

ASCLD/LAB®
INSPECTION REPORT



SAN FRANCISCO POLICE DEPARTMENT
CRIMINALISTICS LABORATORY

Inspected: November 17-20, 2009

INTRODUCTION

This is the report of the ASCLD/LAB accreditation inspection of the San Francisco Police Department Criminalistics Laboratory which was conducted during the period of November 17-20, 2009.

The ASCLD/LAB inspection team consisted of the following members:

Robert Gonsowski, Staff Inspector, ASCLD/LAB, Herrin, IL
Chuck McClelland, North Carolina State Bureau of Investigation, Raleigh, N.C
Diane Tolliver, Indiana State Police, Indianapolis, IN
Jody Wolf, Phoenix Police Department, Phoenix, AZ
Peter Striupaitis, Northeastern Illinois Regional Crime Laboratory, Vernon Hills, IL
Mary Kate McGilvray, Massachusetts State Police (Retired), Bolton, MA

This report and the findings, observations, conclusions and recommendations are for pre-decisional purposes only. The inspection was performed using the principles, standards and criteria established in the 2008 version of the ASCLD/LAB Accreditation Manual and the 2009 version of the "FBI Quality Assurance Standards Audit for Forensic DNA Testing Laboratories."

LABORATORY OVERVIEW

The San Francisco Police Department Criminalistics Laboratory is a public laboratory which provides services primarily to the San Francisco Police Department. The laboratory is located at 850 Bryant Street, San Francisco, CA 94103 and is seeking renewal of its ASCLD/LAB accreditation. Laboratory Director James Mudge, reports to Captain Goldberg, Acting Director of the Forensic Services Division. The Laboratory provides services in the discipline of Controlled Substances, Biology, Trace Evidence (gunshot residue and impression evidence only), Firearms/Toolmarks and Questioned Documents. The Laboratory has a staff of nineteen (19) testifying analysts and three (3) support staff.

INSPECTION TEAM FINDINGS

The inspection team's scoring of each of the ASCLD/LAB Accreditation Standards and Evaluation Criteria from the 2008 Accreditation Manual follows. Each criterion for which the inspection team determined the laboratory to be in compliance is scored "Yes." Each criterion for which the inspection team found the laboratory to not be in total compliance is scored "No." Each criterion which is not applicable to the inspection of this laboratory is scored "N/A." The Summary portion of the report documents the basis for all non-compliance and all non-applicable findings of the Inspection Team.

STANDARDS AND CRITERIA

The laboratory should establish objectives which are relevant to the community that it serves and communicate them to all employees orally and in written form.

		Yes	No	N/A
1.1.1.1 (I)	Does the laboratory have a written statement of its objectives?	<u>✓</u>	___	___
1.1.1.2 (I)	Do the objectives appear to be relevant to the needs of the community serviced by the laboratory?	<u>✓</u>	___	___
1.1.1.3 (D)	Does the laboratory staff understand and support the objectives?	<u>✓</u>	___	___

A laboratory or its parent agency should have a formal written budget which is consistent with the forensic services provided by it.

1.1.2.1 (I)	Does the laboratory or its parent agency have a formal written budget?	<u>✓</u>	___	___
1.1.2.2 (I)	Is the budget adequate to meet the written objectives?	___	<u>✓</u>	___

Clearly written and well understood procedures must exist for handling and preserving the integrity of evidence; laboratory security; preparation, storage, security and disposition of case records and reports; control of materials and supplies; maintenance and calibration of equipment and instruments; and for operation of individual characteristic databases. Clearly written and well understood documentation or procedures should also exist for job requirements and descriptions; personnel evaluations and objectives; and for employee complaints concerning the quality system.

Does clearly written and well understood documentation or procedure exist for the following:

1.1.2.3 (E)	Handling and preserving the integrity of evidence?	<u>✓</u>	___	___
1.1.2.4 (E)	Laboratory security?	<u>✓</u>	___	___
1.1.2.5 (E)	Preparation, storage, security and disposition of case records and reports?	<u>✓</u>	___	___
1.1.2.6 (E)	Control of materials and supplies?	<u>✓</u>	___	___
1.1.2.7 (E)	Maintenance and calibration of equipment and instruments?	<u>✓</u>	___	___
1.1.2.8 (E)	Operation of individual characteristic databases?	<u>✓</u>	___	___
1.1.2.9 (D)	Job requirements and descriptions?	<u>✓</u>	___	___
1.1.2.10 (D)	Personnel evaluations and objectives?	___	<u>✓</u>	___
1.1.2.11 (D)	Employee complaints concerning the quality system?	<u>✓</u>	___	___

A laboratory should have a management information system which provides information which assists the laboratory in accomplishing its objectives.

	Yes	No	N/A
1.1.2.12 (I) Does the laboratory have and use a management information system?	<u>✓</u>	___	___

The laboratory manager should be able to relate the organizational structure to interacting variables such as those stated in the principle.

