



U.S. Department of Justice

Office of the Inspector General

San Francisco Regional Audit Office
90 7th Street, Suite 3-100
San Francisco, California 94103

May 17, 2019

MEMORANDUM FOR CHRISTOPHER WRAY
DIRECTOR
FEDERAL BUREAU OF INVESTIGATION

FROM: 
DAVID J. GASCHKE
REGIONAL AUDIT MANAGER

SUBJECT: Action Required on the Audit of Compliance with
Standards Governing Combined DNA Index System
Activities at the San Diego County Sheriff's Department
Regional Crime Laboratory, San Diego, California
Audit Report Number GR-90-18-004

Based on your response dated February 19, 2019, Recommendations 3, 4, 5, and 6 have been closed and Recommendations 1 and 2 remain resolved. The attachment summarizes the status and action necessary to close the remaining recommendations.

In accordance with Office of Management and Budget Circular A-50, Revised, and Department of Justice Order 2900.6A, titled "Audit Follow-Up and Resolution Policy," audit reports can be closed only after adequate documentation has been submitted showing that all agreed-upon actions have been completed. Therefore, please provide us within 180 days your response concerning specific actions completed or proposed on the open recommendations.

If you have any questions or require additional information, please contact me or Christine M. Hinton-Martinez, Assistant Regional Audit Manager, at (415) 355-2700.

Attachment

Christopher Wray
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**OFFICE OF THE INSPECTOR GENERAL
ANALYSIS AND SUMMARY OF ACTIONS
NECESSARY TO CLOSE THE REPORT**

Recommendations:

- 1. Resolved.** In its response, dated February 19, 2019, the Federal Bureau of Investigation (FBI) stated that the San Diego County Sheriff's Department (SDSD) Regional Crime Lab (Laboratory) moved to a new facility in August 2018. At that time, all personnel received new keycards for access and all keycards for its former facility were deactivated. Upon occupying the new facility, the Laboratory implemented a procedure to document, track, and review its distribution of keycards to ensure access to the facility is limited to the personnel designated by laboratory management. However, based on our review of the Laboratory's Securities Policies (3.2 and 3.2.1) from its Quality Assurance Manual, we found that the procedures did not address the timely deactivation of Laboratory keycards. As stated in our report, we found that the Laboratory did not deactivate the keycards for six of the Laboratory's former employees and contractors upon completion of their work at the Laboratory or separation from the SDSD. We also found one keycard had been returned timely but had not been deactivated in a timely manner. As a result, the keycard was used by another authorized employee to gain access to areas of the Laboratory. By failing to maintain an up-to-date list of individuals who had been provided keycards, the Laboratory was not retrieving and deactivating keycards of former personnel as required by both the Laboratory and NDIS requirements. This created a heightened risk of improper access to privacy information and evidence by unauthorized individuals, as well as compromising the chain of custody of the evidence. In addition, the security of the Laboratory was put at risk. This recommendation can be closed when the Laboratory provides evidence that it has implemented the required physical access controls to properly track and maintain its distribution of keycards to ensure that all former employees' and contractors' keycards have been retrieved and deactivated in a timely manner.
- 2. Resolved.** In its response, dated February 19, 2019, the FBI stated that it requires access to the Laboratory be controlled and limited in a manner to prevent access by unauthorized personnel. As stated in our report, we found that the Laboratory did not deactivate the keycards for six of the Laboratory's former employees and contractors upon completion of their work at the Laboratory or separation from the SDSD. In February 2018, the Laboratory deactivated the keycards for the six former employees and contractors. The Laboratory also completed a

review of its keycard distribution list, has confirmed that all individuals have appropriate access, and all former employees' and contractors' keycards have been deactivated. This recommendation can be closed when the Laboratory provides evidence that it has reviewed its keycard distribution list to confirm that all individuals have appropriate access and that all former employees' and contractors' keycards have been deactivated.

- 3. Closed.** In its response, dated February 19, 2019, the FBI stated that it requires that the Laboratory follow procedures to ensure the privacy of DNA records and data. During our site visit, while taking a tour of the Laboratory facility, we observed that at least one, if not more, of the Laboratory's CODIS specimen reports was left in an unsecured mailbox in the main hallway of the Laboratory that was accessible to all of the Laboratory's employees and visitors, many of whom may not have a need to access such a report. The Laboratory has discontinued the use of its mailbox system for case files and all case files are now required to be hand delivered to either the individual or left at the individual's workstation. No reports or other private information will be visible by unauthorized individuals. Based on our review of the Laboratory's updated Review Process policy (7.3) from its Forensic Biology Technical Procedures Manual, we consider this recommendation closed.
- 4. Closed.** In its response, dated February 19, 2019, the FBI stated that it requires the Laboratory to prevent access by unauthorized personnel. As stated in our report, we found that on both the Laboratory's 2016 external review and 2017 internal review that the reviewers marked "yes" access to the laboratory was controlled and limited in a manner that prevents access by unauthorized personnel. However, we found that the Laboratory's keycard distribution list was outdated and inaccurate as we found former employees and contractors had active keycards far past the completion of their work or their separation date with the SDSD. The Laboratory has implemented a procedure to document, track, and review its distribution of keycards to ensure access to the facility is limited to the personnel designated by laboratory management. Specifically, the updated procedure includes an annual audit to verify that only authorized personnel have access to the facility. Based on our review of the Laboratory's updated Security policy (3.2.1) from its Quality Assurance Manual, we consider this recommendation closed.
- 5. Closed.** In its response, dated February 19, 2019, the FBI stated that it requires that the Laboratory have secure, controlled access areas for evidence storage and work product in progress to minimize loss, contamination, and deleterious change. During our facility walkthrough, we noted a package containing evidence on a DNA analyst's workspace, however the DNA analyst was not in the Laboratory. The Laboratory has implemented a procedure whereby its staff must utilize short term evidence storage when away for an extended period. Based on our review

of the Laboratory's updated preservation of evidence integrity policy from its Forensic Biology Technical Procedures Manual, we consider this recommendation closed.

- 6. Closed.** In its response, dated February 19, 2019, the FBI stated that it requires that information that supports eligibility must be accessible. As stated in our report, we found that the case files for 17 of the 100 sampled forensic DNA profiles lacked sufficient information for us to determine whether a profile was eligible for CODIS. The Laboratory has implemented a process to ensure that CODIS eligibility is documented in its case files. The policy requires that the justification for CODIS entry is suitably documented and in accordance with the FBI's guidelines and that the source of any justifying information not included in the case file (to include NetRMS entries and personal communications) be properly attributed and dated in the case file. If after supervisory review, the proper documentation is lacking in the case file, it will either be supplemented or the profile will be removed from CODIS. Based on our review of the Laboratory's updated CODIS Case Review policy from its Forensic Biology Technical Procedures Manual, we consider this recommendation closed.