



TEXAS FORENSIC
SCIENCE COMMISSION

Justice Through Science

*1700 North Congress Ave., Suite 445
Austin, Texas 78701*

October 27, 2021

Via e-mail to pstout@houstonforensicscience.org

Peter Stout, Ph.D.
President & CEO
Houston Forensic Science Center
500 Jefferson Street, 13th Floor
Houston, Texas 77002

Re: Texas Forensic Science Commission ("Commission") Self-Disclosure No. 21.53; Houston Forensic Science Center (Forensic Biology/DNA)

Dear Dr. Stout,

At its October 22, 2021 quarterly meeting, the Commission reviewed the referenced self-disclosure and voted to take no further action in the matter given the root cause analysis, case review and corrective actions taken by the laboratory.

Should the laboratory identify any material changes to the information provided in connection with this self-disclosure, please notify the Commission. Thank you and feel free to contact Commission staff with any questions you may have.

Sincerely,
Leigh M. Tomlin
Leigh M. Tomlin
Associate General Counsel

LMT/mka
cc: Erika Ziemak



Quality Division Use Only

Quality Tracking #:	2021-015	Classification:	Corrective Action
Non-Conformance Level:	Class II	Section:	Biology/DNA
Date of Discovery:	03/18/20	Date of Incident:	02/11/20

Forensic Case Number(s), if applicable:	Agency Case Number(s), if applicable:
2019-17822	142528419

Description of Non-conformance:

During the March 18, 2020 evidence audit conducted by the Client Services and Case Management (CS/CM) section, it was noted that item 7 (reference buccal swabs) from case 2019-17822 was not physically inside the vault, but the electronic chain of custody indicated item 7 was placed in the vault on February 11, 2020 by a forensic biology analyst. CS/CM notified the involved forensic biology analyst and the forensic biology manager of this discrepancy immediately after the discovery via email on March 18, 2020.

As part of their International Association for Property and Evidence (IAPE) accreditation, CS/CM performs monthly audits on all custody locations they transfer evidence and reference samples to and from. These monthly audits vary from a ten percent sampling to a full inventory depending on the custody location and/or number of items included in the monthly query. This audit program has been in place since January 2018 and also includes a full, annual inventory of these same custody locations.

Additional Information/Follow-Up:

In early April 2020, a forensic biology staff member conducted a thorough search of the HFSC biology evidence vault. Every shelf, box and bin was searched; however item 7 was not located. Soon after this search by the forensic biology staff member, a CS/CM supervisor conducted another thorough search of the HFSC biology evidence vault, again, with no success in locating item 7.

In mid-April 2020, after communicating with one another, the forensic biology staff member and the CS/CM supervisor both conducted another search of the HFSC biology evidence vault together. In addition to searching the same areas again, shelving was lifted, and workstations were searched in order to eliminate any area where item 7 may have inadvertently fallen. Item 7 was not found.

The CS/CM supervisor and forensic biology staff member then spoke to the forensic biology manager to recommend that video footage be requested in order to potentially confirm item 7's transfer into the HFSC biology evidence vault and potentially determine its location.



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 causes for this corrective action were determined to be a lack of communication of the appropriate next steps to take to address the missing reference item as well as the forensic biology manager missing an email notification about the chain of custody discrepancy and not recalling a conversation about the missing reference item.

After the discovery of the missing reference item, it was unclear to the forensic biology analyst what steps needed to be taken and who was responsible for these actions. The forensic biology analyst had a conversation with CS/CM regarding the use of cameras to determine if video footage could be viewed to help locate the item. Both parties (CS/CM and the forensic biology analyst) thought this was the appropriate next step, but no actions were taken to request video footage. This was the result of a lack of role clarity with regard to CS/CM's obligations and the forensic biology section's obligations.

