

## **Houston Forensic Science Center**

Incident/Corrective Action Report
Quality Division

Document ID: 19797

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Issue Date: 7/10/2018

Quality Division Use Only					
Quality Tracking #:	2018-060	Classification:	Incident		
Non-Conformance Level:	N/A	Section:	Latent Print Section		
Date of Discovery:	06/26/18	Date of Incident:	06/14/18		
Forensic Case Number(s), if applicable:		Agency Case Number(s),	Agency Case Number(s), if applicable:		
2018-07155		057580518	057580518		
Description of Non-conformance:					
An individual's name was misspelled on an Investigative Lead Report. The error was documented during the					
technical review of the case. However, the examiner misunderstood the reviewer's comment and made spelling					
changes other than the one requested. When the case came back for review after the changes were made, the reviewer did not complete a full technical review. She only verified that the requested spelling change was made.					
reviewer did not complete a ran teenmear review. She only vermed that the requested spenning change was made.					
Actions Taken:					
An amended report was issued on 8/17/2018. The supervisor, who was the technical reviewer of this case,					
discussed the nonconformance with the examiner. The reviewer/supervisor also reviewed again the Latent Print Technical and Administrative procedure and checklist.					

**Summary of Root Cause Analysis:** 

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



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Additional Information/Fo	llow-Up:				
The latent prints were searched in the Harris County Sheriff's Office (HCSO), Department of Public Safety (DPS) and Federal Bureau of Investigation (FBI) Automated Fingerprint Identification Systems (AFIS) databases resulting in AFIS associations in two of them (HCSO and FBI). The individual's name was spelled one way in the HCSO database and another way in the FBI database. By Latent Print policy, both spellings must be documented in the report. When errors are noted during review, error corrections are made and the case goes back through the review process again. Typically, the reviewer only verifies the requested corrections were made rather than conducting a second full review of the case. Although neither the Latent Print review policy nor the quality manual specifically address this, this practice is acceptable because a complete review is conducted and documented as required. In this case, the examiner should not have made additional changes to the case record without advising the reviewer. If this practice had been followed, the reviewer could have communicated with the examiner that no other changes to the case record were appropriate.  Section Manager:  Tim Schmahl  Date:  09/11/18  Date:  09/11/18					
		Date:	00/14/40		
Division Director:	Amy Castillo	Date:	09/11/18		
Incidents or Correct Leader and CODIS A	ive Actions that involve the Biol dministrator.	ogy/DNA section are revi	iewed by the Technical		
Technical Leader:	N/A	Date:	N/A		
<b>CODIS Administrator:</b>	N/A	Date:			
Quality Director:	Lori Wilson	Date Closed	09/12/18		