



Quality Tracking #:	2024-IA-02	Classification:	Incident
Risk Level:	Low	Section:	Crime Scene
Date of Discovery:	04/05/24	Date of Incident:	06/30/23

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

Description of Nonconformance:
During the internal audit, it was noted that some of the equipment was not checked according to the specified timeframes as required per the Crime Scene SOP.

Additional Information:
The Crime Scene Unit (CSU) has a procedure, as required in ISO/IEC 17025 clause 6.4.3, for planned maintenance of equipment in order to ensure proper functioning and to prevent contamination or deterioration. The CSU Standard Operating Procedure (SOP) lists various timeframes and criteria for performance checks to occur for all of the equipment within the unit except video cameras. During the internal audit, it was noted that some of the equipment was not checked according to the specified timeframes listed in the CSU SOP. Specifically:

- Mirrorless Cameras were not checked in September 2023.
- Metal Detectors were not checked in June 2023 or February 2024.
- Laser Measures were not checked in June 2023 and some serial numbers were not noted as checked in other months.
- Rolly Wheels were not checked in June 2023 or February 2024.
- Drying Cabinets were checked in the month of November 2023 and December 2023 but did not have documentation entered.
- FAROs were checked in November 2023 and December 2023 but did not have documentation entered.
- ALSs were checked in November 2023 and December 2023 but did not have documentation entered.

The mirrorless camera verification was finalized at the end of August 2023 and all mirrorless cameras were performance checked prior to being distributed. Mirrorless cameras were not distributed to Crime Scene Investigators (CSI) until September 2023. While the month of September performance checks were missed, the October performance checks passed indicating that there was no risk due to the previous missed check.

In June 2023, metal detectors, laser measures, and roly wheels checks were missed due to the departure of a supervisor from the section. The task was not communicated nor reassigned to another supervisor for the month. In February 2024, the checks were overlooked.



Metal detectors are performance checked prior to each use on scene in addition to the monthly performance check thus no risk was added to any casework as a result of the missed monthly check. The monthly checks are performed to limit the risk of a CSI arriving at a scene with equipment that does not function and having to wait for a replacement.

All laser measures and roly wheels passed the monthly performance checks in the month preceding and following the missed checks. The risk to casework is low since the measurements taken in CSU are approximate and used to provide the stakeholder with a general overview and layout of the scene. No uncertainty of measurement is performed in CSU. The monthly checks of these equipment items are also to limit the risk of a CSI arriving at a scene with equipment that does not function.

New supervisors were added to the CSU management team in October 2023. The CSU Technical Lead (TL) performed the monthly performance checks of the drying cabinets, FAROs, and ALSs as part of training the new supervisors. The TL had documentation of when the training occurred and was able to add the information into the CSU Critical Equipment Workflow to document the monthly performance checks.

It was also identified that the CSU Critical Equipment Workflow contains a substantial amount of information. The workflow is bulky because of the variety of equipment that CSU uses. The CSU Critical Equipment Workflow Report is good for an annual check/review of the performance checks that were performed to meet requirements but is too cumbersome to use in real time each month for tracking that each check is performed.

Summary of Root Cause Analysis:

N/A

Actions Taken:

The CSU TL created a tracking system to use each month to better identify when Critical Equipment Workflows are submitted. The tracking system will ensure, in real time, that all required monthly workflows are submitted and provides better organization of the data being collected by the workflow than the system report. This real time tracking will also allow for better monitoring of the reassignment of tasks with the addition or departure of personnel.



Houston Forensic Science Center
Nonconformance Report
Quality Division

Section Manager: Carina Haynes

Date: 08/30/24

Division Director: Carina Haynes

Date: 08/30/24

Technical Leader: Nicole Teele

Date: 08/19/2024

CODIS Administrator: N/A

Date: N/A

Quality Director: Jackeline Moral

Date Closed: 09/04/24