2000 Annual Internal Audit of the

CLERICAL SERVICES UNIT

to determine compliance with ASCLD-LAB Standards & Criteria

February 2000

North Carolina State Bureau of Investigation
Crime Laboratory Division

Deputy Assistant Director John Neuner

AMS
6/21/10

North Carolina State Bureau of Investigation
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Annual Internal ASCLD-LAB Compliance Audit

Clerical Services Unit

Audit Team:

As required by ASCLD-LAB, an annual compliance audit was conducted of the Clerical Services Unit during February 2000.

The audit was conducted by Deputy Assistant Director John Neuner.

Compliance with ASCLD-LAB Standards and Criteria:

The audit revealed that sixty-four (64) of the one-hundred-thirty-seven (137) accreditation criteria are applicable to the operations of the Clerical Services Unit. More specifically, there are fourteen (14) Essential criteria, thirty-four (34) Important criteria, and sixteen (16) Desirable criteria that are applicable to the operations of this unit.

To meet accreditation standards, ASCLD-LAB requires that a laboratory meet 100% of the Essential criteria, 75% of the Important criteria, and 50% of the Desirable criteria. The final calculations for the Clerical Services Unit are:

Essential Standards	100% Compliance
Important Standards	97.06% Compliance
Desirable Standards	100% Compliance

The standard which the Clerical Services Unit failed to meet is:

1.3.3.2 Does the laboratory have an employee development program?
Important

Meeting this standard would require some sort of on-going effort by Supervisor Rodema Richardson to acquire training for section employees. Such training would need to be of a nature intended to enhance the work related skills and abilities of section employees.

Overall, the audit revealed an outstanding effort at on-going compliance with ASCLD-LAB standards and all employees of the unit are to be commended for their continuing efforts to comply with accreditation standards and criteria.

Other Observations/Comments/Recommendations:

- Supervisor Richardson should document any recognition of significant employee contributions to the success of the unit.

- Miscellaneous safety related documentation maintained by the Unit's safety officer was being kept in an area readily accessible to all employees. Supervisor Richardson should instruct the Safety Officer to maintain these documents in her immediate work area to prevent other employees from accessing out-dated or misleading safety information. Only current, approved safety manuals should be readily accessible to unit employees.

- Primarily with regard to employee safety and secondarily with regard to the protection of records, Supervisor Richardson should continue to pursue the construction or purchase of appropriate shelving in the "X-Ray" room. It is imperative to reduce the number and height of boxes of files currently stored in the main file room.

- Supervisor Richardson should attempt to schedule at least one annual training opportunity for every employee of the unit.

- All section manuals (QA, Training, etc.) should be completely reviewed and updated or modified as necessary at least once each year. The completion of the review should be documented in a memorandum to the Laboratory Quality Manager.

Employee Comments:

- The SBI needs to employ more people to work in the Crime Laboratory Division. The growth of the Bureau is not keeping pace with the population.

- All laboratory reports should be typed by the Clerical Services Unit.

- One employee was not sure where job descriptions are maintained.

- The salary and employee development opportunities need to be improved for the Clerical Services Unit.

- Having Evidence Control Unit spend time entering all case information up front is counter-productive, as it usually gets changed anyway.

North Carolina State Bureau of Investigation
Crime Laboratory Division

Clerical Services Unit
2000 Internal Audit

Annual Internal ASCLD-LAB Compliance Audit

Laboratory Management - Planning							
1.1.1.1	Does the laboratory have a written statement of its objectives?	Yes	X	No		N/A	
1.1.1.2	Do the objectives appear to be relevant to the needs of the community serviced by the laboratory?	Yes	X	No		N/A	
1.1.1.3	Does the laboratory staff understand and support the objectives?	Yes	X	No		N/A	
1.1.2.1	Does the laboratory or its parent agency have a formal written budget?	Yes	X	No		N/A	
1.1.2.2	Is the budget adequate to meet the written objectives?	Yes	X	No		N/A	
Do clearly written and well understood procedures exist for the following:							
1.1.2.3	Handling and preserving the integrity of evidence	Yes		No		N/A	X
1.1.2.4	Laboratory security	Yes	X	No		N/A	
1.1.2.5	Preparation, storage, security and disposition of case records or reports	Yes	X	No		N/A	
1.1.2.6	Control of materials and supplies	Yes	X	No		N/A	
1.1.2.7	Calibration of equipment and instruments	Yes		No		N/A	X
1.1.2.8	Inventory of equipment and instruments	Yes	X	No		N/A	
1.1.2.9	Duty hours	Yes	X	No		N/A	
1.1.2.10	Leave time	Yes	X	No		N/A	
1.1.2.11	Job requirements and descriptions	Yes	X	No		N/A	
1.1.2.12	Personnel evaluations and objectives	Yes	X	No		N/A	
1.1.2.13	Employee grievances	Yes	X	No		N/A	
1.1.2.14	Does the laboratory have and use a management information system?	Yes	X	No		N/A	

Laboratory Management - Organizing							
1.2.1.1	Does the organizational structure group the work and personnel in a manner that allows for efficiency of operation, taking into account the interpretation of various forensic disciplines?	Yes	X	No		N/A	
1.2.1.2	Has the laboratory director considered and taken appropriate action to correct any discrepancies with regard to numbers of personnel when grouping work and resources?	Yes	X	No		N/A	
1.2.2.1	Is the laboratory director's authority well defined?	Yes		No		N/A	X
1.2.2.2	Does the laboratory director have authority commensurate with responsibilities?	Yes		No		N/A	X
1.2.2.3	Is there sufficient delegation of authority?	Yes	X	No		N/A	
1.2.2.4	Is authority of supervisors commensurate with their responsibilities?	Yes	X	No		N/A	
1.2.2.5	Is each subordinate accountable to one and only one immediate supervisor?	Yes	X	No		N/A	
1.2.2.6	Are performance expectations established and are they understood by laboratory personnel?	Yes	X	No		N/A	
Laboratory Management - Directing							
1.3.1.1	Is there constructive discussion between supervisors and subordinates?	Yes	X	No		N/A	
1.3.1.2	Do supervisors carefully and objectively review laboratory activities and personnel?	Yes	X	No		N/A	
1.3.1.3	Do the supervisory techniques encourage creative, objective thinking and recognize meritorious performance?	Yes	X	No		N/A	
1.3.2.1	Do clear vertical, horizontal and diagonal channels of communication exist within and external to the laboratory?	Yes	X	No		N/A	
1.3.2.2	Are vertical channels of communication used for administrative functions?	Yes	X	No		N/A	
1.3.2.3	Are staff meetings held on a regular basis?	Yes	X	No		N/A	
1.3.3.1	Does the laboratory have and use a documented training program in each functional area for employees who are new, untrained or in need of remedial training?	Yes	X	No		N/A	
1.3.3.2	Does the laboratory have an employee development program?	Yes		No	X	N/A	
1.3.3.3	Does the forensic library contain current books, journals, and other literature dealing with each functional area?	Yes		No		N/A	X

1.3.3.4	Does a system exist to encourage each examiner to review appropriate new literature?	Yes		No		N/A	X
Laboratory Management - Controlling							
1.4.1.1	Does the laboratory have a written or secure electronic chain of custody record with all necessary data which provides for complete tracking of all evidence?	Yes		No		N/A	X
1.4.1.2	Is all evidence marked for identification?	Yes		No		N/A	X
1.4.1.3	Is evidence stored under proper seal?	Yes		No		N/A	X
1.4.1.4	Is evidence protected from loss, cross transfer, contamination and/or deleterious changes?	Yes		No		N/A	X
1.4.1.5	Is there a secure area for overnight and/or long-term storage of evidence?	Yes		No		N/A	X
1.4.2.1	Does the laboratory have a quality manual?	Yes	X	No		N/A	
1.4.2.2	Is an individual designated as the quality manager?	Yes	X	No		N/A	
1.4.2.3	Are audits of the management operations and disciplines of the laboratory completed and documented annually?	Yes	X	No		N/A	
1.4.2.4	Does the laboratory conduct and document an annual review of its quality system?	Yes	X	No		N/A	
1.4.2.5	Are the procedures used generally accepted in the field or supported by data gathered and recorded in a scientific manner?	Yes		No		N/A	X
1.4.2.6	Are new technical procedures scientifically validated before being used in casework and is the validation documentation available for review?	Yes		No		N/A	X
1.4.2.7	Are the technical procedures used by the laboratory documented and are the documents available to laboratory personnel for review?	Yes		No		N/A	X
1.4.2.8	Are appropriate controls and standards specified in the procedures and are they used and documented in the case record to ensure the validity of examination results?	Yes		No		N/A	X
1.4.2.9	Is the quality of the standard samples and reagents adequate for the procedure used?	Yes		No		N/A	X
1.4.2.10	Does the laboratory routinely check the reliability of its reagents?	Yes		No		N/A	X
1.4.2.11	Are the instruments/equipment adequate for the procedures used?	Yes		No		N/A	X
1.4.2.12	Are the instruments/equipment in proper working order?	Yes	X	No		N/A	
1.4.2.13	Are the instruments/equipment properly calibrated?	Yes		No		N/A	X

1.4.2.14	Do the examiners generate and does the laboratory maintain, in a case record, all the notes, worksheets, photographs, spectra, printouts, charts and other data or records used by examiners to support their conclusions?	Yes		No		N/A	X
1.4.2.15	Does the laboratory maintain case related administrative documentation generated and received, in a retrievable form?	Yes	X	No		N/A	
1.4.2.16	Does the laboratory have, use and document a system of peer review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?	Yes		No		N/A	X
1.4.2.17	Does the laboratory conduct and document administrative reviews of all reports issued?	Yes	X	No		N/A	
1.4.2.18	Does the laboratory monitor the testimony of each examiner at least annually and is the examiner given feedback from the evaluation?	Yes		No		N/A	X
1.4.2.19	If the laboratory has an indication of a significant technical problem, is there a procedure in writing and in use whereby the laboratory initiates a review and takes any corrective action required?	Yes		No		N/A	X
1.4.3.1	Does the laboratory have a documented program of proficiency testing?	Yes		No		N/A	X
1.4.3.2	Does the laboratory participate in proficiency testing programs conducted by approved test providers, where available?	Yes		No		N/A	X
1.4.3.3	Does each DNA examiner participate in at least one external proficiency test from an approved test provider?	Yes		No		N/A	X
1.4.3.4	Was each examiner proficiency tested annually in each subdiscipline in which casework was performed?	Yes		No		N/A	X
1.4.3.5	Does the laboratory conduct proficiency testing using reexamination or blind techniques?	Yes		No		N/A	X
Personnel - Management							
2.1.1	Does the laboratory director possess a degree in a natural science, criminalistics or in a closely related field, or is the laboratory director supported by scientific personnel of sufficient managerial rank and authority?	Yes		No		N/A	X
2.1.2	Does the laboratory director have at least five years of forensic science experience?	Yes		No		N/A	X
2.1.3	Does the laboratory director have some formal training in management?	Yes		No		N/A	X
2.1.4	Does the laboratory director have at least two years of managerial experience?	Yes		No		N/A	X

Personnel - Controlled Substances							
2.2.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.2.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.2.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.2.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Toxicology							
2.3.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.3.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.3.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.3.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Trace Evidence							
2.4.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.4.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.4.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.4.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Serology							
2.5.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.5.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X

2.5.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.5.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - DNA							
2.6.1	Does each examiner have education, training and experience consistent with those required by the DNA Advisory Board (DAB)?	Yes		No		N/A	X
2.6.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.6.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.6.4	Did each examiner successfully complete two proficiency tests annually?	Yes		No		N/A	X
Personnel - Firearms/Toolmarks							
2.7.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.7.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.7.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.7.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.7.5	Did each examiner successfully complete an annual proficiency test?						X
Personnel - Questioned Documents							
2.8.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.8.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.8.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.8.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.8.5	Did each examiner successfully complete an annual proficiency test?						X
Personnel - Latent Prints							

2.9.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.9.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.9.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.9.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.9.5	Did each examiner successfully complete an annual proficiency test?						X
Personnel - Technical Support							
2.10.1	Do technical support personnel meet the requirements of their job descriptions?	Yes		No		N/A	X
2.10.2	Are the job descriptions and the duties in agreement?	Yes		No		N/A	X
2.10.3	Did each member of the technical support staff successfully complete an appropriate competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.10.4	Did all technical support personnel successfully complete an appropriate proficiency test, annually?	Yes		No		N/A	X
Physical Plant							
3.1.1	Does each employee have adequate work space to accomplish assigned tasks?	Yes	X	No		N/A	
3.1.2	Is there sufficient space provided for storage of supplies, equipment and tools?	Yes	X	No		N/A	
3.1.3	Is there adequate space available for examiners for writing reports and other official communications?	Yes	X	No		N/A	
3.1.4	Is there adequate and appropriate space available for records, reference works and other necessary documents?	Yes	X	No		N/A	
3.1.5	Is adequate space available for each instrument to facilitate its operation?	Yes	X	No		N/A	
3.1.6	Are accessories stored near each instrument to facilitate its use and operation?	Yes	X	No		N/A	
Physical Plant - Design							
3.2.1	Does the physical design permit the efficient flow of evidence from the time of its acceptance until its proper disposal?	Yes		No		N/A	X