1.2.1.1 (D) Does the organizational structure group the work and personnel in a manner that allows for efficiency of operation, taking into account the interrelation of various forensic disciplines?	<u>✓</u>	___	___
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1.2.1.2 (D) Has the laboratory director considered and taken appropriate action to correct any discrepancies with regard to numbers of personnel when grouping work and resources?	<u>✓</u>	___	___
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The laboratory director should have authority commensurate with the assigned responsibilities.

1.2.2.1 (I) Is the laboratory director's authority well defined?	<u>✓</u>	___	___
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1.2.2.2 (I) Does the laboratory director have authority commensurate with responsibilities?	<u>✓</u>	___	___
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Delegation of authority within the laboratory should follow the organizational process outlined in the principle.

1.2.2.3 (I) Is there sufficient delegation of authority?	<u>✓</u>	___	___
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1.2.2.4 (I) Is authority of supervisors commensurate with their responsibilities?	<u>✓</u>	___	___
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1.2.2.5 (I) Is each subordinate accountable to one and only one immediate supervisor per function?	<u>✓</u>	___	___
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1.2.2.6 (I) Are performance expectations established and are they understood by laboratory personnel?	<u>✓</u>	___	___
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Constructive discussion should occur between supervisors and subordinates.

1.3.1.1 (D) Is there constructive discussion between supervisors and subordinates?	<u>✓</u>	___	___
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Supervisors should carefully and objectively review laboratory activities and personnel.

1.3.1.2 (I) Do supervisors carefully and objectively review laboratory activities and personnel?	<u>✓</u>	___	___
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Supervisory techniques should encourage creative thinking and objectivity and should recognize meritorious performance of subordinates.

	Yes	No	N/A
1.3.1.3 (D) Do the supervisory techniques encourage creative, objective thinking and recognize meritorious performance?	<u>✓</u>	<u> </u>	<u> </u>

Communication within the laboratory should exist for coordination of case work and to ensure wide dissemination of technical and operational information.

1.3.2.1 (D) Does an effective means of communication exist within the laboratory?	<u>✓</u>	<u> </u>	<u> </u>
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A training program to develop the technical skills of employees is essential in each applicable discipline and subdiscipline.

1.3.3.1 (E) Does the laboratory have and use a documented training program in each discipline and subdiscipline for employees who are new, untrained or in need of remedial training?	<u> </u>	<u>✓</u>	<u> </u>
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A formalized personnel development program is important to prepare employees to assume more responsible jobs.

1.3.3.2 (I) Does the laboratory have an employee development program?	<u>✓</u>	<u> </u>	<u> </u>
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The laboratory should maintain an adequate forensic library to include literature published in the applicable functional areas.

1.3.3.3 (I) Does the forensic library contain current books, journals, and other literature dealing with each functional area?	<u>✓</u>	<u> </u>	<u> </u>
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A system or procedure should exist to encourage a review of appropriate new literature by personnel.

1.3.3.4 (I) Does a system exist to encourage each examiner to review appropriate new literature?	<u>✓</u>	<u> </u>	<u> </u>
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A chain of custody record must be maintained which provides a comprehensive, documented history of each evidence transfer over which the laboratory has control.

1.4.1.1 (E) Does the laboratory have a written or secure electronic chain of custody record with all necessary data which provides for complete tracking of all evidence?	<u> </u>	<u>✓</u>	<u> </u>
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Each individual item of evidence must be marked for identification, when practical. If the item does not lend itself to marking, its proximal container or identifying tag must be marked.

1.4.1.2 (E) Is all evidence marked for identification?	<u>✓</u>	<u> </u>	<u> </u>
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Evidence seals must be designed and used to protect the integrity of the evidence.

1.4.1.3 (E) Is evidence stored under proper seal?	<u>✓</u>	<u> </u>	<u> </u>
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Procedural precautions must exist which reduce the risk of evidence loss, cross transfer, contamination and/or other deleterious change.

	Yes	No	N/A
1.4.1.4 (E) Is evidence protected from loss, cross transfer, contamination and/or deleterious change?	<u>✓</u>	___	___

A secure area for overnight and/or long-term storage of evidence must be available.

1.4.1.5 (E) Is there a secure area for overnight and/or long-term storage of evidence?	<u>✓</u>	___	___
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A forensic laboratory must establish whether individual characteristic database samples are treated as evidence, reference materials, or examination documentation.

1.4.1.6 (E) Has the laboratory established whether individual characteristic database samples are treated as evidence, reference materials, or examination documentation?	<u>✓</u>	___	___
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Each individual characteristic database sample under the control of the laboratory must be uniquely identified.

1.4.1.7 (E) Is each individual characteristic database sample under the control of the laboratory uniquely identified?	<u>✓</u>	___	___
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Procedural precautions must exist which reduce the risk of individual characteristic database sample loss, cross transfer, contamination and/or other deleterious change.

1.4.1.8 (E) Are individual characteristic database samples protected from loss, cross transfer, contamination and/or deleterious change?	<u>✓</u>	___	___
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Access to individual characteristic database samples under the control of the laboratory must be restricted to those persons authorized by the laboratory director.

