



Houston Forensic Science Center

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From: Annalivia Harris, Quality Specialist

Cc: Lori Wilson, Quality Director
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Date: August 21, 2018

Re: 2018 Crime Scene Unit Internal Follow-Up Audit Report

An internal follow-up audit of the Crime Scene Unit (CSU) was conducted August 13 through August 20, 2018 by the Quality Division. The scope of the audit was specific to case file reviews. The reviews covered casework that was completed after April 11, 2018, when revised worksheets were issued, and technical and/or administrative reviews that were completed after June 20, 2018, when the 2018 Internal Audit report was issued. The purpose of the audit was to determine if three corrective actions initiated from nonconformances discovered during the internal audit had been adequately addressed. Please refer to the 2018 Crime Scene Unit Internal Audit Report issued June 12, 2018 for further details.

The follow-up audit focused on the following corrective actions:

- 2018-IA-38 Technical documents not appropriately dated
- 2018-IA-41 Ineffective administrative reviews
- 2018-IA-42 Discrepancies in items of evidence listed on reports and described in the case record

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| AUDIT TEAM MEMBERS: | Annalivia Harris, Lori Wilson, Jackeline Moral, Callan Hundl, Erika Ziemak, and Carisa Martinez |
| AUDIT CRITERIA: | HFSC Quality Manual and Crime Scene Unit SOPs |
| AUDIT DATES: | August 13 - 20, 2018 |
| AUDIT SCOPE: | Case Files Technically and/or Administratively Reviewed after June 20, 2018 |

The audited case files were verified for correct use of grammar, thoroughness, and completeness. They were not checked for technical accuracy.

Task List

Comments

Completed

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| Case File Review | 19 Case files reviewed | ☒ |
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OPPORTUNITIES FOR IMPROVEMENT

- Crime scenes are often processed by multiple CSIs, each of whom compile a packet for the case file. Sometimes forms are completed by more than one CSI and copies of the forms made so each CSI can have a copy in their case packet. These copies should clearly be marked 'COPY' so that they can be differentiated from the original forms.

NONCONFORMANCES

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| <p>Correction Action 2018-IA-38 Requirement: HFSC Quality Manual clauses 4.13.2.2. and CSU SOP clause 6.3.5.1.</p> <p>During the follow-up audit, a final diagram was observed for FCN 2018-10894, issued after the SOP was revised on July 12, 2018, that did not list the date the scene was processed. The follow-up audit also found three case files containing worksheets that were not dated correctly. The first case file, 2018-10258, contained an undated Evidence Inventory form. The second case file, 2018-05945, contained two forms, a Chain of Custody form and an Evidence Inventory form, that were completed after AR/TR review, but the only date listed on either form was the date the crime scene was processed. The Field Notes form from 2018-05945 was not dated. The third case, 2018-05725, contained a Notes Continuation form that was not dated. The form was an outdated version that did not contain a date field while the current version does.</p> |
| <p>Corrective Action 2018-IA-41 Requirement: HFSC Quality Manual clause 5.9.5.1.</p> <p>The follow-up audit found that reports continue to be issued with minor grammatical errors (FCNs 2018-10005, 2018-09062, 2018-08560, 2018-08768, 2018-07566, 2018-05945, and 2018-05725.) Additional nonconforming work that was observed in the follow-up audit that should have been caught during the administrative review process includes an incorrect crime scene address on worksheets (FCN 2018-10005), the use of outdated forms (2018-05725 and 2018-05945), and the time not being listed in the date/time field on an Evidence Inventory form and a Chain of Custody form (2018-05945).</p> |
| <p>Corrective Action 2018-IA-42 Requirement: CSU SOP clause 6.3.5.2.</p> <p>The follow-up audit determined that there continues to be discrepancies between items of evidence collected at crime scenes and items of evidence listed in reports. Four case files were found in the follow-up audit where evidence listed in reports did not correlate to the case record (FCNs 2018-10258, 2018-08560, 2018-09597, and 2018-05945).</p> |

ADDRESSING NONCONFORMANCES AND OBSERVATIONS

The follow-up audit has shown that the corrective actions taken in response to these nonconformances have not successfully prevented recurrences. The findings from the follow-up audit will be incorporated into the existing nonconformances.