3.2.2.	Do the relative locations of functional areas facilitate the use of equipment and instruments?	Yes	X	No		N/A	
3.2.3	Is there adequate and proper lighting available for personnel to carry out assigned tasks?	Yes	X	No		N/A	
3.2.4	Is there adequate and proper plumbing and wiring available and accessible to carry out assigned tasks?	Yes	X	No		N/A	
3.2.5	Does the laboratory have proper general ventilation?	Yes	X	No		N/A	
3.2.6	Is the heating, cooling and humidity control in the laboratory adequate?	Yes	X	No		N/A	
Physical Plant - Security							
3.3.1	Is access to the operational area of the laboratory controllable and limited?	Yes	X	No		N/A	
3.3.2	Do all exterior entrance/exit points have adequate security control?	Yes	X	No		N/A	
3.3.3	Do all internal areas requiring limited/controlled access have a lock system?	Yes	X	No		N/A	
3.3.4	Is distribution of all keys, magnetic cards, etc., documented and is distribution limited to those individuals designated by the laboratory director to have access?	Yes	X	No		N/A	
3.3.5	Is the laboratory secured during vacant hours by means of an intrusion alarm or by security personnel?	Yes	X	No		N/A	
3.3.6	Does the laboratory have a fire detection system?	Yes	X	No		N/A	
Health and Safety							
3.4.1	Does the laboratory have an effective health and safety program documented in a manual?	Yes	X	No		N/A	
3.4.2	Is an individual designated as the health and safety manager?	Yes	X	No		N/A	
3.4.3	Is the health and safety program monitored regularly and reviewed annually to ensure that its requirements are being met?	Yes	X	No		N/A	
3.4.4	Does the laboratory have available and encourage the use of safety devices, particularly those required by its health and safety manual?	Yes	X	No		N/A	
3.4.5	Does the laboratory have proper equipment and material available for the handling of carcinogenic, toxic and/or dangerous material spills?	Yes		No		N/A	X
3.4.6	Does the laboratory have a safety shower and eye wash equipment in appropriate locations and in good working condition?	Yes		No		N/A	X

3.4.7	Are sufficient exhaust hoods available to maintain a safe work environment?	Yes		No		N/A	X
3.4.8	Are sufficient first-aid kits available and strategically located?	Yes	X	No		N/A	
3.4.9	Does the laboratory have an adequate number of personnel holding current certificates in first-aid training?	Yes	X	No		N/A	
3.4.10	Is appropriate space provided for safe storage of volatile, flammable, explosive and other hazardous materials?	Yes		No		N/A	X
3.4.11	Are the emergency exits from the laboratory adequate for safe exit in an emergency?	Yes	X	No		N/A	
3.4.12	Is there general cleanliness and apparent good-housekeeping in the laboratory?	Yes	X	No		N/A	

ASCLD-LAB Accreditation Grade Computation Sheet					CLERICAL SERVICES UNIT - Audit 2000					
Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
		Yes	No	N/A	Yes	No	N/A	Yes	No	N/A
1.1.1.1	Important				1	0	0			
1.1.1.2	Important				1	0	0			
1.1.1.3	Desirable							1	0	0
1.1.2.1	Important				1	0	0			
1.1.2.2	Important				1	0	0			
1.1.2.3	Essential	0	0	1						
1.1.2.4	Essential	1	0	0						
1.1.2.5	Essential	1	0	0						
1.1.2.6	Desirable							1	0	0
1.1.2.7	Essential	0	0	1						
1.1.2.8	Desirable							1	0	0
1.1.2.9	Important				1	0	0			
1.1.2.10	Important				1	0	0			
1.1.2.11	Desirable							1	0	0
1.1.2.12	Desirable							1	0	0
1.1.2.13	Desirable							1	0	0
1.1.2.14	Important				1	0	0			
1.2.1.1	Desirable							1	0	0
1.2.1.2	Desirable							1	0	0
1.2.2.1	Important				1	0	0			
1.2.2.2	Important				1	0	0			
1.2.2.3	Important				1	0	0			
1.2.2.4	Important				1	0	0			
1.2.2.5	Important				1	0	0			
1.2.2.6	Important				1	0	0			
1.3.1.1	Desirable							1	0	0
1.3.1.2	Important				1	0	0			
1.3.1.3	Desirable							1	0	0
1.3.2.1	Desirable							1	0	0
1.3.2.2	Desirable							1	0	0
1.3.2.3	Desirable							1	0	0
1.3.3.1	Essential	1	0	0						
1.3.3.2	Important				0	1	0			
1.3.3.3	Important				0	0	1			
1.3.3.4	Important				0	0	1			
1.4.1.1	Essential	0	0	1						
1.4.1.2	Essential	0	0	1						
1.4.1.3	Essential	0	0	1						
1.4.1.4	Essential	0	0	1						
1.4.1.5	Essential	0	0	1						
1.4.2.1	Essential	1	0	0						
1.4.2.2	Essential	1	0	0						
1.4.2.3	Essential	1	0	0						
1.4.2.4	Essential	1	0	0						
1.4.2.5	Essential	0	0	1						
1.4.2.6	Essential	0	0	1						
1.4.2.7	Essential	0	0	1						
1.4.2.8	Essential	0	0	1						
1.4.2.9	Essential	0	0	1						
1.4.2.10	Essential	0	0	1						
1.4.2.11	Important				0	0	1			
1.4.2.12	Important				1	0	0			
1.4.2.13	Essential	0	0	1						
1.4.2.14	Essential	0	0	1						
1.4.2.15	Essential	1	0	0						
1.4.2.16	Essential	0	0	1						
1.4.2.17	Essential	1	0	0						

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
1.4.2.18	Essential	0	0	1						
1.4.2.19	Essential	0	0	1						
1.4.3.1	Essential	0	0	1						
1.4.3.2	Essential	0	0	1						
1.4.3.3	Essential	0	0	1						
1.4.3.4	Important				0	0	1			
1.4.3.5	Important				0	0	1			
2.1.1	Important				0	0	1			
2.1.2	Desirable							0	0	1
2.1.3	Desirable							0	0	1
2.1.4	Desirable							0	0	1
2.2.1	Essential	0	0	1						
2.2.2	Essential	0	0	1						
2.2.3	Essential	0	0	1						
2.2.4	Essential	0	0	1						
2.3.1	Essential	0	0	1						
2.3.2	Essential	0	0	1						
2.3.3	Essential	0	0	1						
2.3.4	Essential	0	0	1						
2.4.1	Essential	0	0	1						
2.4.2	Essential	0	0	1						
2.4.3	Essential	0	0	1						
2.4.4	Essential	0	0	1						
2.5.1	Essential	0	0	1						
2.5.2	Essential	0	0	1						
2.5.3	Essential	0	0	1						
2.5.4	Essential	0	0	1						
2.6.1	Essential	0	0	1						
2.6.2	Essential	0	0	1						
2.6.3	Essential	0	0	1						
2.6.4	Essential	0	0	1						
2.7.1	Important				0	0	1			
2.7.2	Essential	0	0	1						
2.7.3	Essential	0	0	1						
2.7.4	Essential	0	0	1						
2.7.5	Essential	0	0	1						
2.8.1	Important				0	0	1			
2.8.2	Essential	0	0	1						
2.8.3	Essential	0	0	1						
2.8.4	Essential	0	0	1						
2.8.5	Essential	0	0	1						
2.9.1	Important				0	0	1			
2.9.2	Essential	0	0	1						
2.9.3	Essential	0	0	1						
2.9.4	Essential	0	0	1						
2.9.5	Essential	0	0	1						
2.10.1	Essential	0	0	1						
2.10.2	Essential	0	0	1						
2.10.3	Essential	0	0	1						
2.10.4	Essential	0	0	1						
3.1.1	Important				1	0	0			
3.1.2	Desirable							1	0	0
3.1.3	Important				1	0	0			
3.1.4	Important				1	0	0			
3.1.5	Important				1	0	0			
3.1.6	Desirable							0	0	1
3.2.1	Important				0	0	1			
3.2.2	Desirable							1	0	0
3.2.3	Important				1	0	0			
3.2.4	Important				1	0	0			

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
3.2.5	Important				1	0	0			
3.2.6	Important				1	0	0			
3.3.1	Essential	1	0	0						
3.3.2	Essential	1	0	0						
3.3.3	Essential	1	0	0						
3.3.4	Essential	1	0	0						
3.3.5	Essential	1	0	0						
3.3.6	Important				1	0	0			
3.4.1	Important				1	0	0			
3.4.2	Important				1	0	0			
3.4.3	Important				1	0	0			
3.4.4	Important				1	0	0			
3.4.5	Important				1	0	0			
3.4.6	Important				1	0	0			
3.4.7	Important				0	0	1			
3.4.8	Important				1	0	0			
3.4.9	Important				1	0	0			
3.4.10	Important				0	0	1			
3.4.11	Important				1	0	0			
3.4.12	Desirable							1	0	0
		14	**0**	**57**	**33**	**1**	**12**	**16**	**0**	**4**

Possible		Total Possible After Subtracting Non-Applicable	
Desirable	20	Desirable minus Non-Applicable "Ds"	16
Important	46	Important minus Non-Applicable "Is"	34
Essential	71	Essential minus Non-Applicable "Es"	14

64 Total Applicable Standards

	Total Number Possible	Total Yes	Total No
Essential	14	14	0
Important	34	33	1
Desirable	16	16	0

Calculations	
% Essential	100.00
% Important	97.06
% Desirable	100.00

Standards	
% Essential	100
% Important	75
% Desirable	50

NORTH CAROLINA
STATE BUREAU OF INVESTIGATION
DEPARTMENT OF JUSTICE

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MICHAEL F. EASLEY
ATTORNEY GENERAL

BRYAN E. BEATTY
DIRECTOR

July 18, 2000

TO: Deputy Assistant John Neuner

FROM: Supervisor Rodema Richardson

SUBJECT: 2000 Annual Internal Audit of Clerical Services Unit

In response to the audit of Clerical Services the standard which failed to be met was acquiring training for section employees. This has been very difficult to accomplish with the continued turnover of employees in the section. At the present time I am gathering information about sending both employees to a training class in Excel which will be held on October 26. This is a one day class and Excel is used to track our archive files. This is being taught through State Personnel Office.

The Safety Officer for the section has been instructed to remove all miscellaneous safety documentation and keep that information on her desk. Access to the approved safety manuals will continue to be kept in a central location for all employees.

I will work on purchasing shelving for the x-ray room to store files waiting to be picked up from archives. This has presented a big problem for us since they are almost a year behind schedule picking up files.

Again, with the turnover of employees in Clerical Services, is has been very difficult to accomplish reviewing and updating manuals used by the section as well as documenting significant employee contributions to the success of the unit. I have stayed so focus on trying to get the work out in a timely manner and eliminate the amount of phone calls received from District Attorney's Offices and Law Enforcement Agencies requesting copies of laboratory reports that they have not received, attention has not been given to special projects in the section that would allow employees to receive recognition for contributions given beyond their normal duties.

2000 Annual Internal Audit of the

DRUG CHEMISTRY SECTION

to determine compliance with ASCLD-LAB Standards & Criteria

May 2000

North Carolina State Bureau of Investigation
Crime Laboratory Division

Deputy Assistant Director John Neuner
Special Agent Mike Creasy
Special Agent David Freeman

ANS 6/21/10

North Carolina State Bureau of Investigation
Crime Laboratory Division

May 2000

Annual Internal ASCLD-LAB Compliance Audit

Drug Chemistry Section

Audit Team:

As required by ASCLD-LAB, an annual compliance audit was conducted of the Drug Chemistry Section during May 2000.

The audit was conducted by Deputy Assistant Director John Neuner, Special Agent Mike Creasy and Special Agent David Freeman.

Compliance with ASCLD-LAB Standards and Criteria:

The audit revealed that one-hundred-eight (108) of the one-hundred-thirty-seven (137) accreditation criteria are applicable to the operations of the Drug Chemistry Section. More specifically, there are fifty (50) Essential criteria, forty-one (41) Important criteria, and seventeen (17) Desirable criteria that are applicable to the operations of this section.

To meet accreditation standards, ASCLD-LAB requires that a laboratory meet 100% of the Essential criteria, 75% of the Important criteria, and 50% of the Desirable criteria. The final calculations for the Drug Chemistry Section are:

Essential Standards	100% Compliance
Important Standards	100% Compliance
Desirable Standards	100% Compliance

Overall, the audit revealed an outstanding effort at on-going compliance with ASCLD-LAB standards and all employees of the section are to be commended for their continuing efforts to comply with accreditation standards and criteria.

