

**ASCLD/LAB-*International***

**Surveillance Visit Report**

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

**INTRODUCTION**

This is the ASCLD/LAB-*International* Surveillance Visit Report of the San Diego County Sheriff's Department - Regional Crime Laboratory. The on-site surveillance visit was conducted November 16, 2015.

**Lead Surveillance Assessor:**

Patti Williams - ASCLD/LAB / DeSoto, Kansas

**OBJECTIVES**

To conduct limited scope conformance monitoring of the management and technical operations of the laboratory in accordance with the accreditation requirements specified below, and to report the findings in a fair and impartial manner to the laboratory and to ASCLD/LAB top management for the purpose of continuing ASCLD/LAB-*International* accreditation in accordance with the scope of accreditation.

**ACCREDITATION REQUIREMENTS**

The conformance monitoring was performed using the requirements of ISO/IEC 17025:2005, the ASCLD/LAB-*International* Supplemental Requirements for the Accreditation of Forensic Science Testing Laboratories (2011), applicable ASCLD/LAB-*International* policies and the laboratory's own documented management system.

**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 location of the laboratory has not changed since the last on-site visit. The current laboratory director is Michael Grubb.

**SCOPE OF ACCREDITATION**

No changes in the scope of accreditation have occurred since the last on-site visit.

## **REVIEW OF PERFORMANCE DECLARATION**

As a required conformance monitoring activity, the laboratory submitted an ASCLD/LAB-*International* Performance Declaration. In summary, a review of the Performance Declaration revealed the following:

- The report was submitted 7 months prior to the due date.
- A signed statement from the laboratory director declaring that the laboratory continues to maintain conformance with all accreditation requirements and the requirements of the laboratory's own management system was included.
- An organizational chart was provided, indicating all current administrative and technical management positions.
- The level of proficiency testing activity appears to meet accreditation requirements.
- A Statement of Qualifications for each individual employed since the last on-site visit was provided. No issues or concerns were noted.
- The laboratory provided information concerning one or more corrective actions which have occurred since the last on-site visit. The completed corrective actions to date appear to be adequate to address the topics.
- A summary report of the laboratory's most recent internal audit indicated that a complete audit of the laboratory's management system was conducted and documented.
- A summary report of the laboratory's most recent management review indicated that the laboratory conducted the review in accordance with accreditation requirements, considering all elements required in ISO/IEC 17025:2005.

## **REVIEW OF CORE ACCREDITATION RECORDS**

During the on-site surveillance visit, the following core accreditation records were sampled to ensure that required activities are occurring and that records of those activities are being maintained:

- Annual internal audit records
- Annual management review records
- Proficiency test records
- Competency test records
- Training records
- Court testimony monitoring records and feedback to analysts

A sampling of appropriate records revealed on-going conformance with accreditation requirements.

## REVIEW OF PREVIOUS CORRECTIVE ACTIONS

There was no ASCLD/LAB Corrective Action Request (CAR) pending review of on-going adherence to the corrective action.

## REVIEW OF ADDITIONAL ACCREDITATION REQUIREMENTS

During the on-site surveillance visit, objective evidence of conformance with additional accreditation requirements was sampled by conducting an audit trail on case records and witnessing testing activities. The laboratory demonstrated conformance with the requirements.

## COMMENTS

Comments include recommendations, suggestions, concerns, or other observations documented by the surveillance assessor that are not supported by sufficient objective evidence of non-conformance. The laboratory is not required to respond to comments. The following comment(s) were documented by the assessor:

- Internal Audit records of the Quality System should clearly specify that not only documents but also records are audited to demonstrate conformance with laboratory and accreditation requirements. Use of the Field Assessment Guide in Internal Audits is also a valuable record keeping tool.
- Due to the change in frequency of the external preventive maintenance, Section 12.1.1 of the Controlled Substances Technical Procedure Manual needs to be updated from “semiannually” to “annually.”

## OTHER CONSIDERATIONS

Other considerations may include any topic, issue or information of which ASCLD/LAB top management needs to be aware in order to make a more fully informed decision regarding the continuation of accreditation:

- None

## CONCLUSIONS

Based upon the sampling of objective evidence during this conformance monitoring activity, I conclude that the laboratory is operating in conformance with ISO/IEC 17025:2005 and the ASCLD/LAB-*International* Supplemental Requirements for the Accreditation of Forensic Science Testing Laboratories (2011); ensures the competence of personnel to perform work in accredited disciplines; and operates an effective management system in conformance with the accreditation requirements of the ASCLD/LAB-*International* program.

**REPORT AUTHORIZATION**

As the surveillance assessor, I affirm that this report represents a true and accurate accounting of the findings of the ASCLD/LAB-*International* conformance monitoring of the San Diego County Sheriff's Department - Regional Crime Laboratory.

**Lead Surveillance Assessor Patti Williams**



Signature

January 8, 2016

Date

---

**DISTRIBUTION LIST**

Michael Grubb, Laboratory Director  
Anthony DeMaria, Quality Manager  
ASCLD/LAB Office