



**Quality Division Use Only**

Quality Tracking #:	<input type="text" value="2017-IA-05"/>	Date Quality Division Notified:	<input type="text" value="4/10/2017"/>
Non-Conformance Level:	<input type="text" value="Class I"/>	Date Submitted to Management for Review:	<input type="text" value="7/3/2017"/>
Date Submitted to Quality for Review:	<input type="text" value="7/5/2017"/>	Dated Closed:	<input type="text" value="7/5/2017"/>

Date of Discovery:	<input type="text" value="3/28/2017"/>	Division:	<input type="text" value="Crime Scene/Digital and Multimedia Division"/>
Date of Incident:	<input type="text" value="2/28/2017"/>	Section:	<input type="text" value="Forensic Multimedia Unit"/>

Forensic Case Number(s), if applicable:	Agency Case Number(s), if applicable:
2017-02097	009466917

**Description of Discrepancy/Non-conformance. Do not include analysts' names unless otherwise instructed by the Section Manager or Division Director(s):**

An analyst issued a report that included results of analysis he was not authorized to perform. The report also included the ANAB accreditation logo, a violation of ANAB policy since the Forensic Multimedia Unit (FMU) is not accredited in comparative analysis. Moreover, the FMU does not have standard operating procedures or validated methods to perform this type of analysis. The comparative analysis was not appropriately documented by the analyst since the case record did not include sufficient documentation to facilitate an audit trail of the work performed.

**Actions Taken:**

The report was amended to remove the ANAB accreditation logo. ANAB, HFSC's accrediting body, will be notified of this nonconformance. Because the logo was added to the LIMS report template, it is possible neither the analyst nor the technical or administrative reviewers would have noticed the logo until after the report was approved and released. Since the other nonconformances should have been discovered during the technical review before the report was approved and released, the entire unit attended a Quality Boot Camp where the nonconformances included in this corrective action report were discussed. Training topics included accreditation requirements, the use



of the accreditation logo, the scope of accreditation, HFSC Quality Manual requirements, and SOP requirements. Additionally, the FMU is scheduled to attend training in July provided by ANAB covering the requirements of ISO/IEC 17025 and 17020. To enhance the review process, the FMU re-implemented the technical and administrative review checklists. These actions should prevent a recurrence.

**Summary of Root Cause Analysis:**

The reporting analyst is no longer employed with HFSC, therefore we cannot interview him to determine why he fulfilled a request for analysis outside the Unit's scope of accreditation or why he did not include appropriate examination documentation in the case record. However, these nonconformances should have been discovered when the FMU supervisor performed the technical review. The requirements for technical review are included in the Quality Manual and/or sectional SOPs. The supervisor documented a review of these policies and procedures but did not follow them in this situation. Additionally, the supervisor was involved in the accreditation process and reviewed the scope of accreditation prior to the accreditation certificate being issued to HFSC. Since the root cause of this nonconformance not being addressed at technical review appears to be related to individual employee performance, the Quality Division has referred this finding to the Human Resources Division in accordance with HFSC policy.

**Additional Information/Follow-Up:**

This nonconformance was discovered during the 2017 Forensic Multimedia Unit Internal Audit.

**Section Manager:** Ryan Johnson

**Date:** 7/3/2017

**Division Director:** Jerry Pena

**Date:** 7/5/2017

**Quality Director:** Lori Wilson

**Date:** 7/5/2017