Other Observations/Comments/Recommendations:

Though not rising to the level of non-compliance with published ASCLD-LAB standards and criteria, the following observations, comments, and recommendations were gathered during the audit process:

- There is an inconsistent application of the policy to strike through unused portions of pre-formatted case note sheets. SAC Allcox should take appropriate action to clarify this policy for all members of the section.

- Employees of the Toxicology Unit requested that electronic signatures be removed from toxicology laboratory reports.

  Note: This request was reviewed with LIMS Administrator David Mishoe and, at this time, there is no way to remove signatures from reports without also removing the signatures from the chain-of-custody LIMS report. For that reason, electronic signatures cannot be removed from toxicology reports until additional funding becomes available to update LIMS.

- Employees of the Toxicology Unit inquired about the need/justification to seal/tape vacutainers that are stored in secure refrigerators.

  Note: The opinion of the Laboratory Quality Manager is that there is no need or justification for continuing the practice of taping tube racks which are stored in locked refrigerators accessible to only one analyst.

- One employee produced copies of a laboratory report which had been mailed out without the body of the report printed. After reviewing this event with LIMS Administrator David Mishoe, no explanation could be given for how/why this occurred. A notification will be forthcoming to all lab personnel to scan all completed reports to ensure that the whole report has been printed. Both the Evidence Control Unit and the Clerical Services Unit have been made aware of this event and have been instructed to do a final check of all mailed reports.

- The Toxicology Unit's practice of creating *"master files"* for a series of cases worked results in unrelated information being stored in whatever case becomes the master file. SAC Allcox was asked to review the practice and develop an alternate procedure for storing this information.

Employee Comments:

- Employees do feel *encouraged* to stay abreast of new literature, but many express that there is no time to do this with the current caseload

- A concern was expressed about Evidence Technicians signing for specific items on the SBI-5 when, in fact, they are receiving sealed packages and do not know for certain what is inside (e.g., signing for "Items 1, 2, 3 and 4" when what they received is one sealed envelope).

- Some employees are concerned about the quality of work being produced by the CCBI chemist recently trained by this agency. Their concern is that the quality of her work will become a public issue and reflect poorly on this agency.

- We need more chemists to reduce the case load per chemist in our laboratory. We are doing good work, but the constant caseload pressure has the real potential to result in errors. In addition, our backlog and personnel shortage is reducing our level of service to law enforcement agencies.

- We could reduce our caseload by not accepting certain types of cases. For example, we should refuse to analyze clearly marked prescription items, especially tablets, unless a request is received from the District Attorney. These items are almost always misdemeanor offenses and could rely on manufacturers' markings for identification.

Annual Internal ASCLD-LAB Compliance Audit

Laboratory Management - Planning							
1.1.1.1	Does the laboratory have a written statement of its objectives?	Yes	X	No		N/A	
1.1.1.2	Do the objectives appear to be relevant to the needs of the community serviced by the laboratory?	Yes	X	No		N/A	
1.1.1.3	Does the laboratory staff understand and support the objectives?	Yes	X	No		N/A	
1.1.2.1	Does the laboratory or its parent agency have a formal written budget?	Yes	X	No		N/A	
1.1.2.2	Is the budget adequate to meet the written objectives?	Yes	X	No		N/A	
Do clearly written and well understood procedures exist for the following:							
1.1.2.3	Handling and preserving the integrity of evidence	Yes	X	No		N/A	
1.1.2.4	Laboratory security	Yes	X	No		N/A	
1.1.2.5	Preparation, storage, security and disposition of case records or reports	Yes	X	No		N/A	
1.1.2.6	Control of materials and supplies	Yes	X	No		N/A	
1.1.2.7	Calibration of equipment and instruments	Yes	X	No		N/A	
1.1.2.8	Inventory of equipment and instruments	Yes	X	No		N/A	
1.1.2.9	Duty hours	Yes	X	No		N/A	
1.1.2.10	Leave time	Yes	X	No		N/A	
1.1.2.11	Job requirements and descriptions	Yes	X	No		N/A	
1.1.2.12	Personnel evaluations and objectives	Yes	X	No		N/A	
1.1.2.13	Employee grievances	Yes	X	No		N/A	
1.1.2.14	Does the laboratory have and use a management information system?	Yes	X	No		N/A	

Laboratory Management - Organizing							
1.2.1.1	Does the organizational structure group the work and personnel in a manner that allows for efficiency of operation, taking into account the interpretation of various forensic disciplines?	Yes	X	No		N/A	
1.2.1.2	Has the laboratory director considered and taken appropriate action to correct any discrepancies with regard to numbers of personnel when grouping work and resources?	Yes	X	No		N/A	
1.2.2.1	Is the laboratory director's authority well defined?	Yes	X	No		N/A	
1.2.2.2	Does the laboratory director have authority commensurate with responsibilities?	Yes	X	No		N/A	
1.2.2.3	Is there sufficient delegation of authority?	Yes	X	No		N/A	
1.2.2.4	Is authority of supervisors commensurate with their responsibilities?	Yes	X	No		N/A	
1.2.2.5	Is each subordinate accountable to one and only one immediate supervisor?	Yes	X	No		N/A	
1.2.2.6	Are performance expectations established and are they understood by laboratory personnel?	Yes	X	No		N/A	
Laboratory Management - Directing							
1.3.1.1	Is there constructive discussion between supervisors and subordinates?	Yes	X	No		N/A	
1.3.1.2	Do supervisors carefully and objectively review laboratory activities and personnel?	Yes	X	No		N/A	
1.3.1.3	Do the supervisory techniques encourage creative, objective thinking and recognize meritorious performance?	Yes	X	No		N/A	
1.3.2.1	Do clear vertical, horizontal and diagonal channels of communication exist within and external to the laboratory?	Yes	X	No		N/A	
1.3.2.2	Are vertical channels of communication used for administrative functions?	Yes	X	No		N/A	
1.3.2.3	Are staff meetings held on a regular basis?	Yes	X	No		N/A	
1.3.3.1	Does the laboratory have and use a documented training program in each functional area for employees who are new, untrained or in need of remedial training?	Yes	X	No		N/A	
1.3.3.2	Does the laboratory have an employee development program?	Yes	X	No		N/A	
1.3.3.3	Does the forensic library contain current books, journals, and other literature dealing with each functional area?	Yes	X	No		N/A	

1.3.3.4	Does a system exist to encourage each examiner to review appropriate new literature?	Yes	X	No		N/A	
Laboratory Management - Controlling							
1.4.1.1	Does the laboratory have a written or secure electronic chain of custody record with all necessary data which provides for complete tracking of all evidence?	Yes	X	No		N/A	
1.4.1.2	Is all evidence marked for identification?	Yes	X	No		N/A	
1.4.1.3	Is evidence stored under proper seal?	Yes	X	No		N/A	
1.4.1.4	Is evidence protected from loss, cross transfer, contamination and/or deleterious changes?	Yes	X	No		N/A	
1.4.1.5	Is there a secure area for overnight and/or long-term storage of evidence?	Yes	X	No		N/A	
1.4.2.1	Does the laboratory have a quality manual?	Yes	X	No		N/A	
1.4.2.2	Is an individual designated as the quality manager?	Yes	X	No		N/A	
1.4.2.3	Are audits of the management operations and disciplines of the laboratory completed and documented annually?	Yes	X	No		N/A	
1.4.2.4	Does the laboratory conduct and document an annual review of its quality system?	Yes	X	No		N/A	
1.4.2.5	Are the procedures used generally accepted in the field or supported by data gathered and recorded in a scientific manner?	Yes	X	No		N/A	
1.4.2.6	Are new technical procedures scientifically validated before being used in casework and is the validation documentation available for review?	Yes	X	No		N/A	
1.4.2.7	Are the technical procedures used by the laboratory documented and are the documents available to laboratory personnel for review?	Yes	X	No		N/A	
1.4.2.8	Are appropriate controls and standards specified in the procedures and are they used and documented in the case record to ensure the validity of examination results?	Yes	X	No		N/A	
1.4.2.9	Is the quality of the standard samples and reagents adequate for the procedure used?	Yes	X	No		N/A	
1.4.2.10	Does the laboratory routinely check the reliability of its reagents?	Yes	X	No		N/A	
1.4.2.11	Are the instruments/equipment adequate for the procedures used?	Yes	X	No		N/A	
1.4.2.12	Are the instruments/equipment in proper working order?	Yes	X	No		N/A	
1.4.2.13	Are the instruments/equipment properly calibrated?	Yes	X	No		N/A	

1.4.2.14	Do the examiners generate and does the laboratory maintain, in a case record, all the notes, worksheets, photographs, spectra, printouts, charts and other data or records used by examiners to support their conclusions?	Yes	X	No		N/A	
1.4.2.15	Does the laboratory maintain case related administrative documentation generated and received, in a retrievable form?	Yes	X	No		N/A	
1.4.2.16	Does the laboratory have, use and document a system of peer review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?	Yes	X	No		N/A	
1.4.2.17	Does the laboratory conduct and document administrative reviews of all reports issued?	Yes	X	No		N/A	
1.4.2.18	Does the laboratory monitor the testimony of each examiner at least annually and is the examiner given feedback from the evaluation?	Yes	X	No		N/A	
1.4.2.19	If the laboratory has an indication of a significant technical problem, is there a procedure in writing and in use whereby the laboratory initiates a review and takes any corrective action required?	Yes	X	No		N/A	
1.4.3.1	Does the laboratory have a documented program of proficiency testing?	Yes	X	No		N/A	
1.4.3.2	Does the laboratory participate in proficiency testing programs conducted by approved test providers, where available?	Yes	X	No		N/A	
1.4.3.3	Does each DNA examiner participate in at least one external proficiency test from an approved test provider?	Yes		No		N/A	X
1.4.3.4	Was each examiner proficiency tested annually in each subdiscipline in which casework was performed?	Yes	X	No		N/A	
1.4.3.5	Does the laboratory conduct proficiency testing using reexamination or blind techniques?	Yes		No		N/A	X
Personnel - Management							
2.1.1	Does the laboratory director possess a degree in a natural science, criminalistics or in a closely related field, or is the laboratory director supported by scientific personnel of sufficient managerial rank and authority?	Yes		No		N/A	X
2.1.2	Does the laboratory director have at least five years of forensic science experience?	Yes		No		N/A	X
2.1.3	Does the laboratory director have some formal training in management?	Yes		No		N/A	X
2.1.4	Does the laboratory director have at least two years of managerial experience?	Yes		No		N/A	X

Personnel - Controlled Substances							
2.2.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes	X	No		N/A	
2.2.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes	X	No		N/A	
2.2.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes	X	No		N/A	
2.2.4	Did each examiner successfully complete an annual proficiency test?	Yes	X	No		N/A	
Personnel - Toxicology							
2.3.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes	X	No		N/A	
2.3.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes	X	No		N/A	
2.3.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes	X	No		N/A	
2.3.4	Did each examiner successfully complete an annual proficiency test?	Yes	X	No		N/A	
Personnel - Trace Evidence							
2.4.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.4.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.4.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.4.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Serology							
2.5.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.5.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X

2.5.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.5.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - DNA							
2.6.1	Does each examiner have education, training and experience consistent with those required by the DNA Advisory Board (DAB)?	Yes		No		N/A	X
2.6.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.6.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.6.4	Did each examiner successfully complete two proficiency tests annually?	Yes		No		N/A	X
Personnel - Firearms/Toolmarks							
2.7.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.7.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.7.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.7.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.7.5	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Questioned Documents							
2.8.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.8.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.8.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.8.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.8.5	Did each examiner successfully complete an annual proficiency test?						X
Personnel - Latent Prints							

2.9.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.9.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.9.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.9.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.9.5	Did each examiner successfully complete an annual proficiency test?						X
Personnel - Technical Support							
2.10.1	Do technical support personnel meet the requirements of their job descriptions?	Yes		No		N/A	X
2.10.2	Are the job descriptions and the duties in agreement?	Yes		No		N/A	X
2.10.3	Did each member of the technical support staff successfully complete an appropriate competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.10.4	Did all technical support personnel successfully complete an appropriate proficiency test, annually?	Yes		No		N/A	X
Physical Plant							
3.1.1	Does each employee have adequate work space to accomplish assigned tasks?	Yes	X	No		N/A	
3.1.2	Is there sufficient space provided for storage of supplies, equipment and tools?	Yes	X	No		N/A	
3.1.3	Is there adequate space available for examiners for writing reports and other official communications?	Yes	X	No		N/A	
3.1.4	Is there adequate and appropriate space available for records, reference works and other necessary documents?	Yes	X	No		N/A	
3.1.5	Is adequate space available for each instrument to facilitate its operation?	Yes	X	No		N/A	
3.1.6	Are accessories stored near each instrument to facilitate its use and operation?	Yes	X	No		N/A	
Physical Plant - Design							
3.2.1	Does the physical design permit the efficient flow of evidence from the time of its acceptance until its proper disposal?	Yes	X	No		N/A	

