on.
- (v) In count 11 the victim is CD when the defendant whilst they were in another storeroom in the school where he had induced her to go for a spurious reason and then touched her vagina under her clothing.

Background

[3] The defendant's DOB is 05/08/1948 and is, therefore, aged 77 at the time of sentencing. He appears to have had a normal and happy childhood and a successful academic career at school culminating in admission to Queen's where he studied modern history, graduating in 1974. He then secured employment at Victoria College and became head of department. It is in this period of his teaching career that he committed the present offences. In 1979, he was employed as a community education officer, then principal of Lurgan College before becoming deputy director of Upper Bann Institute. He took some time out to write a history book and then from 1998 until his retirement in 2017 was a political advisor in Stormont.

[4] He is a married man with two adult children and three grandchildren.

[5] The probation rapporteur places him in the low priority category for supervision and intervention, does not pose a serious risk of harm and low likelihood of general reoffending.

Defence

[6] The defence rely on a number of mitigating factors.

[7] The accused has no prior convictions of any relevance (two driving convictions -which have no impact on the present exercise.

[8] The passage of time that has elapsed since the offending and the exemplary way the accused has conducted himself during the previous 50 years or so.

[9] He currently presents as, in reality, as someone who poses no risk of reoffending in this, or indeed any other manner.

[10] I have received testimonials from David Campbell CBE and David Lavery CB.

[11] Mr Campbell has known him for some 30 years and speaks to his work when he, the defendant was employed at Stormont by several Ulster Unionist Assembly Members as a researcher, speechwriter and press officer and conducted himself in a diligent and professional manner.

[12] Mr Lavery is a cousin of the defendant's but got to know him professionally in his, Mr Lavery's capacity as a senior civil servant. He states:

My impression of Mr Lloyd-Lavery was principally formed when I got to know him when he was working at Stormont. By that time, he was a middle aged man in his late fifties and early sixties and was happily married with two adult children. I knew that he had a Christian faith and attended Lisburn Cathedral. He appeared to me to be a settled, family man who wanted to contribute to society through his work on behalf of a number of elected representatives. I know that he was well respected in these circles and was viewed as a person of sound judgement and good character."

[13] As does Mr Campbell he expresses concern for Mr Lloyd Lavery's current state of health and the consequences for him should he be incarcerated.

[14] The defence acknowledges the gravity of the offending and are heavily reliant upon the medical condition of the defendant go mitigate the sentence of imprisonment they accept is appropriate. To this end I have received a number of medical reports in respect of him.

[15] Dr Patel, Consultant Neurologist, examined the defendant on two occasions was asked a number of questions by the defendant's solicitor:

"Q. Does Mr Lavery have an increased risk of stroke?

A. Yes, Mr Lavery at the age of 77, with an average BP 164 +/- 20mmHg and BMI 28 has a 10-year stroke relative risk of 1.3 compared to same age, gender and ethnicity with BP 125 and normal BMI. This means that he naturally has a risk of 30% higher than a healthy individual (26.1% vs 33.7% risk of stroke)

With a blood pressure of 190mmHg +/- 20mmHg the risk increases to 38.3%, relative risk of 1.5 (50% higher than a healthy individual).

Q. Does Mr Lavery suffer from stress related hypertension?

A. No, he has essential hypertension since 1998, which at times due to compliance issues or may be acute stress (I cannot prove that based on medical records) has been difficult to control. He does not have “white coat syndrome” as his home BP recordings are also high. He says he heard about this case in around 2021/2022. His blood pressure recordings were high before this time despite trying different medications. Having said that, it was not over 180mmHg until after 2021. I can see from his readings that some months it is well controlled, and then in end of 2025 it became very difficult to control again but this was not all due to police interviews. The BP spikes were also related to GP and cardiology clinics. Therefore, I would accept that the stress in general is adding to his worsening blood pressure control.”

