

ASCLD/LAB-*International*

Final Assessment Report

**San Diego County Sheriff's Department
Regional Crime Laboratory
San Diego, California**

PART 1 – GENERAL INFORMATION

INTRODUCTION

This is the ASCLD/LAB-*International Final Assessment Report* of the San Diego County Sheriff's Department - Regional Crime Laboratory. The on-site assessment was conducted during the period December 3-6, 2013.

The ASCLD/LAB-*International* assessment team consisted of the following members:

Lead Assessor:

Rodney H. Andrus - Staff Assessor, ASCLD/LAB / Fresno, California

Technical Assessors:

Bongi Bishop - Tucson Police Department / Tucson, Arizona
Eileen Davis Clawson - Fire Technology Consultants, LLC / Fredericksburg, Virginia
Roshale Gaytmenn - Florida Department of Law Enforcement / Ft. Myers, Florida
Amy Jeanguenat - The Bode Technology Group, Inc. / Lorton, Virginia
David Peterson - Minnesota BCA Forensic Science Service / St. Paul, Minnesota
Angela Pratt - United States Postal Service Forensic Laboratory / Dulles, Virginia
Bradford Putnam - Oregon State Police, Springfield, Oregon
Douglas Rhode - Lake County Crime Laboratory / Painesville, Ohio
Abby Schwaderer - Ohio Bureau of Criminal Investigation / London, Ohio
Kathleen Storer - United States Secret Service / Arlington, Virginia

OBJECTIVES OF ASSESSMENT

The assessment was conducted to assess the management and technical operations of the laboratory in accordance with the accreditation requirements specified below, and to report the findings of the assessment in a fair and impartial manner to the laboratory and to the ASCLD/LAB Board of Directors for the purpose of accreditation in accordance with the scope of the assessment.

ACCREDITATION REQUIREMENTS

The assessment was performed using the requirements of *ISO/IEC 17025:2005*; the *ASCLD/LAB-International Supplemental Requirements for Testing Laboratories (2011)*; the *FBI Quality Assurance Standards Audit for Forensic DNA Testing Laboratories (2011)* and the laboratory's own documented management system.

SCOPE OF ASSESSMENT

The laboratory is seeking accreditation in and was assessed in the following areas:

Field	
Forensic Science Testing	
Discipline(s)	Categories of Testing
Drug Chemistry	Controlled Substances General Chemical Testing
Toxicology	Human Performance Forensic Toxicology (blood/urine alcohol only)
Biology	DNA-Nuclear Body Fluid Identification
Trace Evidence	Paint Fiber and Textiles Hair Explosives Fire Debris General Physical and Chemical Analysis
Firearms/Toolmarks	Firearms
Latent Prints	Latent Print Processing Latent Print Comparisons
Questioned Documents	Document Examination

Crime Scene	Crime Scene Investigation Crime Scene Reconstruction Bloodstain Pattern Analysis
Other	Impression Evidence (Considered a part of the Trace Evidence discipline) Serial Number Restoration (Considered a part of the Firearms/Toolmarks discipline)

LABORATORY OVERVIEW

The San Diego County Sheriff's Department - Regional Crime Laboratory is a local government laboratory that provides services and assistance to law enforcement agencies in and around San Diego County, California. The laboratory is located at 5255 Mt. Etna Drive, San Diego, California. Michael Grubb is the laboratory director and, at the time of the assessment, the laboratory had a staff of 53 proficiency tested personnel and 24 non-proficiency tested personnel.

ASSESSMENT TEAM FINDINGS

The laboratory was found to be in conformance with all ASCLD/LAB-*International* accreditation requirements except for those requirements cited in Part 2 of this report, or the assessment team found that the requirement was not applicable to the operations of this laboratory.

Each requirement for which the assessment team found the laboratory to not be in total conformance was initially marked "No." For each requirement marked "No," the laboratory was provided with a Corrective Action Request (CAR) following the on-site assessment. A copy of each CAR provided to the laboratory is included in Part 2 of this report.