3.2.2.	Do the relative locations of functional areas facilitate the use of equipment and instruments?	Yes	X	No		N/A	
3.2.3	Is there adequate and proper lighting available for personnel to carry out assigned tasks?	Yes	X	No		N/A	
3.2.4	Is there adequate and proper plumbing and wiring available and accessible to carry out assigned tasks?	Yes	X	No		N/A	
3.2.5	Does the laboratory have proper general ventilation?	Yes	X	No		N/A	
3.2.6	Is the heating, cooling and humidity control in the laboratory adequate?	Yes	X	No		N/A	
Physical Plant - Security							
3.3.1	Is access to the operational area of the laboratory controllable and limited?	Yes	X	No		N/A	
3.3.2	Do all exterior entrance/exit points have adequate security control?	Yes	X	No		N/A	
3.3.3	Do all internal areas requiring limited/controlled access have a lock system?	Yes	X	No		N/A	
3.3.4	Is distribution of all keys, magnetic cards, etc., documented and is distribution limited to those individuals designated by the laboratory director to have access?	Yes	X	No		N/A	
3.3.5	Is the laboratory secured during vacant hours by means of an intrusion alarm or by security personnel?	Yes	X	No		N/A	
3.3.6	Does the laboratory have a fire detection system?	Yes	X	No		N/A	
Health and Safety							
3.4.1	Does the laboratory have an effective health and safety program documented in a manual?	Yes	X	No		N/A	
3.4.2	Is an individual designated as the health and safety manager?	Yes	X	No		N/A	
3.4.3	Is the health and safety program monitored regularly and reviewed annually to ensure that its requirements are being met?	Yes	X	No		N/A	
3.4.4	Does the laboratory have available and encourage the use of safety devices, particularly those required by its health and safety manual?	Yes	X	No		N/A	
3.4.5	Does the laboratory have proper equipment and material available for the handling of carcinogenic, toxic and/or dangerous material spills?	Yes	X	No		N/A	
3.4.6	Does the laboratory have a safety shower and eye wash equipment in appropriate locations and in good working condition?	Yes	X	No		N/A	

3.4.7	Are sufficient exhaust hoods available to maintain a safe work environment?	Yes	X	No		N/A	
3.4.8	Are sufficient first-aid kits available and strategically located?	Yes	X	No		N/A	
3.4.9	Does the laboratory have an adequate number of personnel holding current certificates in first-aid training?	Yes	X	No		N/A	
3.4.10	Is appropriate space provided for safe storage of volatile, flammable, explosive and other hazardous materials?	Yes	X	No		N/A	
3.4.11	Are the emergency exits from the laboratory adequate for safe exit in an emergency?	Yes	X	No		N/A	
3.4.12	Is there general cleanliness and apparent good-housekeeping in the laboratory?	Yes	X	No		N/A	

ASCLD-LAB Accreditation Grade Computation Sheet		DRUG CHEMISTRY SECTION - Audit 2000								
Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
		Yes	No	N/A	Yes	No	N/A	Yes	No	N/A
1.1.1.1	Important				1	0	0			
1.1.1.2	Important				1	0	0			
1.1.1.3	Desirable							1	0	0
1.1.2.1	Important				1	0	0			
1.1.2.2	Important				1	0	0			
1.1.2.3	Essential	1	0	0						
1.1.2.4	Essential	1	0	0						
1.1.2.5	Essential	1	0	0						
1.1.2.6	Desirable							1	0	0
1.1.2.7	Essential	1	0	0						
1.1.2.8	Desirable							1	0	0
1.1.2.9	Important				1	0	0			
1.1.2.10	Important				1	0	0			
1.1.2.11	Desirable							1	0	0
1.1.2.12	Desirable							1	0	0
1.1.2.13	Desirable							1	0	0
1.1.2.14	Important				1	0	0			
1.2.1.1	Desirable							1	0	0
1.2.1.2	Desirable							1	0	0
1.2.2.1	Important				1	0	0			
1.2.2.2	Important				1	0	0			
1.2.2.3	Important				1	0	0			
1.2.2.4	Important				1	0	0			
1.2.2.5	Important				1	0	0			
1.2.2.6	Important				1	0	0			
1.3.1.1	Desirable							1	0	0
1.3.1.2	Important				1	0	0			
1.3.1.3	Desirable							1	0	0
1.3.2.1	Desirable							1	0	0
1.3.2.2	Desirable							1	0	0
1.3.2.3	Desirable							1	0	0
1.3.3.1	Essential	1	0	0						
1.3.3.2	Important				1	0	0			
1.3.3.3	Important				1	0	0			
1.3.3.4	Important				1	0	0			
1.4.1.1	Essential	1	0	0						
1.4.1.2	Essential	1	0	0						
1.4.1.3	Essential	1	0	0						
1.4.1.4	Essential	1	0	0						
1.4.1.5	Essential	1	0	0						
1.4.2.1	Essential	1	0	0						
1.4.2.2	Essential	1	0	0						
1.4.2.3	Essential	1	0	0						
1.4.2.4	Essential	1	0	0						
1.4.2.5	Essential	1	0	0						
1.4.2.6	Essential	1	0	0						
1.4.2.7	Essential	1	0	0						
1.4.2.8	Essential	1	0	0						
1.4.2.9	Essential	1	0	0						
1.4.2.10	Essential	1	0	0						
1.4.2.11	Important				1	0	0			
1.4.2.12	Important				1	0	0			
1.4.2.13	Essential	1	0	0						
1.4.2.14	Essential	1	0	0						
1.4.2.15	Essential	1	0	0						
1.4.2.16	Essential	1	0	0						
1.4.2.17	Essential	1	0	0						

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
1.4.2.18	Essential	1	0	0						
1.4.2.19	Essential	1	0	0						
1.4.3.1	Essential	1	0	0						
1.4.3.2	Essential	1	0	0						
1.4.3.3	Essential	0	0	1						
1.4.3.4	Important				1	0	0			
1.4.3.5	Important				0	0	1			
2.1.1	Important				0	0	1			
2.1.2	Desirable							0	0	1
2.1.3	Desirable							0	0	1
2.1.4	Desirable							0	0	1
2.2.1	Essential	1	0	0						
2.2.2	Essential	1	0	0						
2.2.3	Essential	1	0	0						
2.2.4	Essential	1	0	0						
2.3.1	Essential	1	0	0						
2.3.2	Essential	1	0	0						
2.3.3	Essential	1	0	0						
2.3.4	Essential	1	0	0						
2.4.1	Essential	0	0	1						
2.4.2	Essential	0	0	1						
2.4.3	Essential	0	0	1						
2.4.4	Essential	0	0	1						
2.5.1	Essential	0	0	0						
2.5.2	Essential	0	0	0						
2.5.3	Essential	0	0	0						
2.5.4	Essential	0	0	0						
2.6.1	Essential	0	0	0						
2.6.2	Essential	0	0	0						
2.6.3	Essential	0	0	0						
2.6.4	Essential	0	0	0						
2.7.1	Important				0	0	1			
2.7.2	Essential	0	0	1						
2.7.3	Essential	0	0	1						
2.7.4	Essential	0	0	1						
2.7.5	Essential	0	0	1						
2.8.1	Important				0	0	1			
2.8.2	Essential	0	0	1						
2.8.3	Essential	0	0	1						
2.8.4	Essential	0	0	1						
2.8.5	Essential	0	0	1						
2.9.1	Important				0	0	1			
2.9.2	Essential	0	0	1						
2.9.3	Essential	0	0	1						
2.9.4	Essential	0	0	1						
2.9.5	Essential	0	0	1						
2.10.1	Essential	0	0	1						
2.10.2	Essential	0	0	1						
2.10.3	Essential	0	0	1						
2.10.4	Essential	0	0	1						
3.1.1	Important				1	0	0			
3.1.2	Desirable							1	0	0
3.1.3	Important				1	0	0			
3.1.4	Important				1	0	0			
3.1.5	Important				1	0	0			
3.1.6	Desirable							1	0	0
3.2.1	Important				1	0	0			
3.2.2	Desirable							1	0	0
3.2.3	Important				1	0	0			
3.2.4	Important				1	0	0			

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
3.2.5	Important				1	0	0			
3.2.6	Important				1	0	0			
3.3.1	Essential	1	0	0						
3.3.2	Essential	1	0	0						
3.3.3	Essential	1	0	0						
3.3.4	Essential	1	0	0						
3.3.5	Essential	1	0	0						
3.3.6	Important				1	0	0			
3.4.1	Important				1	0	0			
3.4.2	Important				1	0	0			
3.4.3	Important				1	0	0			
3.4.4	Important				1	0	0			
3.4.5	Important				1	0	0			
3.4.6	Important				1	0	0			
3.4.7	Important				1	0	0			
3.4.8	Important				1	0	0			
3.4.9	Important				1	0	0			
3.4.10	Important				1	0	0			
3.4.11	Important				1	0	0			
3.4.12	Desirable							1	0	0
		42	**0**	**21**	**41**	**0**	**5**	**17**	**0**	**3**

Possible		**Total Possible After Subtracting Non-Applicable**		
Desirable	20	Desirbale minus Non-Applicable "Ds"	17	
Important	46	Important minus Non-Applicable "Is"	41	
Essential	71	Essential minus Non-Applicable "Es"	50	
			108	Total Applicable Standards

	Total Number Possible	Total Yes	Total No
Essential	50	42	0
Important	41	41	0
Desirable	17	17	0

Calculations

% Essential	100.00
% Important	100.00
% Desirable	100.00

Standards

% Essential	100
% Important	75
% Desirable	50

NORTH CAROLINA
STATE BUREAU OF INVESTIGATION
DEPARTMENT OF JUSTICE

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MICHAEL F. EASLEY
ATTORNEY GENERAL

BRYAN E. BEATTY
DIRECTOR

June 28, 2000

MEMORANDUM

TO: Assistant Director A.R. Stevens

FROM: SAC Irvin Lee Allcox

SUBJECT: 2000 Annual Internal Audit

During May 2000, an internal audit of the Drug Chemistry Section was conducted by Deputy Assistant Director John Neuner, Special Agent Mike Creasy, and Special Agent David Freeman. The audit team followed the Annual Internal ASCLD-LAB Compliance Audit check list, which listed 50 essential criteria, 41 important criteria, and 17 desirable criteria for the Drug Chemistry Section. The audit revealed that the Section was in compliance with 100% of the essential standards, 100% of the important standards, and 100% of the desirable standards.

The audit team made several recommendations concerning compliance with some of the audit criteria. These recommendations were followed and Section personnel were instructed to comply with these recommendations during a Section meeting on June 12, 2000.

- Handwritten initials need to be placed on all pages in a case file, including the cover sheet and the administrative pages.
- All administrative pages need to be stapled to the front inside cover of the file folder.
- Discontinue the use of slash marks through un-used procedures on the pre-printed case note forms. This is for consistency of case notes within the Section.
- Discontinue the taping of blood alcohol vials in the test tube racks when the evidence is stored inside of the evidence refrigerators.
- Remove the "quality control check positive" (QCC−) notations for reagents on the case notes. This information is maintained in the chemist's Reagent Log.
- Notify Dave Mishoe when problems are noted with a laboratory report not being printed in the same condition as when the report was approved.

- Use care in preparation of the case notes to ensure that each page of the case notes contains initials, date, case number, and page number and that all corrections are initialed.

In addition, the audit team also noted a problem with unrelated case information being stored in the "master file", which is used in blood alcohol analysis. I was asked to review this practice and develop an alternate procedure for storing this information. After discussions with the chemists assigned to the Toxicology Unit and Deputy Assistant Director John Neuner, the following changes will be initiated in the documentation of blood alcohol analysis to prevent unrelated case information from being stored in case files:

- The master file, containing the calibration and validation data for a "batch" of blood alcohol cases, will be designated as an administrative document. This document will contain a listing of the "batch" cases, and the calibration and validation data used for the analysis of the "batch" cases. All pages of the master file will be stapled together with a cover sheet (see attachment) listing the master file case number, chemist, dates collected, and an administrative review section. The master file document will be placed in a gray colored file folder and included in the master case file. Because the master file is an administrative document, it does not require chemist's initials, page number, case number, and date that is required on case notes. Also, the master file document requires only an administrative review.

