



**Quality Division Use Only**

|                        |            |                   |             |
|------------------------|------------|-------------------|-------------|
| Quality Tracking #:    | 2020-IA-02 | Classification:   | Incident    |
| Non-Conformance Level: | N/A        | Section:          | Crime Scene |
| Date of Discovery:     | 04/22/20   | Date of Incident: | 08/16/19    |

|   |                                       |
|---|---------------------------------------|
| Forensic Case Number(s), if applicable: | Agency Case Number(s), if applicable: |
| 2019-13754                              | 105526319                             |

**Description of Non-conformance:**

During the 2020 Crime Scene Unit (CSU) internal audit, the audit team discovered that a CSU Supervisor had information in their report that was not documented in their case notes.

In addition, the same supervisor reviewed the lead CSI's report. The supervisor had the lead CSI revise their report wording; however, the revised wording did not match what was documented in the CSI's case notes.

**Additional Information/Follow-Up:**

This incident was discovered during the case file review portion of the 2020 internal audit and involved information in reports not being supported by case notes. This incident (2020-IA-02) is being addressed independently due to the CSU personnel involved no longer being employed with HFSC. The internal audit discovered other instances where information in reports was not supported by case notes; however, CSIs still employed with HFSC were able to correct those case records. Please see Quality Tracking Number 2020-IA-09 regarding those instances.

**Actions Taken:**

The CSU SOP was revised to include clarification for CSIs regarding the roles and responsibilities of crime scene processing duties, including that it is the responsibility of the lead CSI to communicate with the requesting agency. Additionally, language was added requiring CSIs document all information shared with them by the officers and/or investigators. These changes were made to the CSU SOP revision issued on July 8, 2020. This language was maintained through additional revisions of the CSU SOP.

The original reports issued by lead CSI and her supervisor were amended to remove information that was not supported by the case notes.



**Summary of Root Cause Analysis:**

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

N/A

**Section Manager:** Domingo Villarreal

**Date:** 12/23/20

**Division Director:** Jerry Pena

**Date:** 12/29/20

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:** 12/29/20