

Houston Forensic Science Center

Incident/Corrective Action Report
Quality Division

Document ID: 19797

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Issue Date: 5/13/2019

Quality Division Use Only					
Quality Tracking #:	2019-IA-08	Classification:	Incident		
Non-Conformance Level:	N/A	Section:	Firearms		
Date of Discovery:	07/17/19	Date of Incident:	07/08/19		

Forensic Case Number(s), if applicable:	Agency Case Number(s), if applicable:	
N/A	N/A	

Description of Non-conformance:

While reviewing training records as part of the 2019 internal audit, the lead auditor notified the Firearms Manager that she could not locate the original training records for one (former) NIBIN Technician. The Firearms Manager contacted the former NIBIN Technician and was notified that, after creating an electronic copy of his original training records, the records were then placed in a shred bin. There is no documentation that the NIBIN Technician verified the electronic copy prior to placing the originals in the bin.

Additional Information/Follow-Up:

The Quality Manual in effect at the time of this nonconformance lacked clarity regarding records retention. Although clause 8.4.2 of the manual stated that management may authorize "the disposal of quality and/or technical records in accordance with HFSC records retention policy", this information was at the end of a paragraph. The paragraph started with the statement "Quality, administrative, and technical records will be kept for at least five years or one full accreditation cycle, whichever is longer. If pertaining to DNA, those same records are kept for at least ten years. Records are typically scanned into a secure, backed-up electronic system. The electronic versions of these records are maintained indefinitely, unless HFSC is otherwise ordered by the stakeholder or by legal requirements (expunction). The paper copies of these scanned records may be stored or shredded. Records will not be shredded before the scanned version has been compared to the original to ensure all pages were scanned and are legible. When scanned documents are part of a case record, verification includes ensuring the scanned version is added to the correct case record. It is the responsibility of the individual shredding the documents to ensure a true and correct electronic copy has been made." The intent of this wording was that, after the appropriate time frame, records could be scanned and then shredded. However, it was commonly interpreted to mean that originals could be scanned, the scans verified and then the originals could be shredded at any time.



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Summary of Root Cause A	•	trand analysis Poot Cause Anal	ysis is not required for incidents.		
N/A	ted for tracking purposes and t	trend analysis. Root Cause Anal	ysis is not required for incidents.		
Actions Taken:					
	_		taff because they have keys to		
the shred bins. The CS/CM Manager notified the Firearms Manager that the bins had been emptied since the former NIBIN Technician's last day. Therefore, there is nothing that can be done at this point to retrieve the					
	•	•	scanned documents and verified		
_		y. He wrote a memo addres			
-			y Manual has been revised and		
		Records Retention Schedule. () and technical records will b			
			HFSC's policy meets or exceeds		
	-	ody and the FBI." As a furthe			
Manager and HFSC's Gene the manager's meeting on		ecords Retention Policy and R	Records Retention Schedule at		
the manager's meeting on	September 9, 2019.				
	Donna Eudaley	_	00/13/10		
Section Manager:	<u> </u>		09/13/19		
Division Director:	Amy Castillo	Date:	09/17/19		
In sidents on Connect	in a Actional that involve the	Dielegy/DNIA coetien ene neut	ioused but he Technical		
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:	Erika Ziemak	Date Closed:	09/19/19		
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