- Macro programs have been written to prevent case information from other "batch" cases from appearing in the blood alcohol case notes.

cc: Deputy Assistant Director John Neuner
Special Agent Mike Creasy
Special Agent David Freeman
Drug Chemistry Section

NORTH CAROLINA STATE BUREAU OF INVESTIGATION

CRIME LABORATORY DIVISION

DRUG CHEMISTRY SECTION

ADMINISTRATIVE DOCUMENT COVER SHEET

MASTER FILE FOR BLOOD ALCOHOL ANALYSIS

MASTER FILE NUMBER: _____

CHEMIST: _____

DATES COLLECTED: _____

ADMINISTRATIVE REVIEW

REVIEWED BY: _____

DATE REVIEWED: _____

2000 Annual Internal Audit of the

EVIDENCE CONTROL UNIT

to determine compliance with ASCLD-LAB Standards & Criteria

February 2000

North Carolina State Bureau of Investigation
Crime Laboratory Division

Deputy Assistant Director John Neuner
Special Agent in Charge Jerry Richardson
Special Agent Ron Marrs

AKS 6/21

North Carolina State Bureau of Investigation
Crime Laboratory Division

February 2000

Annual Internal ASCLD-LAB Compliance Audit

Evidence Control Unit

Audit Team:

As required by ASCLD-LAB, an annual compliance audit was conducted of the Evidence Control Unit during the period January 24 through February 1, 2000.

The audit was conducted by Deputy Assistant Director John Neuner, Special Agent in Charge Jerry Richardson, and Special Agent Ron Marrs.

Compliance with ASCLD-LAB Standards and Criteria:

The audit revealed that seventy-five (75) of the one-hundred-thirty-seven (137) accreditation criteria are applicable to the operations of the Evidence Control Unit. More specifically, there are twenty-two (22) Essential criteria, thirty-seven (37) Important criteria, and seventeen (17) Desirable criteria that are applicable to the operations of this unit.

To meet accreditation standards, ASCLD-LAB requires that a laboratory meet 100% of the Essential criteria, 75% of the Important criteria, and 50% of the Desirable criteria. The final calculations for the Evidence Control Unit are:

Essential Standards	100% Compliance
Important Standards	100% Compliance
Desirable Standards	100% Compliance

There were no instances of non-compliance. All employees of the unit are to be commended for their continuing efforts to comply with accreditation standards and criteria.

Required Unit Manuals:

As a part of the audit process, the unit's Quality Manual, Technical Procedures Manual, and Training Manual were reviewed.

As a result of the review process and discussions with the Unit Supervisor, the following recommendations were made:

- Since some employees were trained prior to the development of a documented training program, there is no documentation on file related to their training status.

  Recommendation: Prepare a *"grandfather"* document for the training file of any employee who did not participate in a documented training program.

  Supervisor's Response: Memorandums were prepared during the audit.

- The focus of the annual compliance audit is now limited to determining compliance with published ASCLD-LAB standards and criteria.

  Recommendation: Replace the old audit document in the unit's Quality Manual with a current copy of the ASCLD-LAB criterion checklist.

  Supervisor's Response: Replaced as directed on 2/6/2000.

- The Technical Procedures Manual (page 8 - # 5) limited documented communications from submitting agencies to printed "DCI" messages.

  Recommendation: Update the manual to include facsimile and electronic mail messages.

  Supervisor's Response: An amendment was made to the manual during the audit.

- The Technical Procedures Manual (page 17 - G) gave no specific directions regarding *"how"* to properly disinfect work surfaces.

  Recommendation: Amend the manual to either include directions or direct employees to the Laboratory Safety Manual.

  Supervisor's Response: An amendment directing employees to the safety manual was made during the audit.

Evidence Inspections:

An inspection was conducted of 100% of the evidence present in the unit.

The results of the evidence inspections are as follows:

Supervisor Diane Brown: All evidence was found to be in full compliance.

Evidence Technician Alice Green-Guy: With one exception, all evidence was found to be in compliance. The exception was one case which had been received and stored in the vault without any identifying marks by the Evidence Technician. The oversight was corrected on the spot.

Evidence Technician Roosevelt Riles: All evidence was found to be in full compliance.

Evidence Technician Deborah Burwell: All evidence was found to be in full compliance.

Evidence Technician Marcia Brooks: With one exception, all evidence was found to be in full compliance. The exception was one case from Cumberland County which did not bear this laboratory's item number. The oversight was clearly due to a new and confusing evidence labeling system in use by the submitting agency.

Recommendations:

1. The two instances cited above were isolated and do not suggest a pattern of non-compliance with evidence handling policies or procedures. The Unit Supervisor should make all evidence technicians aware of the new labels in use in Cumberland County and caution employees to check them carefully.

   Supervisor's Response: According to Technician Brooks, the problem identified by the inspectors with the Cumberland County evidence was due to an oversight made by her (Brooks) and the officer. Apparently the officer was unaware that his new labels were not corresponding to the SBI-5 item numbers - she does not believe the department's new labels are actually a problem. Technician Brooks has been advised to pay close attention to their evidence in the future.

   Technician Green-Guy has been directed to pay closer attention to the evidence procedures and to ensure all evidence is identified properly before placing it in storage.

2. It was noted by the Audit Team that when evidence is designated *"hold for pick-up"* or *"retained for pick-up"*, some analysts are sealing multi-item cases in a single box or container. Handling the evidence in this manner makes it impossible for the Evidence Technician to accurately track multiple items of evidence. The Audit Team recommends a laboratory-wide directive requiring multi-item, hold for pick-up cases to be placed in an unsealed convenience container. Obviously each individual item would still be properly sealed and marked for identification.

   Supervisor's Response: Inasmuch as the officer also needs to know what he is receiving and signing for, I believe this directive would benefit both the lab and the requesting officer.

Employee Interviews:

When asked, "Do you have any suggestions for improving the quality of the work of this laboratory," the following (paraphrased) responses were received:

- We need more personnel (both at the receiving and LIMS input point and in evidence technician positions). The current level of staffing places too much

work on personnel and increases the chances that errors will be made. The emphasis on adding personnel seems to be concentrated on the "out front" receiving end, but management should not forget the need for additional evidence technicians.

Recommendation: The Unit Supervisor should reassure evidence technicians that Bureau management is aware of the need for additional technician positions. Additional positions were requested in the last expansion budget and will no doubt be included in future expansion budget requests.

Supervisor's Response: The staff is accurate in stating that we need more technicians to manage the workload. The quality of our work is certainly in jeopardy when we are constantly pushing to meet the needs of both the submitting agencies and our own lab people. Currently, the technicians not only have to receive and process evidence, but have to assist the data entry positions entering the cases in LIMS when needed due to the temporary lack of clerical staff. The new system has slowed down the case entry and at times I have been forced to manipulate the staff to meet the needs of the section. Since the efficiency and timeliness of assisting officers submitting evidence in person to the laboratory is critical to the lab's image, I believe it is absolutely necessary to place the resources where they are needed at the time they are needed. This has caused some frustration on the part of the technicians simply because they have a full load without adding this task.

A background has been completed on one of the vacant data entry positions and interviews have been scheduled to fill the newly acquired data entry position reassigned from Clerical Services. It is anticipated that once the clerical positions have been filled, some of the frustration and demand will be taken from the technicians and the section can once again find balance between the two functions within the unit. I have voiced these expectations to the staff and will reiterate to them management's support and understanding of our plight. As in the past, I will continue to ask for additional personnel in future expansion budgets.

- An air-freshener is needed for the vault to alleviate the odor of decaying vegetable material (e.g., marijuana).

Recommendation: The Unit Supervisor should further explore the need for air-freshening devices in the vault. If needed, air-freshening devices could be purchased using the unit's supply budget.

Supervisor's Response: At the time of this inspection, there were at least **two** air fresheners open in the vault that I personally acquired from housekeeping for our use several months ago. I advised personnel at that time that they were available through housekeeping and that they could use them to help mask the odors. Our evidence is not normally held for an extended period of time (coming in or going out) and even though it is an annoyance, I do not consider it a

significant problem. I have checked with housekeeping and they are going to provide us with a supply of the air fresheners for future use.

The staff was again advised of how to acquire air fresheners in a section staff meeting on February 7, 2000.

- There is still some confusion regarding the best choice of solutions for cleaning up work surfaces in the laboratory. The Laboratory Safety Committee needs to clarify this point.

  Recommendation: The Audit Team will request a straight-forward clarification from the Laboratory Safety Committee regarding the proper solution(s) for disinfecting work surfaces.

  Supervisor's Response: I am somewhat confused that we have confusion on this topic in this section. It was my understanding quite some time ago from our section safety officer, Alice Green-Guy, that the solution purchased by the Bureau ("Spray Nine" - EPA approved) had been researched and approved by the Laboratory Safety Committee and that we had been approved to utilize this spray in all contaminated cleanups. My recollection was that Support Services had purchased this product specifically for this purpose.

  I have discussed this issue with Lab Safety Officer David Freeman and he stated that he recollected the same and that he believed the disinfectant we are using ("Spray Nine") is very adequate.

  We will continue using this until we are advised of a more effective product. Employees were directed again in the staff meeting on February 7, 2000 to continue using this product until advised different. The bottle of "Spray Nine" was marked "Approved" to eliminate confusion.

Other notable comments/observations from employee interviews:

- Some employees seem confused about who is responsible for equipment maintenance.

  Recommendation: The Supervisor could alleviate this confusion by designating (in writing) a *"Key Operator"* for all major pieces of equipment. In addition, a section policy could clarify that the Key Operator is to be contacted in the event maintenance is required.

  Supervisor's Response: A key operator has been designated for the fax machine, the postage machine and the two copiers in the section. The individual's name assigned has been posted on each piece of equipment and

this information was also relayed to personnel in a section staff meeting on February 7, 2000.

- At least one employee could not provide a response as to how to clean-up or respond to a biological spill in the unit (e.g., a broken tube of blood). Most employees are aware that the "unwritten" section policy is to contact knowledgeable individuals in the Toxicology or Molecular Genetics Sections.

  Recommendation: The Supervisor should develop and provide a formal written policy/procedure for the section and ensure that all employees know what to do.

  Supervisor's Response: A written policy was disseminated to Evidence Control Unit employees on 2/7/2000. It was also discussed in the section staff meeting on February 7, 2000.

- One employee expressed the need for a sink (washing hands) and eyewash station in the section, and also a telephone in the vault in case someone gets locked in. Supervisor Brown stated that it is "impossible" for anyone to get locked in the vault.

  Recommendation: Installing plumbing in the section would be extremely costly. Supervisor Brown should consider installing one or more *portable* (non-plumbed) eyewash stations in the section. In addition, all employees can be supplied with hand disinfectant for use throughout the day.

  Supervisor's Response: One eye wash station was ordered on 2/7/2000. Employees were provided with one bottle each of waterless hand cleaner and instructed to request additional bottles when they needed more. This is a Bureau stocked item and they should not have any problems obtaining it.

  The vault has a safety feature on the inside of the door which allows the door to be opened from the inside. This feature has been demonstrated to the staff previously and everyone should be aware of it; however, I also addressed it again in the staff meeting on February 7, 2000.

North Carolina State Bureau of Investigation
Crime Laboratory Division

January 2000

Annual Internal ASCLD-LAB Compliance Audit

Evidence Control Unit

Laboratory Management - Planning							
1.1.1.1	Does the laboratory have a written statement of its objectives?	Yes	X	No		N/A	
1.1.1.2	Do the objectives appear to be relevant to the needs of the community serviced by the laboratory?	Yes	X	No		N/A	
1.1.1.3	Does the laboratory staff understand and support the objectives?	Yes	X	No		N/A	
1.1.2.1	Does the laboratory or its parent agency have a formal written budget?	Yes	X	No		N/A	
1.1.2.2	Is the budget adequate to meet the written objectives?	Yes	X	No		N/A	
Do clearly written and well understood procedures exist for the following:							
1.1.2.3	Handling and preserving the integrity of evidence	Yes	X	No		N/A	
1.1.2.4	Laboratory security	Yes	X	No		N/A	
1.1.2.5	Preparation, storage, security and disposition of case records or reports	Yes	X	No		N/A	
1.1.2.6	Control of materials and supplies	Yes	X	No		N/A	
1.1.2.7	Calibration of equipment and instruments	Yes	X	No		N/A	
1.1.2.8	Inventory of equipment and instruments	Yes	X	No		N/A	
1.1.2.9	Duty hours	Yes	X	No		N/A	
1.1.2.10	Leave time	Yes	X	No		N/A	
1.1.2.11	Job requirements and descriptions	Yes	X	No		N/A	
1.1.2.12	Personnel evaluations and objectives	Yes	X	No		N/A	
1.1.2.13	Employee grievances	Yes	X	No		N/A	
1.1.2.14	Does the laboratory have and use a management information system?	Yes	X	No		N/A	