As reflected on the CAR documents in Part 2 of this report, the laboratory has now completed appropriate corrective actions for all CARs issued.

COMMENTS

Comments include recommendations, suggestions, or other observations documented by the assessment team that are not supported by sufficient objective evidence of non-compliance. The laboratory is not required to respond to comments. The following comment(s) were documented by the assessment team during the on-site assessment:

- None

OTHER CONSIDERATIONS

Other Considerations may include any topic, issue or information of which the ASCLD/LAB Board of Directors needs to be aware in order to make a more fully informed decision regarding the accreditation decision.

In accordance with ASCLD/LAB policy and procedures the following information was provided by the ASCLD/LAB headquarters office immediately prior to the accreditation decision:

Proficiency Testing

On-site the assessment team found the laboratory to be in conformance with all applicable proficiency testing requirements. A follow-up check with the ASCLD/LAB Proficiency Program Manager immediately prior to this final report, reveals that the laboratory is currently in conformance with all applicable, ASCLD/LAB external proficiency testing requirements.

Complaints against the Laboratory

No pending complaints known to ASCLD/LAB

REPORT AUTHORIZATION

This *Final Assessment Report* of the San Diego County Sheriff's Department - Regional Crime Laboratory is issued by Lead Assessor Rodney Andrus. As Lead Assessor, Mr. Andrus has reviewed the contents of this report and affirms that the report represents a true and accurate accounting of the findings of the ASCLD/LAB-*International* assessment team.

Lead Assessor Rodney H. Andrus


Signature

April 15, 2014
Date

DISTRIBUTION LIST

Michael Grubb, Laboratory Director
Anthony DeMaria, Quality Manager
John K. Neuner, ASCLD/LAB Executive Director
Pamela L. Bordner, ASCLD/LAB Accreditation Program Manager
Troy Hamlin, ASCLD/LAB Accreditation Program Manager

PART 2 – CORRECTIVE ACTION REQUESTS

CORRECTIVE ACTION REQUEST (CAR) Number 1 of 8

Laboratory Name: San Diego County Sheriff's Department - Regional Crime Laboratory
 Laboratory Location: San Diego, CA
 Laboratory Contact Name: Anthony DeMaria, Quality Manager
 Contact Number: 858-467-4610
 Summation Conference Date: December 6, 2013

FINDING

Clause No.:	5.9.4.1 6.8	Source:	2011 Supplemental-Testing Laboratory Quality Manual	Level:	1
Requirement:	<p>5.9.4.1 - At a minimum, the technical review shall include a review of all examination records and the test report to ensure:</p> <ul style="list-style-type: none"> • Conformance with proper technical procedures (test methods) and applicable laboratory policies and procedures; • Accuracy of test reports and that the data supports the results and/or conclusions in the test report; • Associations are properly qualified in the test report; and • The test report contains all required information. <p>6.8 - <u>Technical Review</u> At a minimum, the technical review shall ensure the following:</p> <ul style="list-style-type: none"> • Technical procedures (test methods) were followed correctly and comply with general scientific standards of acceptance. • The Laboratory Service Report is accurate and data contained in the case notes supports the report results and/or conclusions..... 				
Finding:	<p>A review of case records in the Crime Scene Investigation section, Trace Evidence section and Latent Print section revealed multiple instances where the technical reviews were not sufficiently thorough to detect errors in the reports.</p>				
Corrective Action Due By:	On or before June 23, 2014				

