



Quality Division Use Only

Quality Tracking #:	2020-043	Classification:	Corrective Action
Non-Conformance Level:	Class III	Section:	Latent Print Section
Date of Discovery:	06/12/20	Date of Incident:	03/02/20

Forensic Case Number(s), if applicable:	Agency Case Number(s), if applicable:
2020-01582	20-5165-U2588A6

Description of Non-conformance:

While reviewing the results received from the proficiency test provider to determine satisfaction of the tests completed by the participating examiners, the latent print technical leader (now the section manager) noticed that the "compared to" column in one examiner's final worksheet was blank. This column in the worksheet is used to document the name of the subject whom the latent print was compared to. Since this was a proficiency test, the subject's "names" are item identifiers (e.g. item A). After investigation it was determined that the examiner made changes to the names in the "individuals" tab within the JusticeTrax LIMS system. Edits made to the names in this manner cause the names to be deleted from the worksheet and require them to be manually added back in.

Additional Information/Follow-Up:

When interviewed by latent print management, the examiner stated that he changed the order of the item description; for example, he changed the name from "Item A" to "A, Item". He further stated that he did not realize that editing the names would alter the worksheet. However, latent print management and JusticeTrax administrators have thoroughly trained and communicated to staff that JusticeTrax LIMS will remove individuals from a worksheet if the wording is revised in the electronic case record. This issue was not identified by the technical reviewer during the review process since the change was made after the technical review process started, the analyst did not complete a self-review to document the changes, and the technical reviewer did not list it as defect to be corrected, and therefore did not review these fields while reviewing her requested changes. The technical review/administrative review dynamic user interface (TR/AR DUI) was instituted in July 2019. The section discussed the TR/AR DUI including how to use for self-review and was provided a reference guide that was created by the Lean Six Sigma TR/AR project team. In November 2019, an examiner conducting a technical review of a case completed by this analyst approached the technical leader and informed her that information was changed on the worksheet between when the initial rejection occurred and when it was reassigned to the technical reviewer that were not listed as defects to be corrected. In this instance the analyst did not complete a self-review to document the changes. The technical leader had an in-depth conversation and discussion about why the self-review must be used and the quality manual clauses that require it.



Actions Taken:

Although the former examiner generated and reported consensus results, the proficiency test was not ultimately able to be determined to be satisfactory because of this unresolved quality incident.

Summary of Root Cause Analysis:

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

During investigation into this issue and another nonconformance involving this examiner, the root cause was determined to be personnel-related. This issue was referred to the Human Resources department in accordance with HFSC policy. Please refer to Quality Report 2020-033 for additional information.

Section Manager: Rebecca Green

Date: 04/27/21

Division Director: Amy Castillo

Date: 04/29/21

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

Technical Leader: Jeniffer Molina

Date: 4/27/2021

CODIS Administrator: N/A

Date: N/A

Quality Director: Erika Ziemak

Date Closed: 04/30/21