Laboratory Management - Organizing							
1.2.1.1	Does the organizational structure group the work and personnel in a manner that allows for efficiency of operation, taking into account the interpretation of various forensic disciplines?	Yes	X	No		N/A	
1.2.1.2	Has the laboratory director considered and taken appropriate action to correct any discrepancies with regard to numbers of personnel when grouping work and resources?	Yes	X	No		N/A	
1.2.2.1	Is the laboratory director's authority well defined?	Yes	X	No		N/A	
1.2.2.2	Does the laboratory director have authority commensurate with responsibilities?	Yes	X	No		N/A	
1.2.2.3	Is there sufficient delegation of authority?	Yes	X	No		N/A	
1.2.2.4	Is authority of supervisors commensurate with their responsibilities?	Yes	X	No		N/A	
1.2.2.5	Is each subordinate accountable to one and only one immediate supervisor?	Yes	X	No		N/A	
1.2.2.6	Are performance expectations established and are they understood by laboratory personnel?	Yes	X	No		N/A	
Laboratory Management - Directing							
1.3.1.1	Is there constructive discussion between supervisors and subordinates?	Yes	X	No		N/A	
1.3.1.2	Do supervisors carefully and objectively review laboratory activities and personnel?	Yes	X	No		N/A	
1.3.1.3	Do the supervisory techniques encourage creative, objective thinking and recognize meritorious performance?	Yes	X	No		N/A	
1.3.2.1	Do clear vertical, horizontal and diagonal channels of communication exist within and external to the laboratory?	Yes	X	No		N/A	
1.3.2.2	Are vertical channels of communication used for administrative functions?	Yes	X	No		N/A	
1.3.2.3	Are staff meetings held on a regular basis?	Yes	X	No		N/A	
1.3.3.1	Does the laboratory have and use a documented training program in each functional area for employees who are new, untrained or in need of remedial training?	Yes	X	No		N/A	
1.3.3.2	Does the laboratory have an employee development program?	Yes	X	No		N/A	
1.3.3.3	Does the forensic library contain current books, journals, and other literature dealing with each functional area?	Yes		No		N/A	X

1.3.3.4	Does a system exist to encourage each examiner to review appropriate new literature?	Yes		No		N/A	X
Laboratory Management - Controlling							
1.4.1.1	Does the laboratory have a written or secure electronic chain of custody record with all necessary data which provides for complete tracking of all evidence?	Yes	X	No		N/A	
1.4.1.2	Is all evidence marked for identification?	Yes	X	No		N/A	
1.4.1.3	Is evidence stored under proper seal?	Yes	X	No		N/A	
1.4.1.4	Is evidence protected from loss, cross transfer, contamination and/or deleterious changes?	Yes	X	No		N/A	
1.4.1.5	Is there a secure area for overnight and/or long-term storage of evidence?	Yes	X	No		N/A	
1.4.2.1	Does the laboratory have a quality manual?	Yes	X	No		N/A	
1.4.2.2	Is an individual designated as the quality manager?	Yes	X	No		N/A	
1.4.2.3	Are audits of the management operations and disciplines of the laboratory completed and documented annually?	Yes	X	No		N/A	
1.4.2.4	Does the laboratory conduct and document an annual review of its quality system?	Yes	X	No		N/A	
1.4.2.5	Are the procedures used generally accepted in the field or supported by data gathered and recorded in a scientific manner?	Yes		No		N/A	X
1.4.2.6	Are new technical procedures scientifically validated before being used in casework and is the validation documentation available for review?	Yes		No		N/A	X
1.4.2.7	Are the technical procedures used by the laboratory documented and are the documents available to laboratory personnel for review?	Yes		No		N/A	X
1.4.2.8	Are appropriate controls and standards specified in the procedures and are they used and documented in the case record to ensure the validity of examination results?	Yes		No		N/A	X
1.4.2.9	Is the quality of the standard samples and reagents adequate for the procedure used?	Yes		No		N/A	X
1.4.2.10	Does the laboratory routinely check the reliability of its reagents?	Yes		No		N/A	X
1.4.2.11	Are the instruments/equipment adequate for the procedures used?	Yes		No		N/A	X
1.4.2.12	Are the instruments/equipment in proper working order?	Yes	X	No		N/A	
1.4.2.13	Are the instruments/equipment properly calibrated?	Yes	X	No		N/A	

1.4.2.14	Do the examiners generate and does the laboratory maintain, in a case record, all the notes, worksheets, photographs, spectra, printouts, charts and other data or records used by examiners to support their conclusions?	Yes		No		N/A	X
1.4.2.15	Does the laboratory maintain case related administrative documentation generated and received, in a retrievable form?	Yes	X	No		N/A	
1.4.2.16	Does the laboratory have, use and document a system of peer review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?	Yes		No		N/A	X
1.4.2.17	Does the laboratory conduct and document administrative reviews of all reports issued?	Yes		No		N/A	X
1.4.2.18	Does the laboratory monitor the testimony of each examiner at least annually and is the examiner given feedback from the evaluation?	Yes	X	No		N/A	
1.4.2.19	If the laboratory has an indication of a significant technical problem, is there a procedure in writing and in use whereby the laboratory initiates a review and takes any corrective action required?	Yes		No		N/A	X
1.4.3.1	Does the laboratory have a documented program of proficiency testing?	Yes		No		N/A	X
1.4.3.2	Does the laboratory participate in proficiency testing programs conducted by approved test providers, where available?	Yes		No		N/A	X
1.4.3.3	Does each DNA examiner participate in at least one external proficiency test from an approved test provider?	Yes		No		N/A	X
1.4.3.4	Was each examiner proficiency tested annually in each subdiscipline in which casework was performed?	Yes		No		N/A	X
1.4.3.5	Does the laboratory conduct proficiency testing using reexamination or blind techniques?	Yes		No		N/A	X
Personnel - Management							
2.1.1	Does the laboratory director possess a degree in a natural science, criminalistics or in a closely related field, or is the laboratory director supported by scientific personnel of sufficient managerial rank and authority?	Yes		No		N/A	X
2.1.2	Does the laboratory director have at least five years of forensic science experience?	Yes		No		N/A	X
2.1.3	Does the laboratory director have some formal training in management?	Yes		No		N/A	X
2.1.4	Does the laboratory director have at least two years of managerial experience?	Yes		No		N/A	X

Personnel - Controlled Substances							
2.2.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.2.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.2.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.2.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Toxicology							
2.3.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.3.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.3.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.3.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Trace Evidence							
2.4.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.4.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.4.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.4.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Serology							
2.5.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.5.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X

2.5.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.5.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - DNA							
2.6.1	Does each examiner have education, training and experience consistent with those required by the DNA Advisory Board (DAB)?	Yes		No		N/A	X
2.6.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.6.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.6.4	Did each examiner successfully complete two proficiency tests annually?	Yes		No		N/A	X
Personnel - Firearms/Toolmarks							
2.7.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.7.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.7.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.7.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.7.5	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Questioned Documents							
2.8.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.8.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.8.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.8.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.8.5	Did each examiner successfully complete an annual proficiency test?						X

Personnel - Latent Prints							
2.9.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.9.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.9.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.9.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.9.5	Did each examiner successfully complete an annual proficiency test?						X
Personnel - Technical Support							
2.10.1	Do technical support personnel meet the requirements of their job descriptions?	Yes	X	No		N/A	
2.10.2	Are the job descriptions and the duties in agreement?	Yes	X	No		N/A	
2.10.3	Did each member of the technical support staff successfully complete an appropriate competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.10.4	Did all technical support personnel successfully complete an appropriate proficiency test, annually?	Yes		No		N/A	X
Physical Plant							
3.1.1	Does each employee have adequate work space to accomplish assigned tasks?	Yes	X	No		N/A	
3.1.2	Is there sufficient space provided for storage of supplies, equipment and tools?	Yes	X	No		N/A	
3.1.3	Is there adequate space available for examiners for writing reports and other official communications?	Yes	X	No		N/A	
3.1.4	Is there adequate and appropriate space available for records, reference works and other necessary documents?	Yes	X	No		N/A	
3.1.5	Is adequate space available for each instrument to facilitate its operation?	Yes	X	No		N/A	
3.1.6	Are accessories stored near each instrument to facilitate its use and operation?	Yes	X	No		N/A	
Physical Plant - Design							
3.2.1	Does the physical design permit the efficient flow of evidence from the time of its acceptance until its proper disposal?	Yes	X	No		N/A	

3.2.2.	Do the relative locations of functional areas facilitate the use of equipment and instruments?	Yes	X	No		N/A	
3.2.3	Is there adequate and proper lighting available for personnel to carry out assigned tasks?	Yes	X	No		N/A	
3.2.4	Is there adequate and proper plumbing and wiring available and accessible to carry out assigned tasks?	Yes	X	No		N/A	
3.2.5	Does the laboratory have proper general ventilation?	Yes	X	No		N/A	
3.2.6	Is the heating, cooling and humidity control in the laboratory adequate?	Yes	X	No		N/A	
Physical Plant - Security							
3.3.1	Is access to the operational area of the laboratory controllable and limited?	Yes	X	No		N/A	
3.3.2	Do all exterior entrance/exit points have adequate security control?	Yes	X	No		N/A	
3.3.3	Do all internal areas requiring limited/controlled access have a lock system?	Yes	X	No		N/A	
3.3.4	Is distribution of all keys, magnetic cards, etc., documented and is distribution limited to those individuals designated by the laboratory director to have access?	Yes	X	No		N/A	
3.3.5	Is the laboratory secured during vacant hours by means of an intrusion alarm or by security personnel?	Yes	X	No		N/A	
3.3.6	Does the laboratory have a fire detection system?	Yes	X	No		N/A	
Health and Safety							
3.4.1	Does the laboratory have an effective health and safety program documented in a manual?	Yes	X	No		N/A	
3.4.2	Is an individual designated as the health and safety manager?	Yes	X	No		N/A	
3.4.3	Is the health and safety program monitored regularly and reviewed annually to ensure that its requirements are being met?	Yes	X	No		N/A	
3.4.4	Does the laboratory have available and encourage the use of safety devices, particularly those required by its health and safety manual?	Yes	X	No		N/A	
3.4.5	Does the laboratory have proper equipment and material available for the handling of carcinogenic, toxic and/or dangerous material spills?	Yes		No		N/A	X
3.4.6	Does the laboratory have a safety shower and eye wash equipment in appropriate locations and in good working condition?	Yes		No		N/A	X

3.4.7	Are sufficient exhaust hoods available to maintain a safe work environment?	Yes		No		N/A	X
3.4.8	Are sufficient first-aid kits available and strategically located?	Yes	X	No		N/A	
3.4.9	Does the laboratory have an adequate number of personnel holding current certificates in first-aid training?	Yes	X	No		N/A	
3.4.10	Is appropriate space provided for safe storage of volatile, flammable, explosive and other hazardous materials?	Yes	X	No		N/A	
3.4.11	Are the emergency exits from the laboratory adequate for safe exit in an emergency?	Yes	X	No		N/A	
3.4.12	Is there general cleanliness and apparent good-housekeeping in the laboratory?	Yes	X	No		N/A	

ASCLD-LAB Accreditation Grade Computation Sheet		EVIDENCE CONTROL UNIT - Audit 2000								
Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
		Yes	No	N/A	Yes	No	N/A	Yes	No	N/A
1.1.1.1	Important				1	0	0			
1.1.1.2	Important				1	0	0			
1.1.1.3	Desirable							1	0	0
1.1.2.1	Important				1	0	0			
1.1.2.2	Important				1	0	0			
1.1.2.3	Essential	1	0	0						
1.1.2.4	Essential	1	0	0						
1.1.2.5	Essential	1	0	0						
1.1.2.6	Desirable							1	0	0
1.1.2.7	Essential	1	0	0						
1.1.2.8	Desirable							1	0	0
1.1.2.9	Important				1	0	0			
1.1.2.10	Important				1	0	0			
1.1.2.11	Desirable							1	0	0
1.1.2.12	Desirable							1	0	0
1.1.2.13	Desirable							1	0	0
1.1.2.14	Important				1	0	0			
1.2.1.1	Desirable							1	0	0
1.2.1.2	Desirable							1	0	0
1.2.2.1	Important				1	0	0			
1.2.2.2	Important				1	0	0			
1.2.2.3	Important				1	0	0			
1.2.2.4	Important				1	0	0			
1.2.2.5	Important				1	0	0			
1.2.2.6	Important				1	0	0			
1.3.1.1	Desirable							1	0	0
1.3.1.2	Important				1	0	0			
1.3.1.3	Desirable							1	0	0
1.3.2.1	Desirable							1	0	0
1.3.2.2	Desirable							1	0	0
1.3.2.3	Desirable							1	0	0
1.3.3.1	Essential	1	0	0						
1.3.3.2	Important				1	0	0			
1.3.3.3	Important				0	0	1			
1.3.3.4	Important				0	0	1			
1.4.1.1	Essential	1	0	0						
1.4.1.2	Essential	1	0	0						
1.4.1.3	Essential	1	0	0						
1.4.1.4	Essential	1	0	0						
1.4.1.5	Essential	1	0	0						
1.4.2.1	Essential	1	0	0						
1.4.2.2	Essential	1	0	0						
1.4.2.3	Essential	1	0	0						
1.4.2.4	Essential	1	0	0						
1.4.2.5	Essential	0	0	1						
1.4.2.6	Essential	0	0	1						
1.4.2.7	Essential	0	0	1						
1.4.2.8	Essential	0	0	1						
1.4.2.9	Essential	0	0	1						
1.4.2.10	Essential	0	0	1						
1.4.2.11	Important				0	0	1			
1.4.2.12	Important				1	0	0			
1.4.2.13	Essential	1	0	0						
1.4.2.14	Essential	0	0	1						
1.4.2.15	Essential	1	0	0						
1.4.2.16	Essential	0	0	1						
1.4.2.17	Essential	0	0	1						