CORRECTIVE ACTION

Lab Response:	<p>The laboratory proposed the following corrective actions:</p> <ol style="list-style-type: none"> 1. Discuss and address issues with analysts who had report errors. 2. Discuss and address issues with technical reviewers who reviewed the reports that had errors. 3. Issue amended reports, where necessary. 4. Hold a general lab meeting to go over the technical review process as stated in the Quality Manual. 5. Revise the Trace Evidence Technical Procedure Manual to include low explosive identification.
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Supporting Documentation Provided by Laboratory:	<p>Copies of the following records were reviewed which verified conformance with the requirements:</p> <ol style="list-style-type: none">1. Completed corrective action worksheet documenting corrective action steps.2. General Lab Meeting Attendance Roster from lab wide meeting to cover Quality Manual technical review procedure.3. General Lab Meeting PowerPoint slides covering Quality Manual technical review procedure.4. Trace Evidence section communication covering technical procedure manual revisions regarding low explosives analysis.5. Trace Evidence section Technical Procedures Manual revisions addressing Low Explosives Analysis testing. <p>CSI Section Technical Reviews:</p> <ol style="list-style-type: none">6. CSI Section communication memo discussing technical review issues with the analyst(s) and technical reviewer(s).7. CSI amended report examples.8. CSI recent report examples. <p>Trace Evidence Technical Reviews:</p> <ol style="list-style-type: none">9. Trace Evidence Section communication memo discussing technical review issues with the analyst(s) and technical reviewer(s).10. Trace Evidence recent report examples. <p>Latent Print Technical Reviews:</p> <ol style="list-style-type: none">11. Latent Print Section communication memo discussing technical review issues with the analyst(s) and technical reviewer(s).12. Latent Print recent report and amended report examples.
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ACCEPTANCE

Was a revisit required? No Yes



Lead Assessor Signature

April 15, 2014

Date Accepted

CAR #2 of 8 was appealed and the appeal was sustained by the Board of Directors on February 28, 2014. Therefore, the CAR has been removed from this report. The remaining CARs have not been renumbered.

CORRECTIVE ACTION REQUEST (CAR) Number 3 of 8

Laboratory Name: San Diego County Sheriff's Department - Regional Crime Laboratory
 Laboratory Location: San Diego, CA
 Laboratory Contact Name: Anthony DeMaria, Quality Manager
 Summation Conference Date: December 6, 2013

FINDING

Clause No.:	4.13.2.5	Source:	2011 Supplemental-Testing	Level:	1
Requirement:	Records to support conclusions shall be such that in the absence of the analyst (however named), another competent reviewer could evaluate what was done and interpret the data.				
Finding:	Case record reviews for one Crime Scene Investigation analyst revealed that three of the eight cases provided did not contain sufficient records to support the reported conclusions. An example of the lack of records was a report that stated "One set of tracks had no visible tread details, but the tracks appear to be newly made, were deep in the dirt and shaped like an arc. The tracks are consistent with a vehicle traveling in a "fast" speed." There were no records in the examination record documenting what objective evidence was observed to confirm these conclusions.				
Corrective Action Due By:	On or before June 23, 2014				

CORRECTIVE ACTION

Lab Response:	<p>The laboratory proposed the following corrective actions:</p> <ol style="list-style-type: none"> 1. Discuss and address report issues with analyst. 2. Discuss and address report issues with technical reviewer. 3. Provide recently completed crime scene reports to ASCLD/LAB. Reports shall demonstrate that the conclusions are sufficiently supported by the case notes. 4. Hold a crime scene investigation meeting to go over the requirement that reported conclusions shall be sufficiently supported by the case notes. 5. Provide Bluestar refresher training to all on-call Criminalists. 6. Discuss tire impression conclusions with the trace evidence technical lead to determine if the reported conclusions would have been acceptable in a trace evidence report.
Supporting Documentation Provided by Laboratory:	<p>Copies of the following records were reviewed which verified conformance with the requirements:</p> <ol style="list-style-type: none"> 1. Completed corrective action worksheet documenting corrective action steps. 2. Email communication memo from CSI Supervising Criminalist regarding discussing technical report issues with the specific analyst and technical

	<p>reviewer, and removing CSI analyst from CSI casework.</p> <p>3. Email communication memo from CSI Supervising Criminalist regarding the removal of this Criminalist from CSI casework until an additional training program can be developed with the purpose of requalifying the analyst for casework.</p>
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ACCEPTANCE