1.4.1.9 (E) Is access to individual characteristic database samples restricted to those persons authorized by the laboratory director?	<u>✓</u>	___	___
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All elements of a laboratory's quality system must be clearly documented in a quality manual which is kept current under the responsibility of a quality manager.

1.4.2.1 (E) Does the laboratory have a comprehensive quality manual?	<u>✓</u>	___	___
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A laboratory must have an individual designated as the Quality Manager.

1.4.2.2 (E) Is an individual designated as the quality manager?	<u>✓</u>	___	___
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To verify that its operations continue to comply with the requirements of its quality system and the standards under which ASCLD/LAB accreditation was granted, each accredited laboratory must conduct an annual audit of its operations and submit an Annual Accreditation Audit Report (Appendix 6) to ASCLD/LAB by the anniversary of its accreditation.

	Yes	No	N/A
1.4.2.3 (E) Did the accredited laboratory conduct and document an annual audit of its operations and submit an annual accreditation audit report to ASCLD/LAB by the required deadline?	<u>✓</u>	___	___

The quality system requires that laboratory management conduct a review at least once yearly to ensure the continued suitability and effectiveness of such a system.

1.4.2.4 (E) Does the laboratory conduct and document an annual review of its quality system?	<u>✓</u>	___	___
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Procedures used must be generally accepted in the field or supported by data gathered and recorded in a scientific manner.

1.4.2.5 (E) Are the procedures used generally accepted in the field or supported by data gathered and recorded in a scientific manner?	<u>✓</u>	___	___
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New technical procedures must be validated to prove their efficacy in examining evidence material before being implemented on casework.

1.4.2.6 (E) Are new technical procedures scientifically validated before being used in casework and is the validation documentation available for review?	<u>✓</u>	___	___
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The laboratory must maintain written copies of appropriate technical procedures.

1.4.2.7 (E) Are the technical procedures used by the laboratory documented and are the documents available to laboratory personnel for review?	<u>✓</u>	___	___
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Controls and standard samples must be used and documented in the case record to ensure the validity of the testing parameters and, thereby, the conclusion.

1.4.2.8 (E) Are appropriate controls and standards specified in the procedures and are they used and documented in the case record to ensure the validity of examination results?	<u>✓</u>	___	___
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The quality of the standard samples and reagents must be adequate for the procedure used.

1.4.2.9 (E) Is the quality of the standard samples and reagents adequate for the procedure used?	<u>✓</u>	___	___
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All reagents must be routinely tested for their reliability.

1.4.2.10 (E) Does the laboratory routinely check the reliability of its reagents?	<u>✓</u>	___	___
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Instruments/equipment should be adequate for the procedures used.

1.4.2.11 (I) Are the instruments/equipment adequate for the procedures used?	<u>✓</u>	___	___
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Instruments/equipment should be maintained in proper working order.

Yes No N/A

1.4.2.12 (I) Are the instruments/equipment in proper working order?

 ✓

Instruments/equipment must be properly calibrated and calibration records maintained for all calibrated instruments.

1.4.2.13 (E) Are the instruments/equipment properly calibrated?

 ✓

The laboratory must create and maintain a uniquely identified case record for all administrative and examination documentation generated and/or received by the laboratory for each case involving the analysis of evidence.

1.4.2.14 (E) Does the laboratory create and maintain a uniquely identified case record for all examination and administrative documentation generated and/or received by the laboratory for each case involving the analysis of evidence?

 ✓

The laboratory's unique case identifier must be on each page of examination documentation, and the handwritten initials (or secure electronic equivalent) of the person generating the examination documentation must be on each page generated by that person.

1.4.2.15 (E) Does the laboratory's unique case identifier appear on each page of examination documentation, and does the handwritten initials (or secure electronic equivalent) of the person generating the examination documentation appear on each page generated by that person?

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Examination documentation must be sufficiently detailed to support the conclusions and opinions reported by the examiner(s) and must be such that, in the absence of the examiner(s), another competent examiner or supervisor could evaluate what was done and interpret the data. Examination documentation must be of a permanent nature and must be free of obliterations and erasures.

1.4.2.16 (E) Are conclusions and opinions in reports supported by data available in the case record, and are the examination documents sufficiently detailed such that, in the absence of the examiner(s), another competent examiner or supervisor could evaluate what was done and interpret the data?

 ✓

1.4.2.17 (E) Is examination documentation of a permanent nature and is it free of obliterations and erasures?

 ✓

Laboratory personnel who issue findings based on examination documentation generated by another person(s) must complete and document the review of all relevant pages of examination documentation in the case record.

1.4.2.18 (E) Has each person(s) in the laboratory who issued findings based on examination documentation generated by another person, completed a review of all relevant pages of examination documentation and documented the review in the case record?

 ✓

Written reports must be generated for all analytical work performed on evidence by the laboratory and must contain the conclusions and opinions that address the purpose for which the analytical work was undertaken. The significance of associations made must be communicated clearly and qualified properly. The name of the author(s) must appear in the report.

