



THIS FORM IS FOR BIOLOGY/DNA REPORTING ONLY

Quality Division Use Only			
Quality Tracking #:	<input type="text" value="2018-IA-08"/>	Date Quality Division Notified:	<input type="text" value="1/31/2018"/>
Non-Conformance Level:	<input type="text" value="Class I"/>	Date Submitted to Management for Review:	<input type="text" value="4/23/2018"/>
Date Submitted to Quality for Review:	<input type="text" value="5/2/2018"/>	Date Closed:	<input type="text" value="6/26/2018"/>

Date of Discovery:	<input type="text" value="1/12/2018"/>	Division:	<input type="text" value="Biology/DNA Division"/>
Date of Incident:	<input type="text" value="1/12/2018"/>	Section:	<input type="text" value="Biology/DNA"/>

Forensic Case Number(s), if applicable:	Agency Case Number(s), if applicable:
Evidence: 2012-08598 2013-32132 Extracts: 2010-24053 2011-10418 2011-15306 2014-17578	Evidence: 092682990 016174593 Extracts: 164132710 127951105 187025609 104200014

Description of Discrepancy/Non-conformance. Do not include analysts' names unless otherwise instructed by the Section Manager or Division Director(s):
Audit Finding #2. Evidence: The chains of custody in two cases indicated the evidence items were stored in the room temperature storage location. However, the items could not be located during the audit. Extracts: The chains of custody in four cases erroneously showed extracts to be in the Forensic Biology Manager's electronic custody.

Actions Taken:
Evidence: The Forensic Biology Manager located the evidence items in the room temperature storage location stated on the chains of custody. Extracts: The Forensic Biology Manager confirmed that the extracts were physically located in the long-term storage location. The electronic chains of custody were updated to reflect the actual storage location.



Summary of Root Cause Analysis:

Evidence: The evidence items were not located during the Internal Follow Up Audit because the room temperature storage location was not suitably inventoried. The cases in the room temperature storage location are from the 1980s, 1990s and early 2000s. They are organized by laboratory number (since that is the only identifying number most of the cases have written on them) and there is no means by which a laboratory number can be efficiently and reliably affiliated with its respective agency case number or forensic case number (if one was assigned). Therefore, the Forensic Biology laboratory created a spreadsheet that lists all of these cases by laboratory number (there are approximately fourteen hundred) and marries each one of them with its respective incident number. There were seven cases where the incident numbers could not be identified even after researching the laboratory's archived log books, archived databases, microfilm library and archived law enforcement database and it was determined that all potential avenues have been exhausted. Extracts: All of the extracts were physically located in the long-term storage location which proves that their physical location was in accordance with the laboratory's standard procedures and only the electronic chains of custody were incorrect. All of the extracts were in the electronic custody of the Forensic Biology Manager who stated that it was her practice (even though it wasn't a requirement at the time) to track DNA extract transfers on the electronic chain of custody. However, because these transfers took place over five years ago, she has no direct recall as to why the electronic chains of custody were not updated when the extracts were physically transferred to long-term storage. At the time of the January 2018 Internal Follow Up Audit, these chain of custody issues were discovered. However, there was no indication of a systemic concern. An internal audit of the Forensic Biology laboratory was conducted March 19-23, 2018, and the laboratory had a finding that was similar in nature. Due to the recurrence of this issue, corrective measures will be implemented to prevent future chain of custody discrepancies. For further root cause analysis and further corrective measures, please see Quality Corrective Action Report 2018-IA-20/ID#23495.

Additional Information/Follow-Up:

Evidence: 2012-08598/092682990 item QVMN\QVMMO.1 2013-32131/145073313 item 1 Extracts: 2010-24053/164132710 items 12.1.1, 12.2.1, 12.3.1, 12.4.1, 12.5.1, 12.6.1, 12.7.1, 12.8.1 and 12.9.1 2011-10418/127951105 items VM5F\VM5G.1.1.1 and VM5F\VM5G.2.1.1 2011-15306/187025609 items 3.2.1 and 3.6.1.1 2014-17578/104200014 items 5.1.1 and 9.1.1.1

Section Manager: Courtney Head _____

Date: 6/25/2018 _____

Technical Leader: Robin Guidry _____

Date: 6/25/2018 _____

CODIS Administrator: Jennifer Clay _____

Date: 6/22/2018 _____

Division Director: Amy Castillo _____

Date: 6/25/2018 _____



Houston Forensic Science Center
Corrective Action Report Form – Biology Only
Quality Division

Quality Director: Lori Wilson

Date: 6/26/2018