Was a revisit required? No Yes



Lead Assessor Signature

April 15, 2014

Date Accepted

CORRECTIVE ACTION REQUEST (CAR) Number 4 of 8

Laboratory Name: San Diego County Sheriff's Department - Regional Crime Laboratory
 Laboratory Location: San Diego, CA
 Laboratory Contact Name: Anthony DeMaria, Quality Manager
 Summation Conference Date: December 6, 2013

FINDING

Clause No.:	4.4.2, 4.13.2.1, 4.13.2.2	Source:	ISO/IEC 17025:2005	Level:	1
Requirement:	<p>4.4.2 - Records of reviews, including any significant changes, shall be maintained. Records shall also be maintained of pertinent discussions with a customer relating to the customer's requirements or the results of the work during the period of execution of the contract.</p> <p>4.13.2.1 - The laboratory shall retain records of original observations, derived data and sufficient information to establish an audit trail, calibration records, staff records and a copy of each test report or calibration certificate issued, for a defined period. The records for each test or calibration shall contain sufficient information to facilitate, if possible, identification of factors affecting the uncertainty and to enable the test or calibration to be repeated under conditions as close as possible to the original. The records shall include the identity of personnel responsible for the sampling, performance of each test and/or calibration and checking of results.</p> <p>4.13.2.2 - Observations, data and calculations shall be recorded at the time they are made and shall be identifiable to the specific task.</p>				
Finding:	<p>In the Forensic Alcohol section calculations of intoxication levels at the time of the incident based on reported blood alcohol results are routinely made and verbally reported by analysts to customers. These calculations and subsequent communications are not always recorded at the time they are made and are not retained for any defined period of time and in some instances destroyed immediately after reporting.</p>				
Corrective Action Due By:	On or before June 23, 2014				

CORRECTIVE ACTION

Lab Response:	<p>The laboratory proposed the following corrective actions:</p> <ol style="list-style-type: none"> 1. Communication regarding the retrograde alcohol calculation at the time of driving will be notated in the case file. Determining the new procedure will be discussed in a Forensic Alcohol section meeting. 2. Update the Forensic Alcohol Technical Procedures Manual to require analysts to use a communication log. The log will include the retrograde alcohol calculations at the time of driving, but it is unnecessary to include all of the hypotheticals. Additional hypothetical calculations will not be included in the
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	<p>communication log.</p> <ol style="list-style-type: none"> 3. Hold a Forensic Alcohol meeting to implement the procedure for recording and retaining communication with the customer. 4. Hold a general lab meeting to discuss the requirement for communication logs. 5. Update the Quality Manual communication policy to better define all forms of communication with the customer. 6. Provide completed Forensic Alcohol case records to ASCLD/LAB. Records shall demonstrate that sufficient communication documentation has been included in the case file.
<p>Supporting Documentation Provided by Laboratory:</p>	<p>Copies of the following records were reviewed which verified conformance with the requirements:</p> <ol style="list-style-type: none"> 1. Completed corrective action worksheet documenting corrective action steps. 2. Forensic Alcohol meeting minutes 1/27/14 covering communications with the customer. 3. Forensic Alcohol meeting minutes 2/24/14 covering communications with the customer. 4. Forensic Alcohol section Technical Procedures Manual revisions addressing communications with the customer (pages 60-61). 5. General Lab Meeting Attendance Roster (Lab wide meeting to cover communications with the customer). 6. General Lab Meeting PowerPoint slides covering communications with the customer. 7. New Forensic Alcohol controlled form – Hypothetical Calculation Communication Log. 8. Examples of completed communication logs following new Forensic Alcohol communication procedure.

