



Quality Division Use Only

Quality Tracking #:	2021-060	Classification:	Corrective Action
Non-Conformance Level:	Class II	Section:	Crime Scene
Date of Discovery:	08/22/21	Date of Incident:	04/21/21

Forensic Case Number(s), if applicable:	Agency Case Number(s), if applicable:
2021-24011	053022821
2021-27118	081261321
2021-23950	052518621

Description of Non-conformance:
A former crime scene investigator (CSI) took measurements at three scenes that were not in accordance with the approved measuring techniques specified in the Crime Scene Unit's (CSU's) standard operating procedure (SOP).

Additional Information/Follow-Up:
A CSU supervisor discovered this nonconformance while technically reviewing the CSI's case records. The supervisor had been reviewing this CSI's work for a period of time prior to discovering this issue and had not previously observed this type of error by this CSI. The supervisor then reviewed all pending cases where the CSI had performed sketching and measuring tasks on scene. Three cases were identified in which the CSI did not use approved measuring techniques.

CSI's create final diagrams based on the sketches and measurements obtained on scene. The final diagrams are provided to the requesting agency as part of the Crime Scene report. The Houston Police Department was the requesting agency for all three cases associated with this nonconformance.

Summary of Root Cause Analysis:
Note: Incidents are documented for tracking purposes and trend analysis. Root Cause Analysis is not required for incidents.
The root cause of this nonconformance cannot be determined because the CSI has departed HFSC and is not available to interview. Because diagrams are technically reviewed prior to issuance CSU management feels confident this issue is isolated to this CSI and the three identified cases.



Actions Taken:

The CSI departed HFSC prior to discovery of this nonconformance. The CSI's supervisor reviewed all the CSI's pending cases and identified two additional instances where the CSI did not utilize the correct measuring technique on scene. The supervisor contacted the requesting investigators to make them aware of the nonconformance and to ask them if they wanted the final diagram even though it was associated with a nonconformance. Two of the three responded that they would like the final diagram. The third did not respond. The decision was made by the CSU and the Quality Division to provide all three the final diagrams.

The report for case 2021-23950 (request 0002) had been authored by the CSI but had not yet been released (reports are not released until the review process is complete). Prior to releasing the report, the supervisor added a note to the final diagram indicating which measurements were taken utilizing unapproved measuring techniques.

The report for case 2021-24011 (request 0002) had been authored by the CSI but had not yet been released (reports are not released until the review process is complete). Prior to releasing the report, the supervisor added a note to the final diagram indicating which measurements were taken utilizing unapproved measuring techniques. However, after the supervisor released the report, he realized that the second page of the diagram had not been attached. The supervisor issued an amended report.

The report for case 2021-27118 (request 0002) had not yet been authored. The supervisor authored the report on behalf of the CSI and added a note to the final diagram indicating which measurements were taken utilizing unapproved measuring techniques.

Section Manager: Carina Haynes

Date: 01/04/22

Division Director: Carina Haynes

Date: 01/04/22

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: 01/05/22