



**Quality Division Use Only**

Quality Tracking #:	2022-069	Classification:	Incident
Non-Conformance Level:	N/A	Section:	Crime Scene
Date of Discovery:	11/09/22	Date of Incident:	05/26/22

Forensic Case Number(s), if applicable:	Agency Case Number(s), if applicable:
2022-05582	054596422
2022-06074	065610322
2022-07451	078329322
2022-07869	077716522
2022-14203	155945822

**Description of Non-conformance:**  
 Latent Print analysts observed that latent lift cards (cards) submitted by CSU were not completed as required by Crime Scene Unit SOP. The lift cards only contained information regarding the location lifted with a diagram and were missing other information, including the case number on each card.

**Additional Information/Follow-Up:**

In one instance, the case number was not written on any of the lift cards. The lift cards were secure in an evidence tape sealed container with the case number written on it so the cards could be connected to the appropriate case.

In another instance, the case number was only missing from one card out of six. The lift cards were completed by a trainee and should have been reviewed by the CSU Field Training Officer (FTO) assigned to the trainee prior to submission. The information on five of the cards was correct and the lift cards were secured in an evidence tape sealed container with the case number written on the outside so all of the cards could be connected to the appropriate case.

In the remaining instances, the case number was written on the first lift card but was missing from the remaining lift cards. The lift cards in these instances were secured in evidence tape sealed containers with the case number written on the outside so all of the cards could be connected to the appropriate cases. Latent Prints initially held the cards in the evidence vault at HFSC and notified CSU Management so CSIs could correct the cards. It was noted that when latent lift cards are received from agencies, they do not typically have the same information on them as required by the CSU SOP. Due to this, latent print analysts may overlook that a card was collected by an agency or a CSI.

After discussion with the Latent Print Management and CSU Management, it was determined that the risk associated to a case without the case number listed on each card was low and the burden on the Latent Print Unit to note and hold the cards was high. Therefore, if the Latent Print Unit encounters this again, they will proceed with their own process without having CSU correct the card. The low risk is due to the fact that the cards are



received in sealed envelopes and that the CSI only works one case at a time and would not have multiple open envelopes at the same time, thus the opportunity for a latent lift card associated to a different case ending up in the wrong package is low. The Latent Print Unit marks the lift cards with the forensic case number when they are scanned in for latent print comparison so having a CSI go in and also mark the case number just to meet the SOP requirements was tedious for both sections.

**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

**Actions Taken:**

The cards listed in the cases for this workflow were corrected per the SOP requirements.

The individuals involved met with CSU Management and the procedure was explained. The CSIs read the SOP and acknowledged the intent of the procedure. Spot checks were performed on the CSI's case work and all latent lift cards reviewed were filled out according to the SOP.

The CSU SOP was updated on January 13, 2023, to clarify the requirements of the information that must be present on each latent lift card. This information was presented to the Crime Scene Unit. While tedious, the requirements are not changing because Crime Scene Unit Management believes it is a good practice that allows for the identification of a single latent lift card to be identified to a case in any circumstance.

Section Manager: Carina Haynes

Date: 08/07/23

Division Director: Carina Haynes

Date: 08/07/23

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

Technical Leader: Nicole Teele

Date: 08/01/23

CODIS Administrator: N/A

Date: N/A

Quality Director: Jackeline Moral

Date Closed: 08/08/23