ACCEPTANCE

Was a revisit required? No Yes



 Lead Assessor Signature

April 15, 2014

 Date Accepted

CORRECTIVE ACTION REQUEST (CAR) Number 5 of 8

Laboratory Name: San Diego County Sheriff's Department - Regional Crime Laboratory
 Laboratory Location: San Diego, CA
 Laboratory Contact Name: Anthony DeMaria, Quality Manager
 Summation Conference Date: December 6, 2013

FINDING

Clause No.:	5.4.1	Source:	ISO/IEC 17025:2005	Level:	1
Requirement:	<p>The laboratory shall use appropriate methods and procedures for all tests and/or calibrations within its scope. These include sampling, handling, transport, storage and preparation of items to be tested and/or calibrated, and, where appropriate, an estimation of the measurement uncertainty as well as statistical techniques for analysis of test and/or calibration data.</p> <p>The laboratory shall have instructions on the use and operation of all relevant equipment, and on the handling and preparation of items for testing and/or calibration, or both, where the absence of such instructions could jeopardize the results of tests and/or calibrations. All instructions, standards, manuals and reference data relevant to the work of the laboratory shall be kept up to date and shall be made readily available to personnel...</p>				
Finding:	<p>In the Crime Scene Investigation section there were no documented procedures for the various processes involved in Bloodstain Pattern Analysis and Shooting Scene Analysis testing conducted at crime scenes or in the laboratory. The current approved versions of the procedures consist of a few bullet points with very brief descriptions of the elements to be observed.</p> <p>In the Trace Evidence section there were no documented procedures for testing conducted in shoe impression analyses to determine the possible type of shoe or for tape impression examinations.</p>				
Corrective Action Due By:	On or before June 23, 2014				


CORRECTIVE ACTION

Lab Response:	<p>The laboratory proposed the following corrective actions:</p> <ol style="list-style-type: none"> 1. Revise Crime Scene Technical Procedures Manual to include more detail on the various processes involved in bloodstain pattern analysis and shooting scene reconstruction analysis testing. This step was completed during the week of the on-site assessment. 2. Revise Trace Evidence Technical Procedures Manual to include the procedure for determining possible shoe type and tape impression examinations.
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Supporting Documentation Provided by Laboratory:	Copies of the following records were reviewed which verified conformance with the requirements: <ol style="list-style-type: none">1. Completed corrective action worksheet documenting corrective action steps.2. CSI section communication covering technical procedure manual revisions.3. CSI section Technical Procedures Manual revisions addressing Bloodstain Pattern Analysis and Shooting Scene Reconstruction Analysis testing.4. Trace Evidence section communication covering Technical Procedure Manual revisions.5. Trace Evidence section Technical Procedures Manual revisions addressing procedures for possible type of shoe, and tape impression examinations.
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ACCEPTANCE

Was a revisit required? No Yes



Lead Assessor Signature

April 15, 2014
Date Accepted

CORRECTIVE ACTION REQUEST (CAR) Number 6 of 8

Laboratory Name: San Diego County Sheriff's Department - Regional Crime Laboratory
 Laboratory Location: San Diego, CA
 Laboratory Contact Name: Anthony DeMaria, Quality Manager
 Summation Conference Date: December 6, 2013

FINDING


Clause No.:	5.8.1.1	Source:	2011 Supplemental-Testing	Level:	1
Requirement:	Forensic science laboratories shall be able to demonstrate that the evidence examined and reported on was that submitted to the laboratory. A "chain of custody" record, which reflects the receipt of evidence and all internal transfers, shall be maintained. Each person shall acknowledge by a signature, initials, equivalent identification, or secure electronic equivalent, at the time of transfer, when they take possession of evidence or transfer evidence to a storage location. The chain of custody shall include the date of receipt or transfer and a description or unique identifier of the evidence.				
Finding:	The Firearms section does not record the internal person to person transfers of evidence between analysts when verification examinations are to be conducted. Occasionally, verifications of casework (especially larger cases) can extend overnight or longer. In these instances there is no chain of custody of the transfer of these evidence items.				
Corrective Action Due By:	On or before June 23, 2014				

CORRECTIVE ACTION

Lab Response:	The laboratory proposed the following corrective actions: 1. Hold a firearms section meeting to discuss the Quality Manual evidence transfer procedure. 2. Provide completed firearm reports to ASCLD/LAB. Reports shall demonstrate that sufficient documentation of evidence transfers are included in the case record.
Supporting Documentation Provided by Laboratory:	Copies of the following records were reviewed which verified conformance with the requirements: 1. Completed corrective action worksheet documenting corrective action steps. 2. Firearms section meeting minutes covering evidence transfers during verifications. 3. Five case reports documenting evidence transfers during verification examinations.