[16] He goes on to consider, in particular, the proposition that hypertension would or may potentially have serious consequences should the defendant be required to serve a sentence of imprisonment:

“The evidence provided in the letter by Dr Lavery tries to argue about hypertension in incarcerated individuals. The studies she quoted are American inmates, who are young. The studies are mixed and are updated from the 2009 study she has quoted. The 2023 study suggests no increases risk of hypertension in those who are non-Hispanic black or White. There is an increase in Asians. These people are a completely different population to Mr William Lavery and cannot be used to argue the case. They are otherwise healthy individuals who are young and inmates in the American prison over a period of time.

In Mr Lavery’s case, he has longstanding labile hypertension which has been difficult to manage. The relationship between incarceration and blood pressure is still being studied and debated, using young individual who were otherwise healthy, and the studies are only at an observation level. They do not explain if it is incarceration itself that causes this increased blood pressure, or if this was a genetic likelihood. This work

needs more research and I would refrain from using these studies to guide prognosis in such cases.

Q. Does the stress of the case increase his stroke risk?

I can accept that since 2021, his blood pressure has become very difficult to control. The cause of this can be debated still, although the stress he is under will have a significant impact.

The increase in blood pressure will increase his 10 year risk of stroke by 20% compared to his previous blood pressure values prior to 2021.

The difficulty to control the blood pressure may be partially due to the stress of the case and fear of suffering a stroke, being in prison, having to speak to police officers and other legal meetings."

[17] Dr Thomas, Cardiologist, provided a report dated 28 October 2025 in which he states:

"I examined Mr Lloyd-Lavery on 20th November 2025 in order to provide a cardiology opinion on this gentleman's ability to give evidence during court proceedings, specifically pertaining to his diagnosis of systemic hypertension.

(He) was first diagnosed with essential hypertension in January 19998. This had been managed in primary care until May 2022 when (he) was referred into secondary care with resistant hypertension and an ejection systolic murmur."

His conclusions are:

"Mr Lloyd Lavery has a long history of essential hypertension which has been difficult to control with medical therapy throughout this time. There is evidence of end-organ damage secondary to the hypertension given the evidence of left ventricular hypertrophy on echocardiogram, chronic kidney disease Stage 3... And an elevated albumin-creatinine ratio on urine testing. (he) has an elevated QRISK3 score however he does not have any high risk symptoms in his history with regard to

cardiovascular disease. A recent coronary angiogram has reassuringly shown normal coronary arteries.”

[18] The issue arises as to the extent to which, if any, the defendant’s medical condition and age should impinge upon the court’s approach to assessing the appropriate method of sentencing him.

[19] The defence acknowledge that the custody threshold has been passed and in my view no community based sentence would be appropriate since he has been assessed as unsuitable for community service and probation both seems unnecessary and downplays and fails to reflect the gravity of the offending.

[20] In essence the issue and what the defence hang their hat on is whether given his medical condition a prison sentence suspended would be justified.

[21] The approach the court should take in relation to the ill health of an defendant due to be sentenced was addressed in *R v Bernard* [1997] 1 Cr App R (S) 135, where the Court of Appeal allowed an appeal against a sentence for importation of cannabis, (27.7 kilogrammes) and reduced the sentence in length, in part because of the appellant's medical condition. He was 63 years old and suffered from a narrowing of his oesophagus, which caused difficulty in swallowing; hypertension; and diabetes which was not, and probably could not be, controlled in the prison environment. He was at particular risk of heart attack and stroke. The court reviewed earlier caselaw and drew from it the following four principles:

- (i) a medical condition which may at some unidentified future date affect either life expectancy or the prison authorities’ ability to treat a prisoner satisfactorily may call into operation the Home Secretary’s powers of release by reference to the Royal Prerogative of mercy or otherwise but is not a reason for this court to interfere with an otherwise appropriate sentence;
- (ii) the fact that an offender is HIV positive, or has a reduced life expectancy, is not generally a reason which should affect sentence;
- (iii) a serious medical condition, even when it is difficult to treat in prison, will not automatically entitle an offender to a lesser sentence than would otherwise be appropriate; and
- (iv) an offender’s serious medical condition may enable a court, as an act of mercy in the exceptional circumstances of a particular case, rather than by virtue of any general principle, to impose a lesser sentence than would otherwise be appropriate.