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
1.4.2.18	Essential	1	0	0						
1.4.2.19	Essential	0	0	1						
1.4.3.1	Essential	0	0	1						
1.4.3.2	Essential	0	0	1						
1.4.3.3	Essential	0	0	1						
1.4.3.4	Important				0	0	1			
1.4.3.5	Important				0	0	1			
2.1.1	Important				0	0	1			
2.1.2	Desirable							0	0	1
2.1.3	Desirable							0	0	1
2.1.4	Desirable							0	0	1
2.2.1	Essential	0	0	1						
2.2.2	Essential	0	0	1						
2.2.3	Essential	0	0	1						
2.2.4	Essential	0	0	1						
2.3.1	Essential	0	0	1						
2.3.2	Essential	0	0	1						
2.3.3	Essential	0	0	1						
2.3.4	Essential	0	0	1						
2.4.1	Essential	0	0	1						
2.4.2	Essential	0	0	1						
2.4.3	Essential	0	0	1						
2.4.4	Essential	0	0	1						
2.5.1	Essential	0	0	1						
2.5.2	Essential	0	0	1						
2.5.3	Essential	0	0	1						
2.5.4	Essential	0	0	1						
2.6.1	Essential	0	0	1						
2.6.2	Essential	0	0	1						
2.6.3	Essential	0	0	1						
2.6.4	Essential	0	0	1						
2.7.1	Important				0	0	1			
2.7.2	Essential	0	0	1						
2.7.3	Essential	0	0	1						
2.7.4	Essential	0	0	1						
2.7.5	Essential	0	0	1						
2.8.1	Important				0	0	1			
2.8.2	Essential	0	0	1						
2.8.3	Essential	0	0	1						
2.8.4	Essential	0	0	1						
2.8.5	Essential	0	0	1						
2.9.1	Important				0	0	1			
2.9.2	Essential	0	0	1						
2.9.3	Essential	0	0	1						
2.9.4	Essential	0	0	1						
2.9.5	Essential	0	0	1						
2.10.1	Essential	1	0	1						
2.10.2	Essential	1	0	1						
2.10.3	Essential	0	0	1						
2.10.4	Essential	0	0	1						
3.1.1	Important				1	0	0			
3.1.2	Desirable							1	0	0
3.1.3	Important				1	0	0			
3.1.4	Important				1	0	0			
3.1.5	Important				1	0	0			
3.1.6	Desirable							1	0	0
3.2.1	Important				1	0	0			
3.2.2	Desirable							1	0	0
3.2.3	Important				1	0	0			
3.2.4	Important				1	0	0			

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
3.2.5	Important				1	0	0			
3.2.6	Important				1	0	0			
3.3.1	Essential	1	0	0						
3.3.2	Essential	1	0	0						
3.3.3	Essential	1	0	0						
3.3.4	Essential	1	0	0						
3.3.5	Essential	1	0	0						
3.3.6	Important				1	0	0			
3.4.1	Important				1	0	0			
3.4.2	Important				1	0	0			
3.4.3	Important				1	0	0			
3.4.4	Important				1	0	0			
3.4.5	Important				1	0	0			
3.4.6	Important				1	0	0			
3.4.7	Important				1	0	0			
3.4.8	Important				1	0	0			
3.4.9	Important				1	0	0			
3.4.10	Important				1	0	0			
3.4.11	Important				1	0	0			
3.4.12	Desirable							1	0	0
		24	**0**	**49**	**37**	**0**	**9**	**17**	**0**	**3**

Possible		Total Possible After Subtracting Non-Applicable		
Desirable	20	Desirbale minus Non-Applicable "Ds"	17	
Important	46	Important minus Non-Applicable "Is"	37	
Essential	71	Essential minus Non-Applicable "Es"	22	
			76	Total Applicable Standards

	Total Number Possible	Total Yes	Total No
Essential	22	24	0
Important	37	37	0
Desirable	17	17	0

Calculations

% Essential	100.00
% Important	100.00
% Desirable	100.00

Standards

% Essential	100
% Important	75
% Desirable	50

2000 Annual Internal Audit of the

FIREARM & TOOLMARK SECTION

to determine compliance with ASCLD-LAB Standards & Criteria

February 2000

North Carolina State Bureau of Investigation
Crime Laboratory Division

Deputy Assistant Director John Neuner
Special Agent in Charge Troy Hamlin
Special Agent David Mishoe

AKS 6/21/

North Carolina State Bureau of Investigation
Crime Laboratory Division

February 2000

Annual Internal ASCLD-LAB Compliance Audit

Firearm & Toolmark Section

Audit Team:

As required by ASCLD-LAB, an annual compliance audit was conducted of the Firearm & Toolmark Section during February 2000.

The audit was conducted by Deputy Assistant Director John Neuner, Special Agent in Charge Troy Hamlin, and Special Agent David Mishoe.

Compliance with ASCLD-LAB Standards and Criteria:

The audit revealed that one-hundred (100) of the one-hundred-thirty-seven (137) accreditation criteria are applicable to the operations of the Firearm & Toolmark Section. More specifically, there are forty-one (41) Essential criteria, forty-two (42) Important criteria, and seventeen (17) Desirable criteria that are applicable to the operations of this section.

To meet accreditation standards, ASCLD-LAB requires that a laboratory meet 100% of the Essential criteria, 75% of the Important criteria, and 50% of the Desirable criteria. The final calculations for the Firearm & Toolmark Section are:

Essential Standards	100% Compliance
Important Standards	100% Compliance
Desirable Standards	100% Compliance

Overall, the audit revealed an outstanding effort at on-going compliance with ASCLD-LAB standards and all employees of the section are to be commended for their continuing efforts to comply with accreditation standards and criteria.

Other Observations/Comments/Recommendations:

Though not rising to the level of non-compliance with published ASCLD-LAB standards and criteria, the following observations, comments, and recommendations were gathered during the audit process:

- SAC Branch has caused a "test fire" policy to be written for his section, and this meets the newly defined position of ASCLD-LAB. However, the policy is minimal and left some questions in the mind of the auditors and Laboratory Quality Manager. In addition to simply stating that "test-fires" are not evidence, SAC Branch needs to expand the policy to clearly state/define section-wide retention (proper storage), purging, and final disposition procedures. The expanded policy should be submitted to laboratory management for approval.

- Employees of the section are reminded that all digits of laboratory numbers must appear when recording the laboratory number on evidence. For example, **R20001234** may not be recorded as **R-00-1234**.

- All stock chemicals received from vendors should be clearly labeled with the date received, expiration date (or Expiration - N/A), and the date opened.

- Marijuana standards were stored in lockers designated for evidence storage. A secure non-evidence storage area needs to be identified and used.

- Each case note file should clearly reflect the condition of the evidence upon receipt (e.g., sealed, not-sealed, how sealed, paper bag, plastic bag, etc.).

- All evidence must show the initials and date of the Agent receiving the evidence.

Employee Comments:

- Additional staff is needed to conduct research.

- Additional staff is needed to expand existing services (e.g., Crime Scene Reconstruction). In many cases, new technology is available but we do not have the staff or resources to implement or utilize the new technology.

- Our laboratory has a tendency to create too many procedures and many are unnecessary.

- Our laboratory has been too "nit-picky" with ASCLD-LAB standards in the past. We need to adopt more broad outlines and procedures to avoid creating situations of non-compliance. We paint our employees into a corner.

Annual Internal ASCLD-LAB Compliance Audit

Laboratory Management - Planning							
1.1.1.1	Does the laboratory have a written statement of its objectives?	Yes	X	No		N/A	
1.1.1.2	Do the objectives appear to be relevant to the needs of the community serviced by the laboratory?	Yes	X	No		N/A	
1.1.1.3	Does the laboratory staff understand and support the objectives?	Yes	X	No		N/A	
1.1.2.1	Does the laboratory or its parent agency have a formal written budget?	Yes	X	No		N/A	
1.1.2.2	Is the budget adequate to meet the written objectives?	Yes	X	No		N/A	
Do clearly written and well understood procedures exist for the following:							
1.1.2.3	Handling and preserving the integrity of evidence	Yes	X	No		N/A	
1.1.2.4	Laboratory security	Yes	X	No		N/A	
1.1.2.5	Preparation, storage, security and disposition of case records or reports	Yes	X	No		N/A	
1.1.2.6	Control of materials and supplies	Yes	X	No		N/A	
1.1.2.7	Calibration of equipment and instruments	Yes	X	No		N/A	
1.1.2.8	Inventory of equipment and instruments	Yes	X	No		N/A	
1.1.2.9	Duty hours	Yes	X	No		N/A	
1.1.2.10	Leave time	Yes	X	No		N/A	
1.1.2.11	Job requirements and descriptions	Yes	X	No		N/A	
1.1.2.12	Personnel evaluations and objectives	Yes	X	No		N/A	
1.1.2.13	Employee grievances	Yes	X	No		N/A	
1.1.2.14	Does the laboratory have and use a management information system?	Yes	X	No		N/A	

Laboratory Management - Organizing							
1.2.1.1	Does the organizational structure group the work and personnel in a manner that allows for efficiency of operation, taking into account the interpretation of various forensic disciplines?	Yes	X	No		N/A	
1.2.1.2	Has the laboratory director considered and taken appropriate action to correct any discrepancies with regard to numbers of personnel when grouping work and resources?	Yes	X	No		N/A	
1.2.2.1	Is the laboratory director's authority well defined?	Yes	X	No		N/A	
1.2.2.2	Does the laboratory director have authority commensurate with responsibilities?	Yes	X	No		N/A	
1.2.2.3	Is there sufficient delegation of authority?	Yes	X	No		N/A	
1.2.2.4	Is authority of supervisors commensurate with their responsibilities?	Yes	X	No		N/A	
1.2.2.5	Is each subordinate accountable to one and only one immediate supervisor?	Yes	X	No		N/A	
1.2.2.6	Are performance expectations established and are they understood by laboratory personnel?	Yes	X	No		N/A	
Laboratory Management - Directing							
1.3.1.1	Is there constructive discussion between supervisors and subordinates?	Yes	X	No		N/A	
1.3.1.2	Do supervisors carefully and objectively review laboratory activities and personnel?	Yes	X	No		N/A	
1.3.1.3	Do the supervisory techniques encourage creative, objective thinking and recognize meritorious performance?	Yes	X	No		N/A	
1.3.2.1	Do clear vertical, horizontal and diagonal channels of communication exist within and external to the laboratory?	Yes	X	No		N/A	
1.3.2.2	Are vertical channels of communication used for administrative functions?	Yes	X	No		N/A	
1.3.2.3	Are staff meetings held on a regular basis?	Yes	X	No		N/A	
1.3.3.1	Does the laboratory have and use a documented training program in each functional area for employees who are new, untrained or in need of remedial training?	Yes	X	No		N/A	
1.3.3.2	Does the laboratory have an employee development program?	Yes	X	No		N/A	
1.3.3.3	Does the forensic library contain current books, journals, and other literature dealing with each functional area?	Yes	X	No		N/A	

1.3.3.4	Does a system exist to encourage each examiner to review appropriate new literature?	Yes	X	No		N/A	
Laboratory Management - Controlling							
1.4.1.1	Does the laboratory have a written or secure electronic chain of custody record with all necessary data which provides for complete tracking of all evidence?	Yes	X	No		N/A	
1.4.1.2	Is all evidence marked for identification?	Yes	X	No		N/A	
1.4.1.3	Is evidence stored under proper seal?	Yes	X	No		N/A	
1.4.1.4	Is evidence protected from loss, cross transfer, contamination and/or deleterious changes?	Yes	X	No		N/A	
1.4.1.5	Is there a secure area for overnight and/or long-term storage of evidence?	Yes	X	No		N/A	
1.4.2.1	Does the laboratory have a quality manual?	Yes	X	No		N/A	
1.4.2.2	Is an individual designated as the quality manager?	Yes	X	No		N/A	
1.4.2.3	Are audits of the management operations and disciplines of the laboratory completed and documented annually?	Yes	X	No		N/A	
1.4.2.4	Does the laboratory conduct and document an annual review of its quality system?	Yes	X	No		N/A	
1.4.2.5	Are the procedures used generally accepted in the field or supported by data gathered and recorded in a scientific manner?	Yes	X	No		N/A	
1.4.2.6	Are new technical procedures scientifically validated before being used in casework and is the validation documentation available for review?	Yes		No		N/A	X
1.4.2.7	Are the technical procedures used by the laboratory documented and are the documents available to laboratory personnel for review?	Yes	X	No		N/A	
1.4.2.8	Are appropriate controls and standards specified in the procedures and are they used and documented in the case record to ensure the validity of examination results?	Yes	X	No		N/A	
1.4.2.9	Is the quality of the standard samples and reagents adequate for the procedure used?	Yes	X	No		N/A	
1.4.2.10	Does the laboratory routinely check the reliability of its reagents?	Yes	X	No		N/A	
1.4.2.11	Are the instruments/equipment adequate for the procedures used?	Yes	X	No		N/A	
1.4.2.12	Are the instruments/equipment in proper working order?	Yes	X	No		N/A	
1.4.2.13	Are the instruments/equipment properly calibrated?	Yes	X	No		N/A	