	Yes	No	N/A
1.4.2.19 (E) Does the laboratory generate written reports for all analytical work performed on evidence, and do the reports contain the conclusions and opinions that address the purpose for which the analytical work was undertaken?	<u>✓</u>	___	___
1.4.2.20 (E) Where associations are made, is the significance of the association communicated clearly and qualified properly in the report?	<u>✓</u>	___	___
1.4.2.21 (E) Does the name of the author(s) appear in the report?	<u>✓</u>	___	___

It is essential that a representative number of reports be subjected to a technical review.

1.4.2.22 (E) Does the laboratory have, use and document a system of technical review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?	___	<u>✓</u>	___
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Administrative reviews must be conducted to ensure the completeness and correctness of the reports issued.

1.4.2.23 (E) Does the laboratory conduct and document administrative reviews of all reports issued?	<u>✓</u>	___	___
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The laboratory must have and follow a written procedure whereby the testimony of each examiner is monitored at least once every year.

1.4.2.24 (E) Does the laboratory monitor the testimony of each examiner at least annually and is the examiner given feedback from the evaluation?	<u>✓</u>	___	___
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The laboratory must have a written procedure which it uses to initiate a review and to take corrective action when the laboratory has an indication of a significant problem with a technical procedure or the work of an analyst.

1.4.2.25 (E) If the laboratory has an indication of a significant technical problem, is there a procedure in writing and in use whereby the laboratory initiates a review and takes any corrective action required?	___	<u>✓</u>	___
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Each laboratory must have a documented program of proficiency testing which measures the capability of its examiners and the reliability of its analytical results.

1.4.3.1 (E) Does the laboratory have a documented program of proficiency testing?	<u>✓</u>	___	___
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The laboratory must participate in proficiency testing programs in which samples are provided by an external test provider. ASCLD/LAB approved providers must be used where available.

	Yes	No	N/A
1.4.3.2 (E) Does the laboratory participate in proficiency testing programs conducted by approved test providers or by other external provider(s) when no approved provider is available?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Each Examiner should be proficiency tested annually in each subdiscipline in which casework is performed.

1.4.3.3 (I) Was each examiner proficiency tested annually in each subdiscipline in which casework was performed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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The laboratory should conduct annual proficiency testing in each discipline using re-examination or blind techniques.

1.4.3.4 (I) Does the laboratory conduct proficiency testing using re-examination or blind techniques?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Each examiner must be proficiency tested at least once, during each five-year accreditation cycle, in each subdiscipline in which the examiner performs casework examinations and issues report.

1.4.3.5 (E) Was each examiner proficiency tested at least once, during the previous five-year accreditation cycle, in every subdiscipline in which the examiner performed casework examinations and issued reports?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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MANAGEMENT

The laboratory director should have a minimum of a baccalaureate degree in a natural science, criminalistics or a closely related field. If the director lacks a scientific background, then there should be support within management by personnel with appropriate scientific background.

2.1.1 (I) Does the laboratory director possess a degree in a natural science, criminalistics or in a closely related field, or is the laboratory director supported by scientific personnel of sufficient managerial rank and authority?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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A laboratory director should have at least five years of forensic science experience performing casework in one of the ASCLD/LAB accredited disciplines.

2.1.2 (D) Does the laboratory director have at least five years of forensic science experience?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Additional education in management or business administration by college course work or short training courses (or both) is recommended.

2.1.3 (D) Does the laboratory director have some formal training in management?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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The laboratory director should have at least two years of experience in management.

	Yes	No	N/A
2.1.4 (D) Does the laboratory director have at least two years of managerial experience?	<u>✓</u>	___	___

CONTROLLED SUBSTANCES

Examiners must have education and experience/training commensurate with the examinations and testimony provided. A baccalaureate or advanced degree in a natural science, criminalistics or in a closely related field is required.

2.2.1 (E) Does each examiner possess a baccalaureate or advanced degree in a natural science, criminalistics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	<u>✓</u>	___	___
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Examiners must have a good understanding of the principles, uses and limitations of the instruments, and the methods and procedures as applied to the tasks performed.

2.2.2 (E) Does each examiner understand the instruments, and the methods and procedures used?	<u>✓</u>	___	___
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Examiners must have successfully completed a competency test.

2.2.3 (E) Did each examiner successfully complete a competency test prior to assuming casework responsibility?	<u>✓</u>	___	___
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A proficiency test must be successfully completed by each examiner at least annually.

2.2.4 (E) Did each examiner successfully complete an annual proficiency test?	<u>✓</u>	___	___
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TOXICOLOGY

Examiners must have education and experience/training commensurate with the examinations and testimony provided. A baccalaureate or advanced degree in a natural science, toxicology, criminalistics or in a closely related field is required.

2.3.1 (E) Does each examiner have a baccalaureate or advanced degree in a natural science, toxicology, criminalistics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	___	___	<u>✓</u>
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Examiners must have a good understanding of the principles, uses and limitations of the instruments, and the methods and procedures applied to the tasks performed.