ACCEPTANCE

Was a revisit required? No Yes



Lead Assessor Signature

April 15, 2014

Date Accepted

CORRECTIVE ACTION REQUEST (CAR) Number 7 of 8

Laboratory Name: San Diego County Sheriff's Department - Regional Crime Laboratory
 Laboratory Location: San Diego, CA
 Laboratory Contact Name: Anthony DeMaria, Quality Manager
 Summation Conference Date: December 6, 2013

FINDING

Clause No.:	5.9.2	Source:	ISO/IEC 17025:2005	Level:	1
Requirement:	Quality control data shall be analyzed and, where they are found to be outside pre-defined criteria, planned action shall be taken to correct the problem and to prevent incorrect results from being reported.				
Finding:	In the Forensic Alcohol section, pre-defined quality control parameters are not established in the technical manual for acceptable internal standard peak area (counts), although analysts are performing this check during review of gas chromatograph results. A record of this acceptance criteria check is not being documented.				
Corrective Action Due By:	On or before June 23, 2014				

CORRECTIVE ACTION

Lab Response:	<p>The laboratory proposed the following corrective actions:</p> <ol style="list-style-type: none"> 1. Revise the Forensic Alcohol Technical Procedures Manual to include predefined quality control parameters for acceptable internal standard peak areas (counts). This step was completed during the week of the on-site assessment. 2. Hold a Forensic Alcohol section meeting to go over the revised technical procedure for the acceptable quality control parameters for the internal standard peak area (counts).
Supporting Documentation Provided by Laboratory:	<p>Copies of the following records were reviewed which verified conformance with the requirements:</p> <ol style="list-style-type: none"> 1. Completed corrective action worksheet documenting corrective action steps. 2. Forensic Alcohol section communication covering the revised technical procedure for the acceptable quality control parameters for the internal standard peak area (counts). 3. Forensic Alcohol section Technical Procedures Manual revisions addressing predefined quality control parameters for acceptable internal standard peak area (counts). 4. Forensic alcohol gas chromatographic summary reports confirming implementation of the revised procedure.

ACCEPTANCE

Was a revisit required?

No

Yes



Lead Assessor Signature

April 15, 2014

Date Accepted

CORRECTIVE ACTION REQUEST (CAR) Number 8 of 8

Laboratory Name: San Diego County Sheriff's Department - Regional Crime Laboratory
 Laboratory Location: San Diego, CA
 Laboratory Contact Name: Anthony DeMaria, Quality Manager
 Summation Conference Date: December 6, 2013

FINDING

Clause No.:	5.10.1	Source:	ISO/IEC 17025:2005	Level:	2
Requirement:	The results of each test, calibration, or series of tests or calibrations carried out by the laboratory shall be reported accurately, clearly, unambiguously and objectively, and in accordance with any specific instructions in the test or calibration methods.				
Finding:	A review of the DNA section case records revealed multiple instances where forensic known and unknown sample profiles were entered into the LDIS database for the first time without generating a report that informs the customer of the entry into this database.				
Corrective Action Due By:	On or before the first surveillance visit.				

CORRECTIVE ACTION

Lab Response:	The laboratory proposed the following corrective actions: 1. Add the following or similar wording to Forensic Biology reports, "A profile (or profiles) from this evidence item will be entered into the appropriate level(s) of the Combined DNA Index System (CODIS)." 2. Notify the Forensic Biology section of the new report wording.
Supporting Documentation Provided by Laboratory:	Copies of the following records were reviewed which verified conformance with the requirements: 1. Completed corrective action worksheet documenting corrective action steps. 2. Forensic Biology communication memo covering the new report wording to section staff. 3. Case reports documenting the new report wording.

ACCEPTANCE

Was a revisit required? No Yes


 Lead Assessor Signature

April 15, 2015
 Date Accepted