On March 18, 2020, CS/CM sent an email notifying the forensic biology manager about the missing reference item. The forensic biology manager missed the email and did not read it until months later. Upon interview with the quality director, the forensic biology manager researched the period of time in which the email was sent by CS/CM and realized she had been on vacation the week prior and was likely in the process of catching up since she had been out of the office. In addition, an HFSC all-staff email was sent out on the day prior notifying staff that all sections would begin operating on a rotating schedule beginning March 23, 2020 due to the COVID-19 pandemic. HFSC began limiting the number of staff members allowed on-site to the 500 Jefferson Street facility and all managers were tasked with creating/developing appropriate alternate work schedules for their respective sections.

Upon interview with the quality director the forensic biology manager stated she had no direct recollection of the in-person meeting with the forensic biology staff member and the CS/CM supervisor regarding the suggestion to request video footage.

Actions Taken:

In January 2021, CS/CM notified the forensic biology manager of their monthly evidence audit results and this notification included item 7 which had still not been addressed. This prompted the screening supervisor to then contact the security specialist and the information technology section to determine if any video footage could be extracted; however video footage was no longer available.

The forensic biology section then notified the quality division regarding the evidence audit discrepancy regarding item 7. The forensic biology section and the quality division determined the next step was to contact the Houston Police Department Property Room to ask for assistance in examining all evidence items that were returned the day when the missing reference item was scheduled to be returned to the property room. The property room agreed to escort and help in conducting the search for the missing item. In addition, the staff members of the property room conducted their own search for the missing reference item. Both of these searches proved to be unsuccessful in locating the item.

In March 2021 the technical leader contacted the Harris County District Attorney's Office and informed them of the missing reference item. The technical leader explained to the stakeholder that this incident did not affect the DNA analysis or conclusions made on the report, and that DNA extracts are available if reprocessing is needed. A record



of this communication is maintained in the case record. Item 7 was a suspect reference that was entered into CODIS and compared to three evidence items: 1.1.1.1, 1.2.1.1 and 3.1.1. There is strong support for the proposition that the suspect is not a contributor to the mixture of at least four contributors from item 1.1.1.1. There is very strong support for the proposition that the suspect is not a contributor to the mixture of at least four contributors from item 1.2.1.1. Lastly, the suspect was excluded as a contributor from the mixture of at least three contributors from item 3.1.1.

As of April 2021, as part of the root cause analysis, the quality division has been incorporated into CS/CM's monthly audit program. An updated spreadsheet is provided to the quality division for review on a monthly basis and the quality division is included on any emails to staff regarding chain of custody discrepancies that require remediation. The inclusion of the quality division positions them to ensure follow up occurs so that all discrepancies are remediated in a timely fashion.

Also, as part of the root cause analysis, clear responsibility on resolving chain of custody discrepancies was given to the forensic biology screening supervisor. On April 28, 2021, during a section meeting, the screening analysts were informed that the screening supervisor will now be the main point of contact for chain of custody discrepancies and that analysts must notify her immediately when a discrepancy occurs.

In July 2021, to ensure proper prioritization, the forensic biology manager adjusted the settings in her email account to sort all non-essential/automatic emails that she routinely receives. While in discussion with the quality director the manager acknowledged that, with the sheer volume of non-essential emails that she receives, it can be difficult to identify and prioritize important emails. The settings adjustment that she made should help by automatically placing non-essential emails in a designated folder thus minimizing the number of emails in her inbox overall.

On September 20, 2021, the CS/CM supervisor outlined CS/CM's audit program in a meeting with management representation from all technical sections. The meeting was used to discuss role clarity as it applies to any evidence chain of custody discrepancies that are discovered by CS/CM and solidified that it was the technical section management's responsibility to investigate and resolve these discrepancies.

Section Manager: Courtney Head

Date: 08/18/21

Division Director: Amy Castillo

Date: 08/24/21

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

Technical Leader: Cheron Maxwell

Date: 08/10/2021

CODIS Administrator: Jennifer Clay

Date: 08/18/2021

Quality Director: Erika Ziemak

Date Closed: 09/23/21