2.3.2 (E) Does each examiner understand the instruments, and the methods and procedures used?	___	___	<u>✓</u>
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Examiners must have successfully completed a competency test.

	Yes	No	N/A
2.3.3 (E) Did each examiner successfully complete a competency test prior to assuming casework responsibility?	_____	_____	<u>✓</u>

A proficiency test must be successfully completed by each examiner at least annually.

2.3.4 (E) Did each examiner successfully complete an annual proficiency test?	_____	_____	<u>✓</u>
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TRACE EVIDENCE

Examiners must have education and experience/training commensurate with the examinations and testimony provided. A baccalaureate or advanced degree in a natural science, criminalistics or in a closely related field is required.

2.4.1 (E) Does each examiner possess a baccalaureate or advanced degree in a natural science, criminalistics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	<u>✓</u>	_____	_____
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Examiners must have a good understanding of the principles, uses and limitations of the instruments, and the methods and procedures applied to the tasks performed.

2.4.2 (E) Does each examiner understand the instruments, and the methods and procedures used?	<u>✓</u>	_____	_____
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A competency test must be successfully completed prior to working cases of each evidence type.

2.4.3 (E) Did each examiner successfully complete a competency test in each of the subdisciplines processed prior to assuming casework responsibility?	<u>✓</u>	_____	_____
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A proficiency test must be successfully completed by each examiner at least annually.

2.4.4 (E) Did each examiner successfully complete an annual proficiency test?	<u>✓</u>	_____	_____
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BIOLOGY

Examiners must have education and experience/training commensurate with the examinations and testimony provided. A baccalaureate or advanced degree in a natural science, criminalistics or in a closely related field is required.

2.5.1 (E) Does each examiner possess a baccalaureate or advanced degree in a natural science, criminalistics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	<u>✓</u>	_____	_____
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		Yes	No	N/A
2.5.2 (E)	Does each examiner performing DNA analysis have education, training and experience consistent with those required by the quality assurance audit document?	<u>✓</u>	___	___

Examiners must have a good understanding of the principles, uses and limitations of the instruments, and the methods and procedures applied to the tasks performed.

2.5.3 (E)	Does each examiner understand the instruments, and the methods and procedures used?	<u>✓</u>	___	___
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Examiners must have successfully completed a competency test.

2.5.4 (E)	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	<u>✓</u>	___	___
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A proficiency test must be successfully completed by each examiner at least annually?

2.5.5 (E)	Did each examiner successfully complete an annual proficiency test?	<u>✓</u>	___	___
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Two proficiency tests must be successfully completed by each DNA examiner annually.

2.5.6 (E)	Did each examiner performing DNA analysis successfully complete two annual proficiency tests from an approved test provider?	<u>✓</u>	___	___
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FIREARMS/TOOLMARKS

Firearms/toolmarks examiners should have a baccalaureate degree with science courses.

2.6.1 (I)	Does each examiner possess a baccalaureate degree with science courses?	<u>✓</u>	___	___
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Examiners must have a good understanding of the principles, uses and limitations of the instruments, and the methods and procedures used as applied to the tasks performed.

2.6.2 (E)	Does each examiner understand the instruments, and the methods and procedures used?	<u>✓</u>	___	___
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Examiners must have education and experience/training commensurate with the examinations and testimony provided. Independent case examinations must not be undertaken until extensive instruction from a qualified examiner has been completed.

2.6.3 (E)	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	<u>✓</u>	___	___
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Examiners must successfully complete a competency test.

	Yes	No	N/A
2.6.4 (E) Did each examiner successfully complete a competency test prior to assuming case work responsibility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A proficiency test must be successfully completed by each examiner at least annually.

2.6.5 (E) Did each examiner successfully complete an annual proficiency test?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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QUESTIONED DOCUMENTS

Questioned document examiners should have a baccalaureate degree with science courses.

2.7.1 (I) Does each examiner possess a baccalaureate degree with science courses?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Examiners must have a good understanding of the principles, uses and limitations of the instruments, and the methods and procedures used as applied to the tasks performed.

2.7.2 (E) Does each examiner understand the instruments, and the methods and procedures used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Examiners must have education and training/experience commensurate with the examinations and testimony provided. Independent case examinations must not be undertaken until extensive instruction from a qualified document examiner has been completed.

2.7.3 (E) Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Examiners must have successfully completed a competency test.

2.7.4 (E) Did each examiner successfully complete a competency test prior to assuming case work responsibility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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A proficiency test must be successfully completed by each examiner at least annually.

2.7.5 (E) Did each examiner successfully complete an annual proficiency test?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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LATENT PRINTS

Latent print examiners should have a baccalaureate degree with science courses.

2.8.1 (I) Does each examiner possess a baccalaureate degree with science courses?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Examiners must have a good understanding of the concept of individualization and the principles, uses and limitations of the instruments, and the methods and procedures used as applied to the tasks performed.

	Yes	No	N/A
2.8.2 (E) Does each examiner understand the instruments, and the methods and procedures used?	_____	_____	<u>✓</u>

Examiners must have education and training/experience commensurate with the examinations and testimony provided. Independent case examinations must not be undertaken until extensive instruction from a qualified latent print examiner has been completed.

