



Quality Division Use Only

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| Quality Tracking #: | 2018-114 | Classification: | Corrective Action |
| Non-Conformance Level: | Class I | Section: | Latent Prints |
| Date of Discovery: | 12/17/18 | Date of Incident: | 12/18/18 |

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|---|---------------------------------------|
| Forensic Case Number(s), if applicable: | Agency Case Number(s), if applicable: |
| 2018-19662 2018-17431 | 151836418 142378818 |

Description of Non-conformance:

A Firearms NIBIN technician placed evidence from two cases with multi-discipline requests (MDRs) into the Latent Print Processing (LPP) transfer box instead of the Forensic Biology (FB) transfer box. He did this because he did not recognize the FB code in LIMS. The evidence was transferred to the LPP vault by CS/CM. The evidence should have been transferred to Biology instead of Latent Prints. Once they have the evidence, latent print supervisors are supposed to verify there are no MDRs for LPP requests prior to assigning the cases to a processor to be worked. The cases were assigned to a latent print processor even though there were MDR requests in LIMS. The processor, who also was supposed to review requests for analysis for MDRs, processed the evidence instead of transferring it to Biology. Forensic Biology requests for analysis cannot be completed after the evidence has been processed for latent prints.

Actions Taken:

The FB requests for DNA analysis were closed without analysis because the evidence had already been processed for latent prints. The Firearms (FA) Section Manager explained the different types of FB LIMS request codes to the NIBIN Technician who placed the MDR evidence in the latent print processing (LPP) box. The manager also made sure that all other firearms analysts and NIBIN technicians were familiar the FB LIMS request codes. At the time of this nonconformance, HFSC's Lean Six Sigma (LSS) group was working on an improvement project for the MDR process. The pilot phase of the project started on 12/13/2018, which was after this nonconformance occurred (12/11/2018) but prior to it being discovered (12/17/2018). Several changes were implemented during the pilot phase of the LSS project that should reduce the likelihood of a recurrence. These changes include: 1. Running daily reports in JusticeTrax and Porter Lee LIMS to identify MDRs submitted within the last 24 hours. 2. Holding daily meetings in which attendees discuss the workflow of each MDR identified in the LIMS reports, including which section will handle the evidence first. 3. Adding a banner and a bell icon to JusticeTrax LIMS cases for all MDRs identified in the daily MDR LIMS reports. The banner informs analysts, including latent print processors, that there are multiple requests associated with the evidence. The bell icon is added in LIMS as an additional reminder. All sections except FB are using JusticeTrax LIMS as of 1/21/2019. When the LSS pilot project was implemented, it



only addressed MDRs received within the last 24 hours. In response to this nonconformance, a review was conducted for all previously received MDRs. LIMS banners and bell icons were added to all of the MDR requests in JusticeTrax LIMS. Prior to this nonconformance, the LP processor routinely reviewed requests in LIMS for MDRs, but only for evidence received from the property room. He did not review requests when CS/CM transferred evidence to the LPP vault from the Firearms section. He now reviews all requests for MDRs prior to processing the evidence.

Summary of Root Cause Analysis:

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

One cause of this nonconformance is lack of training provided to the newly hired NIBIN technician regarding different types of LIMS request codes used at HFSC. Both cases had "SCRN" and "LPP" requests in LIMS but the technician did not know what "SCRN" meant, so he placed the evidence into the "LPP" box. Another cause for this nonconformance is an ineffective use of emails to communicate between sections regarding MDRs. All appropriate section personnel were included in emails sent from FB and Client Services/Case Management (CS/CM) concerning the status of the requests as well as requests for evidence transfers. These emails were either not read or the necessary actions regarding the information provided were not taken. The actions taken should address both of these causes.

Additional Information/Follow-Up:

Both cases involved firearms evidence brought from the Houston Police Department (HPD) property room (PR) to the Firearms section. When Firearms receives evidence, section personnel review requests in LIMS to identify any MDRs. If an MDR exists for both FB and LPP, the evidence should be placed in the FB box since Biology handles the evidence first. In both these cases, the evidence was incorrectly placed in the LPP box, then transferred by CS/CM to that vault. Latent print supervisors are supposed to review requests in LIMS to identify any MDRs prior to assigning cases for processing. When asked, the Latent Print supervisor who assigned these cases could not provide an explanation as to how the MDRs in LIMS were missed. The supervisor is no longer employed at HFSC and cannot be further interviewed for cause analysis. Latent print processors are also supposed to review requests for MDRs prior to processing evidence. The processor who worked these cases stated that he routinely reviewed requests when he received evidence directly from the property room. However, he also stated that he did not review requests when evidence transferred from the Firearms section to the Latent Prints section because he believed Firearms personnel had already reviewed the requests.

Section Manager: Tim Schmahl

Date: 02/01/19



Houston Forensic Science Center
Incident/Corrective Action Report
Quality Division

Division Director: Amy Castillo

Date: 02/04/19

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

Technical Leader: Rebecca Green

Date: 2/01/19

CODIS Administrator: N/A

Date: N/A

Quality Director: Lori Wilson

Date Closed: 02/04/19