Quality Division Use Only

Quality Tracking #:	2018-051	**Classification:**	Corrective Action
Non-Conformance Level:	Class III	**Section:**	Biology/DNA
Date of Discovery:	06/20/18	**Date of Incident:**	06/14/18

Forensic Case Number(s), if applicable:	Agency Case Number(s), if applicable:
2016-10505	063144916

Description of Non-conformance:

Casework was completed by a Forensic Biology staff member using an alternate light source instrument that she had not been authorized to use in casework. Although the analyst had been trained on the equipment, she had never been formally authorized to use this instrument on casework as required by the Quality Manual.

Actions Taken:

The item was re-examined by an authorized staff member. The authorized staff member verified the original observations and there were no discrepancies noted in her review. This second examination was documented in the case file. The case was then technically reviewed by a third staff member. This staff member had also never been formally authorized to use this instrument in casework or perform technical reviews in cases where this instrument was used. Similarly, this staff member had completed training with this instrument but had never been formally authorized to use it in casework. The third staff member completed the new, updated training for this instrument and obtained formal authorization. A new technical review was then completed and no discrepancies were noted. The use of this instrument did not negatively impact the evidence in this case.

Summary of Root Cause Analysis:

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

There were two contributing factors identified as root causes for this nonconformance: a disjointed training program with regard to this instrument and Forensic Biology management's oversight with regard to the proper usage and technical review of this instrument's usage in casework. The laboratory had previously trained staff to use the instrument. However, because there were discrepancies in the competency test results, training was stalled. The laboratory then contacted other laboratories who use this instrument, recognized the subjective nature of the interpretation of results given too many settings/filters and ultimately revised the SOP to limit the acceptable settings/filters that can be used. Training has resumed and will continue to be rolled out to appropriate staff. When the original staff member realized that the investigating officer requested the use of this instrument in this case, she consulted with the Forensic Biology Manager who advised her that the instrument could be used as an "investigative tool".

Additional Information/Follow-Up:

The instrument involved in this corrective action report is the LSV2 Leeds Spectral Vision system which is an alternate light source that serves as a presumptive screening tool.

Section Manager: Courtney Head **Date:** 08/23/18

Division Director: Amy Castillo **Date:** 08/24/18

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

Technical Leader: Robin Guidry **Date:** 08/23/2018

CODIS Administrator: Jennifer Clay **Date:** 08/23/2018

Quality Director: Lori Wilson **Date Closed:** 08/27/18