2.8.3 (E) Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	_____	_____	<u>✓</u>
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Examiners must have successfully completed a competency test.

2.8.4 (E) Did each examiner successfully complete a competency test prior to assuming casework responsibility?	_____	_____	<u>✓</u>
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A proficiency test must be successfully completed by each examiner at least annually.

2.8.5 (E) Did each examiner successfully complete an annual proficiency test?	_____	_____	<u>✓</u>
---	-------	-------	----------

TECHNICAL SUPPORT

The individual must meet the specification of the job description.

2.9.1 (E) Do technical support personnel meet the requirements of their job descriptions?	<u>✓</u>	_____	_____
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The job description and the duties performed must be in agreement.

2.9.2 (E) Are the job descriptions and the duties performed in agreement?	<u>✓</u>	_____	_____
---	----------	-------	-------

Technical support staff must have successfully completed an appropriate competency test.

2.9.3 (E) Did each member of the technical support staff successfully complete an appropriate competency test prior to assuming casework responsibility?	<u>✓</u>	_____	_____
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Technical support personnel must successfully complete an appropriate proficiency test annually.

2.9.4 (E) Did all technical support personnel successfully complete an appropriate proficiency test, annually?	<u>✓</u>	_____	_____
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Two proficiency tests must be successfully completed annually by all technical support personnel performing DNA analysis.

	Yes	No	N/A
2.9.5 (E) Did all technical support personnel performing DNA analysis successfully complete two annual proficiency tests from an approved test provider?	___	___	✓ ___

CRIME SCENE

The examiner must meet the requirements of the job description.

2.10.1 (E) Do examiners meet the requirements of their job descriptions?	___	___	✓ ___
--	-----	-----	----------

Examiners must have a good understanding of the concept and theory of scene security and integrity, and the uses and limitations of the equipment, methods and procedures used to document and process crime scenes, as applied to the tasks performed.

2.10.2 (E) Does each examiner understand the equipment, methods and procedures used?	___	___	✓ ___
--	-----	-----	----------

Examiners must have training and experience commensurate with the examinations, documentation and testimony provided, as applied to the tasks performed. Independent examinations and documentation at crime scenes must not be undertaken until extensive instruction from a qualified examiner has been completed.

2.10.3 (E) Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations/documentation and testimony provided?	___	___	✓ ___
---	-----	-----	----------

Examiners must have successfully completed a competency test(s) as applied to the task(s) performed.

2.10.4 (E) Did each examiner successfully complete a competency test(s) prior to primary responsibility for the examination, documentation and processing of a crime scene?	___	___	✓ ___
---	-----	-----	----------

A proficiency test must be completed by each person conducting crime scene examinations at least annually. The proficiency test should reflect the types of procedures, methods and equipment as applied to the typical task(s) performed.

2.10.5 (E) Did each examiner successfully complete an annual proficiency test?	___	___	✓ ___
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DIGITAL & MULTIMEDIA EVIDENCE

Digital and multimedia evidence examiners should have a baccalaureate degree with science courses.

2.11.1 (I) Does each examiner possess a baccalaureate degree with science courses?	___	___	✓ ___
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Examiners must have a good understanding of the principles, uses and limitations of the hardware, software, and the methods and procedures as applied to the tasks performed.

	Yes	No	N/A
2.11.2 (E) Does each examiner understand the equipment, programs, methods and procedures used?	___	___	<u>✓</u>

Examiners must have education and training/experience commensurate with the examinations and testimony provided. Independent case examinations must not be undertaken until extensive instruction from a qualified examiner has been completed.

2.11.3 (E) Does each examiner have experience commensurate with the examinations/documentation and testimony provided?	___	___	<u>✓</u>
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Examiners must have successfully completed a competency test.

2.11.4 (E) Did each examiner successfully complete a competency test in each subdiscipline prior to assuming casework responsibility?	___	___	<u>✓</u>
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A proficiency test must be successfully completed by each examiner at least annually.

2.11.5 (E) Did each examiner successfully complete an annual proficiency test?	___	___	<u>✓</u>
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Each employee should have adequate work space to accomplish assigned tasks.

3.1.1 (I) Does each employee have adequate work space to accomplish assigned tasks?	<u>✓</u>	___	___
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Sufficient space should be provided for storage of supplies, equipment and tools.

3.1.2 (D) Is there sufficient space provided for storage of supplies, equipment and tools?	___	<u>✓</u>	___
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Examiners should have space available for writing reports and other official communications.

3.1.3 (I) Is there adequate space available for examiners for writing reports and other official communications?	<u>✓</u>	___	___
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Adequate and appropriate space should exist for records and reference materials.

3.1.4 (I) Is there adequate and appropriate space available for records, reference works and other necessary documents?	<u>✓</u>	___	___
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Sufficient space should be available for instrumentation/equipment to facilitate its operation.

3.1.5 (I) Is adequate space available for instrumentation/equipment to facilitate its operation?	<u>✓</u>	___	___
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Accessories should be stored near instrumentation/equipment to facilitate its use and operation.