[22] The Guidelines in England and Wales state the following:

“The court can take account of physical disability or serious medical conditions by way of mitigation as a reason for reducing the length of sentence either on the ground of the greater impact which imprisonment will have on the offender or as a matter of general expressed mercy in the individual circumstances of the case.

However, such a condition, even when it is difficult to treat in prison, will not automatically entitle the offender to a lesser sentence than would otherwise be appropriate. There will always be a need to balance issues personal to the offender against the gravity of the offending (including harm done to the victim) and the public interest in imposing appropriate punishment for serious offending.

A terminal prognosis is not in itself a reason to reduce the sentence even further...”

[23] In the Court of Appeal in Northern Ireland the principles were reiterated by McCloskey LJ in *R v Connor* [2021] NICA 3. The facts (a serious terrorist case) are of little relevance:

“There is one particular issue of sentencing principle which arises in the present case. This court has recognised that in sentencing an offender it may be permissible in appropriate cases to have regard to any physical disability or illness which will subject the offender to an unusual degree of hardship in prison. It is timely to emphasise the precision and restraint with which this court formulated this, in *Attorney General’s Reference (No 1 of 2006) (McDonald and Others)* [2006] NICA 4 at [39]. First:

‘It is permissible to have regard to any physical disability or illness which will subject the offender to an unusual degree of hardship if he is imprisoned ...’

There is a second passage of substantial importance in *McDonald*. In the same paragraph this court endorsed without qualification the following statement of Rose LJ in *R v Wynne* [1994], unreported]:

‘It is always to be born in mind that a person who has committed a criminal offence,

especially one who has committed a serious criminal offence, cannot expect this or any other court automatically to show such sympathy so as to reduce, or to do away with altogether, a prison sentence purely on the basis of a medical reason. It is only in an exceptional case that an exceptional view can be taken of a sentence properly passed.”

[24] In other words there is a substantial threshold for the defence to overcome in advancing their proposition that the ill health of the defendant should be a basis for the court to take what would, otherwise, be an unusual step.

[25] The court has been concentrating on the personal circumstances and difficulties faced by Mr Lloyd Lavery but of course there are voices thus far silent that need to be heard – that of his victims. I have received victim impact statements from three of them CD, NB and LD.

[26] CD states that the assaults by the defendant changed her, she felt ashamed and for months thereafter she had sleeping problems culminating in her sleeping on a mattress on the floor of her parents’ bedroom and then being referred to a child psychologist. She did not make any disclosure to the psychologist.

[27] NB describes her abuse as a loss of innocence which will last her to the end of her days and destroyed her faith in teachers as honest mentors. She has a near perfect video recall of everything that happened to her. She describes the light going out on her schooldays exacerbated by the fact that she had another 12 months to endure with Lloyd Lavery still present whilst she did her best to minimise any possible contact with him. She has had to endure living through the trauma again by attending and giving evidence in the trial, exacerbated by her elderly mother having to be present and also give evidence.

[28] LD describes how the abuse traumatised her with the experience which she feels as if it was yesterday. She describes her feelings at the time in these terms:

“I can remember every minute of being in that room thinking of how I was going to get out of there safely. When was this ordeal going to be over? I was very innocent a naïve 13 year old and I was catatonic with fear when he touched me.”

and

“To be told that we were imagining it all and that it never happened was harrowing.”

