Quality Division Use Only

Quality Tracking #:	2018-016	**Classification:**	Corrective Action
Non-Conformance Level:	Class I	**Section:**	Latent Print Section
Date of Discovery:	02/15/18	**Date of Incident:**	02/14/18

Forensic Case Number(s), if applicable:	Agency Case Number(s), if applicable:
2017-23828	162345717

Description of Non-conformance:

Evidence described as an empty gas can was collected by an HFSC crime scene investigator (CSI) and submitted to the Latent Print laboratory for processing. When submitted, the can was packaged inside a box. The can actually contained a liquid and was not closed with a screw cap. While moving the box containing the can to the fume hood inside the laboratory, the processor spilled the liquid onto himself and the floor. For safety reasons, he disposed of the remaining liquid because it had a chemical odor and he wanted to prevent further spills. The processor was unaware that he had disposed of potential evidence. This is a violation of HFSC Quality Manual clause 5.8.1 which states, 'While in the custody of HFSC, evidence shall be handled in such a way to prevent loss, contamination and deleterious change'.

Actions Taken:

The examiner cleaned up the spill with a mop, placed his lab coat in the dirty lab coat bin, and washed his shirt in the rest room. This occurred on February 5, 2018. He left the can in the fume hood until February 14, when he disposed of the remaining liquid. He then sent an email to his supervisor and Section Manager informing them of the disposal. On February 15, after verbally explaining the situation to the Section Manager, the processor was instructed to inform the Quality Division and the HFSC Health and Safety Specialist of this occurrence. He was also instructed to document within the case record the disposal of the liquid. The examiner sent an email to the investigating officer on February 16 asking if the liquid was considered evidence or needed as evidence. The officer responded the same day that it was considered evidence. The Section Manager informed the officer that latent print processing could not be completed until after the can was processed for ignitable liquids. HFSC does not analyze this type of evidence. It was not until March 22 that the officer informed HFSC that ignitable liquid analysis needed to be done before the can was processed for latent prints. On February 19, the processor collected three swabs from inside the evidence container, placed them into a sealed metal container, then sealed the metal container in a plastic bag. This was done in an attempt to preserve the evidence for future ignitable liquid analysis. A cap for the gas can was fabricated from a piece of metal in an attempt to prevent further loss of fumes. The can was placed inside two heat-sealed plastic bags

(one inside the other) and then back into the storage box along with the sealed swabs. The box was sealed, initialed and dated, and placed into secure storage awaiting further direction. Training was provided to Crime Scene Investigators (CSIs) on March 22, 2018, covering the transfer and packaging of ignitable liquids. One CSI was not able to attend the training on March 22 and received the training on April 20. The Crime Scene Unit (CSU) ordered glass jars and nylon bags designed to preserve arson evidence (arson bags). These items are now available for use by CSIs. Prior to being returned to the Property Room, the gas can was resealed in an arson bag. CSU issued a memo to CSIs on April 4, describing the proper collection and packaging of liquid chemicals, including ignitable liquids and ignitable liquid residues. This information is also being included in the revised CSU SOP.

Summary of Root Cause Analysis:
Note: Incidents are documented for tracking purposes and trend analysis. Root Cause Analysis is not required for incidents.

The root cause of this nonconformance was the CSI labeled the gas can 'empty' without verifying the contents. At the time of this nonconformance, procedures and training for the collection of evidence by the Crime Scene Unit (CSU) did not address the collection of liquid chemicals but did address the need to preserve possible latent prints. When interviewed regarding this incident, the CSIs acknowledged that their focus was on limiting the handling of the evidence to preserve possible latent prints. Their attempt to minimize handling of the evidence resulted in the CSIs not verifying if the gas can was empty. Training was provided on March 22, 2018, addressing the need to check opaque containers designed to hold liquids (such as gas cans and lighter fluid bottles) thoroughly to determine if they contain liquids prior to submission. Latent print processing is a service HFSC provides to stakeholders. HFSC does not analyze ignitable liquids. This resulted in the CSIs focusing on latent processing but not on ignitable liquid analysis. Prior to this event, neither the CSU SOP nor the CSU training program addressed checking for the presence of possible liquid chemicals including ignitable liquids or the proper collection of possible ignitable liquids and ignitable liquid residues. The effective version of the SOP is being revised to include the submission of liquid chemicals in spill proof containers marked with arrows on the outer packaging to indicate correct orientation. Prior to publication of the revised SOP, a memo describing how to collect and package liquid chemicals was issued to all CSI on April 4, 2018. The revised SOP became effective on May 3. The root cause of the disposal of the evidence by the Latent Print section is the fact that ignitable liquids are not analyzed by HFSC and the processor and his supervisor did not think to treat it as evidence. This type of evidence is not commonly received by HFSC and if it had been properly described and packaged, the evidence would not have been submitted to the laboratory. A latent print examiner, trained to competency in Latent Print Processing procedures, has been designated as Lead Latent Print Processor for the processing laboratory. Moving forward, questions regarding how to proceed on non-standard evidence will be directed to this individual.

Additional Information/Follow-Up:

On February 19, the Health and Safety Specialist informed the processor that he had disposed of the potential ignitable liquid appropriately. At the request of the investigating officer, the evidence was returned to the HPD Property Room on April 4, before any latent print processing was conducted. This was done so the submitting agency can proceed with ignitable liquid analysis. The can will be processed for latent prints if a new request for this analysis is submitted to HFSC.

Section Manager: Tim Schmahl **Date:** 04/24/18

Division Director: Peter Stout **Date:** 04/24/18

Incidents or Corrective Actions that involve the Biology/DNA section are reviewed by the Technical Leader and CODIS Administrator.

Technical Leader: N/A **Date:** N/A

CODIS Administrator: N/A **Date:** N/A

Quality Director: Lori Wilson **Date Closed:** 05/04/18