	Yes	No	N/A
3.1.6 (D) Are accessories stored near instrumentation/equipment to facilitate its use and operation?	<u>✓</u>	___	___

The physical design should permit the efficient flow of evidence from the time of its acceptance until its proper disposal.

3.2.1 (I) Does the physical design permit the efficient flow of evidence from the time of its acceptance until its proper disposal?	<u>✓</u>	___	___
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The relative locations of functional areas should facilitate the use of equipment and instruments.

3.2.2 (D) Do the relative locations of functional areas facilitate the use of equipment and instruments?	<u>✓</u>	___	___
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Adequate and proper lighting should be available for personnel to carry out assigned tasks.

3.2.3 (I) Is there adequate and proper lighting available for personnel to carry out assigned tasks?	<u>✓</u>	___	___
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Adequate and proper plumbing and wiring should be available and accessible to carry out assigned tasks.

3.2.4 (I) Is there adequate and proper plumbing and wiring available and accessible to carry out assigned tasks?	<u>✓</u>	___	___
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The laboratory should have proper general ventilation.

3.2.5 (I) Does the laboratory have proper general ventilation?	<u>✓</u>	___	___
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There should be adequate heating, cooling and humidity control in the laboratory.

3.2.6 (I) Is the heating, cooling and humidity control in the laboratory adequate?	<u>✓</u>	___	___
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Access to the operational area of the laboratory must be controllable and limited to those individuals who are assigned to routinely work in the area or to those individuals designated by the laboratory director to have access.

3.3.1 (E) Is access to the operational area of the laboratory controllable and limited?	<u>✓</u>	___	___
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All exterior entrance/exit points require adequate security control.

3.3.2 (E) Do all exterior entrance/exit points have adequate security control?	<u>✓</u>	___	___
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Internal areas requiring limited/controlled access must have a lock system.

	Yes	No	N/A
3.3.3 (E) Do all internal areas requiring limited/controlled access have a lock system?	<u>✓</u>	___	___

Accountability of all keys, magnetic cards, etc., must be documented and their distribution limited to those individuals designated by the laboratory director to have access.

3.3.4 (E) Is distribution of all keys, magnetic cards, etc., documented and is distribution limited to those individuals designated by the laboratory director to have access?	<u>✓</u>	___	___
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The laboratory must be monitored during vacant hours by an intrusion alarm or by security personnel.

3.3.5 (E) Is the laboratory secured during vacant hours by means of an intrusion alarm or by security personnel?	<u>✓</u>	___	___
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The laboratory should have a fire detection system.

3.3.6 (I) Does the laboratory have a fire detection system?	<u>✓</u>	___	___
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All elements of a laboratory's health and safety program must be clearly documented in a manual. The program should be monitored and the manual kept current by a health and safety manager.

3.4.1 (I) Does the laboratory have an effective health and safety program documented in a manual?	<u>✓</u>	___	___
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3.4.2 (I) Is an individual designated as the health and safety manager?	<u>✓</u>	___	___
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3.4.3 (I) Is the health and safety program monitored regularly and reviewed annually to ensure that its requirements are being met?	<u>✓</u>	___	___
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The laboratory should have available and encourage the use of safety devices (particularly those required in its health and safety manual). Examples of such devices are goggles, face protectors, ear protectors, gloves and fire extinguishers.

3.4.4 (I) Does the laboratory have available and encourage the use of safety devices, particularly those required by its health and safety manual?	<u>✓</u>	___	___
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Proper equipment and material should be available for the handling of carcinogenic, toxic and/or other dangerous material spills.

3.4.5 (I) Does the laboratory have proper equipment and material available for the handling of carcinogenic, toxic and/or other dangerous material spills?	<u>✓</u>	___	___
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The laboratory should have safety shower and eye wash equipment in appropriate locations and in good working condition.

		Yes	No	N/A
3.4.6 (I)	Does the laboratory have safety shower and eye wash equipment in appropriate locations and in good working condition?	<u>✓</u>	___	___

Exhaust hoods must be available to maintain a safe work environment.

3.4.7 (I)	Are sufficient exhaust hoods available to maintain a safe work environment?	<u>✓</u>	___	___
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Sufficient first-aid kits should be available and strategically located.

3.4.8 (I)	Are sufficient first-aid kits available and strategically located?	<u>✓</u>	___	___
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An adequate number of personnel should hold current certification in first-aid.

3.4.9 (I)	Does the laboratory have an adequate number of personnel holding current certification in first-aid?	<u>✓</u>	___	___
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Space should be provided for safe storage of volatile, flammable, explosive and other hazardous materials.

3.4.10 (I)	Is appropriate space provided for safe storage of volatile, flammable, explosive and other hazardous materials?	<u>✓</u>	___	___
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Emergency exits from the laboratory should be in compliance with safe working requirements.

3.4.11 (I)	Are the emergency exits from the laboratory adequate for safe exit in an emergency?	<u>✓</u>	___	___
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General cleanliness and good-housekeeping should be apparent.