[29] The aggravating features are:

- (i) The assaults were carried out by a man in his late twenties or early thirties on pubescent girls aged around 13, it need hardly be said against their will.
- (ii) This was a gross breach of trust. This was graphically expressed by the mother of NB who expressed it thus "But it's amazing the effect it still has on you and you feel so helpless. You send your child to school and think it'll be safe."
- (iii) Parents relinquish direct control of their children to strangers when they send them to school. They expect and are entitled to expect the highest standards of probity from the teachers in whom that control has been entrusted. By your actions you violated that trust in the grossest manner and the court cannot but take the most serious view of these offences.
- (iv) I find culpability to be high. Harm I assess as medium. Whilst not downplaying the effect the abuse has had on your victims I found them to be well adjusted women now, obviously of mature age. They are to be complimented on coming forward to expose a paedophile. It may be that Lloyd Lavery now constitutes no danger to children but it emphasises to child abusers, or those that may be tempted to abuse children that they will never be able to rest easy for their crime will or may catch up with them even decades after they were perpetrated. They will forever be looking over their shoulder in fear of that day of reckoning.
- (v) The number of victims.
- (vi) Whilst not an aggravating feature the defendant still denies the offences. This may be a defensive mechanism to try and avoid the shame of his behaviour and to maintain his dignity in the eyes of family and friends. On this I can only speculate.

[30] To the Probation Service rapporteur he explained the possible motivation for these ladies to make up these false allegations and I quote:

"... the only reason he could think of was when he left Richmond Lodge in May during the exam preparation. He was then asked how this could affect the junior students if he did not teach them. He stated that possibly some of their friends felt affected."

[31] The sheer absurdity of this proposition need hardly be expanded upon.

Mitigating features

[32] The mitigating features are:

- (i) The defendant's clear record which having attained the age of 77 without criminal conviction is in his favour.
- (ii) I accept that he poses little or no risk of reoffending in cases of this type.
- (iii) I have reviewed the authorities *supra* re the effect, if any, of his current medical conditions and have determined it does not put the defendant's case into an exceptional category. There is no reason to suppose that his health problems cannot be dealt with adequately in prison.
- (iv) Delay – Mr Mallon KC made the oral submission, this morning, that there has been undue delay in that complaints were made in 2019 and ABEs taken in early 2020 with the defendant being interviewed in 2022. For the purpose of Article 6 of the ECHR the “clock” starts running from the date of the defendant's interview. Since this point was not foreshadowed in the defence written submissions the Crown have not produced a timeline for the court to assess whether the delay is culpable or not. But I accept that the defendant's position has been materially affected from 2022 and whether or not it constitutes a breach of his human rights I regard it as a factor in assessing the appropriate sentence.

[33] The offences each carry a maximum of two years imprisonment, as the law stood at the time. Consideration must be given as to whether consecutive sentences would be appropriate. The factor I can take into account are the number of victims over a period of time whilst having regard to the totality principle see *R v Andrews* [2025] NICA 54.

[34] I have come to the view that consecutive sentences would be appropriate in this case but that the sentence of the court, given the factors I have set out, can be concurrent within the constraints of the sentencing regime at the time of the commission of the offences. I have taken into account the delay I have referred to in coming to this conclusion.

[35] I have taken into account all I have read about Mr Lloyd Lavery in the pre-sentence report, the two medical reports (and the summation) and the testimonies I have referred to, and the carefully crafted written and oral submissions from Mr Mallon KC.

[36] Although the offending events are factually distinguishable in terms of gravity I propose to impose one concurrent sentence to reflect all offences which is one of two years imprisonment on all counts to run concurrently.

[37] I have considered whether probation should be an element of the sentence (a Custody Probation Order) and have concluded that it would serve no useful purpose in this case.

[38] Sentencing is under the Criminal Justice (NI) Order 1996 (NI 24) Articles 18-28.

[39] I do not consider a Sexual Offences Prevention Order as necessary or proportionate.

[40] I advise the defendant that he may be put on the Children's barred list.

[41] For the reasons set out in my judgment, I deem it unnecessary to impose a disqualification from working with children order.

Offender levy