3.4.12 (D)	Is there general cleanliness and apparent good-housekeeping in the laboratory?	___	<u>✓</u>	___
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731
9534

SUMMARY

The following summarizes the criteria for which the Inspection Team determined the laboratory to not be in compliance at the time of the inspection and documents the basis for the findings. The summary also identifies criteria which were determined to be not applicable and the basis for that determination:

1.1.2.2 (I) Is the budget adequate to meet the written objectives?

7 **The laboratory does not have sufficient personnel resources to meet its present objectives. The laboratory must analyze most controlled substance cases within a forty-eight hour time period to prevent the dismissal of criminal charges. Mandatory overtime is continually used to meet this requirement. Even with the required overtime the laboratory does not always meet this requirement.**

1.1.2.10 (D) Does clearly written and well understood documentation or procedure exist for personnel evaluations and objectives?

7 **The laboratory does not complete agency required written personnel evaluations of civilian employees.**

1.3.3.1 (E) Does the laboratory have and use a documented training program in each discipline and subdiscipline for employees who are new, untrained or in need of remedial training?

The Questioned Documents and the Impression Evidence training programs consist of outlines of seven and two pages respectively. The training programs are not sufficiently comprehensive to cover all aspects of the work performed by laboratory analysts in the two respective disciplines. The outlines do not reference more detailed training modules in other laboratory documents.

1.4.1.1 (E) Does the laboratory have a written or secure electronic chain of custody record with all necessary data which provides for complete tracking of all evidence?

In the Controlled Substances discipline, chain of custody records are maintained electronically. Evidence transfers which did not occur sometimes show up in the record and transfers which did occur are sometimes omitted from the record.

In the Controlled Substances discipline, the terminal in which analysts enter electronic chain of custody information is not secured from unauthorized access. The laboratory does not have a written procedure for securing the terminal after an analyst has made an entry and steps away from the terminal.

1.4.2.14 (E) Does the laboratory create and maintain a uniquely identified case record for all examination and administrative documentation generated and/or received by the laboratory for each case involving the analysis of evidence?

In the Biology discipline, all examination documentation generated by the analyst is not retained in the case record. Handwritten examination documentation recorded at the time of analysis is discarded after being transcribed to the LIMS system.

- 1.4.2.16 (E) Are conclusions and opinions in reports supported by data available in the case record, and are the examination documents sufficiently detailed such that, in the absence of the examiner(s), another competent examiner or supervisor could evaluate what was done and interpret the data?

In the Controlled Substances discipline, the Controlled Substances SOP 4.A.5 states the negative control will be free of controlled substances contaminants. Mass spectral data was not available for review in the case record for extraneous peaks found in the reagent blank/negative control. The laboratory does not have a policy to retain this data.

In the Controlled Substances discipline, the date the analyst begins the examination is not recorded in the examination documentation.

- 1.4.2.22 (E) Does the laboratory have, use and document a system of technical review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?

The Controlled Substances SOP requires documentation of the technical review on the case report. The technical review is documented on a technical review log instead of the laboratory report.

- 1.4.2.25 (E) If the laboratory has an indication of a significant technical problem, is there a procedure in writing and in use whereby the laboratory initiates a review and takes any corrective action required?

Balance verifications in the controlled substances discipline are performed on a monthly basis. In two instances balances have been taken out of service for errors without initiating a review and following the laboratory corrective action procedure.

- 1.4.3.4 (I) Does the laboratory conduct proficiency testing using re-examination or blind techniques?

The laboratory does not conduct proficiency testing using re-examination or blind techniques in at least fifty percent of the disciplines.

- 3.1.2 (D) Is there sufficient space provided for storage of supplies, equipment and tools?

Cleaning supplies, water carboy bottles, and metal storage cabinets are located in the corridors of the laboratory.

- 3.4.12 (D) Is there general cleanliness and apparent good-housekeeping in the laboratory?

Common areas in the building which are used by the laboratory are in a poor state of housekeeping and repair.

All criteria for sections 2.3 Toxicology, 2.8 Latent prints, 2.10 Crime Scene and 2.11 Digital & Multimedia Evidence were scored N/A because the laboratory does not perform work in the disciplines.

Criterion 2.9.5 was scored N/A because the laboratory does not use technicians in the Biology discipline.

SUMMATION OF CRITERIA RATINGS

	Total Possible	Total Yes	Total No	Total N/A	Total Number Yes/No
Essential	91	67	6	18	73
Important	45	41	2	2	43
Desirable	16	13	3	0	16

Percent Essential: 92%

Percent Important: 95%

Percent Desirable: 81%

Areas sought for accreditation are as follows:

Firearms/Toolmarks

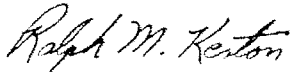
Trace Evidence (gunshot residue and impression evidence only)

Controlled Substances

Biology

Questioned Documents

Prepared by: Robert Gonsowski, ASCLD/LAB Staff Inspector



Ralph M. Keaton, Executive Director