1.4.2.14	Do the examiners generate and does the laboratory maintain, in a case record, all the notes, worksheets, photographs, spectra, printouts, charts and other data or records used by examiners to support their conclusions?	Yes	X	No		N/A	
1.4.2.15	Does the laboratory maintain case related administrative documentation generated and received, in a retrievable form?	Yes	X	No		N/A	
1.4.2.16	Does the laboratory have, use and document a system of peer review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?	Yes	X	No		N/A	
1.4.2.17	Does the laboratory conduct and document administrative reviews of all reports issued?	Yes	X	No		N/A	
1.4.2.18	Does the laboratory monitor the testimony of each examiner at least annually and is the examiner given feedback from the evaluation?	Yes	X	No		N/A	
1.4.2.19	If the laboratory has an indication of a significant technical problem, is there a procedure in writing and in use whereby the laboratory initiates a review and takes any corrective action required?	Yes	X	No		N/A	
1.4.3.1	Does the laboratory have a documented program of proficiency testing?	Yes	X	No		N/A	
1.4.3.2	Does the laboratory participate in proficiency testing programs conducted by approved test providers, where available?	Yes	X	No		N/A	
1.4.3.3	Does each DNA examiner participate in at least one external proficiency test from an approved test provider?	Yes		No		N/A	X
1.4.3.4	Was each examiner proficiency tested annually in each subdiscipline in which casework was performed?	Yes	X	No		N/A	
1.4.3.5	Does the laboratory conduct proficiency testing using reexamination or blind techniques?	Yes		No		N/A	X
Personnel - Management							
2.1.1	Does the laboratory director possess a degree in a natural science, criminalistics or in a closely related field, or is the laboratory director supported by scientific personnel of sufficient managerial rank and authority?	Yes		No		N/A	X
2.1.2	Does the laboratory director have at least five years of forensic science experience?	Yes		No		N/A	X
2.1.3	Does the laboratory director have some formal training in management?	Yes		No		N/A	X
2.1.4	Does the laboratory director have at least two years of managerial experience?	Yes		No		N/A	X

Personnel - Controlled Substances							
2.2.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.2.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.2.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.2.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Toxicology							
2.3.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.3.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.3.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.3.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Trace Evidence							
2.4.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.4.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.4.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.4.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Serology							
2.5.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.5.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X

2.5.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.5.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - DNA							
2.6.1	Does each examiner have education, training and experience consistent with those required by the DNA Advisory Board (DAB)?	Yes		No		N/A	X
2.6.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.6.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.6.4	Did each examiner successfully complete two proficiency tests annually?	Yes		No		N/A	X
Personnel - Firearms/Toolmarks							
2.7.1	Does each examiner possess a baccalaureate degree with science courses?	Yes	X	No		N/A	
2.7.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes	X	No		N/A	
2.7.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes	X	No		N/A	
2.7.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes	X	No		N/A	
2.7.5	Did each examiner successfully complete an annual proficiency test?	Yes	X	No		N/A	
Personnel - Questioned Documents							
2.8.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.8.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.8.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.8.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.8.5	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Latent Prints							

2.9.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.9.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.9.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.9.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.9.5	Did each examiner successfully complete an annual proficiency test?						X
Personnel - Technical Support							
2.10.1	Do technical support personnel meet the requirements of their job descriptions?	Yes	X	No		N/A	
2.10.2	Are the job descriptions and the duties in agreement?	Yes	X	No		N/A	
2.10.3	Did each member of the technical support staff successfully complete an appropriate competency test prior to assuming casework responsibility?	Yes	X	No		N/A	
2.10.4	Did all technical support personnel successfully complete an appropriate proficiency test, annually?	Yes	X	No		N/A	
Physical Plant							
3.1.1	Does each employee have adequate work space to accomplish assigned tasks?	Yes	X	No		N/A	
3.1.2	Is there sufficient space provided for storage of supplies, equipment and tools?	Yes	X	No		N/A	
3.1.3	Is there adequate space available for examiners for writing reports and other official communications?	Yes	X	No		N/A	
3.1.4	Is there adequate and appropriate space available for records, reference works and other necessary documents?	Yes	X	No		N/A	
3.1.5	Is adequate space available for each instrument to facilitate its operation?	Yes	X	No		N/A	
3.1.6	Are accessories stored near each instrument to facilitate its use and operation?	Yes	X	No		N/A	
Physical Plant - Design							
3.2.1	Does the physical design permit the efficient flow of evidence from the time of its acceptance until its proper disposal?	Yes	X	No		N/A	

3.2.2.	Do the relative locations of functional areas facilitate the use of equipment and instruments?	Yes	X	No		N/A	
3.2.3	Is there adequate and proper lighting available for personnel to carry out assigned tasks?	Yes	X	No		N/A	
3.2.4	Is there adequate and proper plumbing and wiring available and accessible to carry out assigned tasks?	Yes	X	No		N/A	
3.2.5	Does the laboratory have proper general ventilation?	Yes	X	No		N/A	
3.2.6	Is the heating, cooling and humidity control in the laboratory adequate?	Yes	X	No		N/A	
Physical Plant - Security							
3.3.1	Is access to the operational area of the laboratory controllable and limited?	Yes	X	No		N/A	
3.3.2	Do all exterior entrance/exit points have adequate security control?	Yes	X	No		N/A	
3.3.3	Do all internal areas requiring limited/controlled access have a lock system?	Yes	X	No		N/A	
3.3.4	Is distribution of all keys, magnetic cards, etc., documented and is distribution limited to those individuals designated by the laboratory director to have access?	Yes	X	No		N/A	
3.3.5	Is the laboratory secured during vacant hours by means of an intrusion alarm or by security personnel?	Yes	X	No		N/A	
3.3.6	Does the laboratory have a fire detection system?	Yes	X	No		N/A	
Health and Safety							
3.4.1	Does the laboratory have an effective health and safety program documented in a manual?	Yes	X	No		N/A	
3.4.2	Is an individual designated as the health and safety manager?	Yes	X	No		N/A	
3.4.3	Is the health and safety program monitored regularly and reviewed annually to ensure that its requirements are being met?	Yes	X	No		N/A	
3.4.4	Does the laboratory have available and encourage the use of safety devices, particularly those required by its health and safety manual?	Yes	X	No		N/A	
3.4.5	Does the laboratory have proper equipment and material available for the handling of carcinogenic, toxic and/or dangerous material spills?	Yes	X	No		N/A	
3.4.6	Does the laboratory have a safety shower and eye wash equipment in appropriate locations and in good working condition?	Yes	X	No		N/A	

3.4.7	Are sufficient exhaust hoods available to maintain a safe work environment?	Yes	X	No		N/A	
3.4.8	Are sufficient first-aid kits available and strategically located?	Yes	X	No		N/A	
3.4.9	Does the laboratory have an adequate number of personnel holding current certificates in first-aid training?	Yes	X	No		N/A	
3.4.10	Is appropriate space provided for safe storage of volatile, flammable, explosive and other hazardous materials?	Yes	X	No		N/A	
3.4.11	Are the emergency exits from the laboratory adequate for safe exit in an emergency?	Yes	X	No		N/A	
3.4.12	Is there general cleanliness and apparent good-housekeeping in the laboratory?	Yes	X	No		N/A	

ASCLD-LAB Accreditation Grade Computation Sheet		FIREARM & TOOLMARK SECTION - Audit 2000								
Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
		Yes	No	N/A	Yes	No	N/A	Yes	No	N/A
1.1.1.1	Important				1	0	0			
1.1.1.2	Important				1	0	0			
1.1.1.3	Desirable							1	0	0
1.1.2.1	Important				1	0	0			
1.1.2.2	Important				1	0	0			
1.1.2.3	Essential	1	0	0						
1.1.2.4	Essential	1	0	0						
1.1.2.5	Essential	1	0	0						
1.1.2.6	Desirable							1	0	0
1.1.2.7	Essential	1	0	0						
1.1.2.8	Desirable							1	0	0
1.1.2.9	Important				1	0	0			
1.1.2.10	Important				1	0	0			
1.1.2.11	Desirable							1	0	0
1.1.2.12	Desirable							1	0	0
1.1.2.13	Desirable							1	0	0
1.1.2.14	Important				1	0	0			
1.2.1.1	Desirable							1	0	0
1.2.1.2	Desirable							1	0	0
1.2.2.1	Important				1	0	0			
1.2.2.2	Important				1	0	0			
1.2.2.3	Important				1	0	0			
1.2.2.4	Important				1	0	0			
1.2.2.5	Important				1	0	0			
1.2.2.6	Important				1	0	0			
1.3.1.1	Desirable							1	0	0
1.3.1.2	Important				1	0	0			
1.3.1.3	Desirable							1	0	0
1.3.2.1	Desirable							1	0	0
1.3.2.2	Desirable							1	0	0
1.3.2.3	Desirable							1	0	0
1.3.3.1	Essential	1	0	0						
1.3.3.2	Important				1	0	0			
1.3.3.3	Important				1	0	0			
1.3.3.4	Important				1	0	0			
1.4.1.1	Essential	1	0	0						
1.4.1.2	Essential	1	0	0						
1.4.1.3	Essential	1	0	0						
1.4.1.4	Essential	1	0	0						
1.4.1.5	Essential	1	0	0						
1.4.2.1	Essential	1	0	0						
1.4.2.2	Essential	1	0	0						
1.4.2.3	Essential	1	0	0						
1.4.2.4	Essential	1	0	0						
1.4.2.5	Essential	1	0	0						
1.4.2.6	Essential	0	0	1						
1.4.2.7	Essential	1	0	0						
1.4.2.8	Essential	1	0	0						
1.4.2.9	Essential	1	0	0						
1.4.2.10	Essential	1	0	0						
1.4.2.11	Important				1	0	0			
1.4.2.12	Important				1	0	0			
1.4.2.13	Essential	1	0	0						
1.4.2.14	Essential	1	0	0						
1.4.2.15	Essential	1	0	0						
1.4.2.16	Essential	1	0	0						
1.4.2.17	Essential	1	0	0						

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
1.4.2.18	Essential	1	0	0						
1.4.2.19	Essential	1	0	0						
1.4.3.1	Essential	1	0	0						
1.4.3.2	Essential	1	0	0						
1.4.3.3	Essential	0	0	1						
1.4.3.4	Important				1	0	0			
1.4.3.5	Important				0	0	1			
2.1.1	Important				0	0	1			
2.1.2	Desirable							0	0	1
2.1.3	Desirable							0	0	1
2.1.4	Desirable							0	0	1
2.2.1	Essential	0	0	1						
2.2.2	Essential	0	0	1						
2.2.3	Essential	0	0	1						
2.2.4	Essential	0	0	1						
2.3.1	Essential	0	0	1						
2.3.2	Essential	0	0	1						
2.3.3	Essential	0	0	1						
2.3.4	Essential	0	0	1						
2.4.1	Essential	0	0	1						
2.4.2	Essential	0	0	1						
2.4.3	Essential	0	0	1						
2.4.4	Essential	0	0	1						
2.5.1	Essential	0	0	1						
2.5.2	Essential	0	0	1						
2.5.3	Essential	0	0	1						
2.5.4	Essential	0	0	1						
2.6.1	Essential	0	0	1						
2.6.2	Essential	0	0	1						
2.6.3	Essential	0	0	1						
2.6.4	Essential	0	0	1						
2.7.1	Important				1	0	0			
2.7.2	Essential	1	0	0						
2.7.3	Essential	1	0	0						
2.7.4	Essential	1	0	0						
2.7.5	Essential	1	0	0						
2.8.1	Important				0	0	1			
2.8.2	Essential	0	0	1						
2.8.3	Essential	0	0	1						
2.8.4	Essential	0	0	1						
2.8.5	Essential	0	0	1						
2.9.1	Important				0	0	1			
2.9.2	Essential	0	0	1						
2.9.3	Essential	0	0	1						
2.9.4	Essential	0	0	1						
2.9.5	Essential	0	0	1						
2.10.1	Essential	1	0	0						
2.10.2	Essential	1	0	0						
2.10.3	Essential	1	0	0						
2.10.4	Essential	1	0	0						
3.1.1	Important				1	0	0			
3.1.2	Desirable							1	0	0
3.1.3	Important				1	0	0			
3.1.4	Important				1	0	0			
3.1.5	Important				1	0	0			
3.1.6	Desirable							1	0	0
3.2.1	Important				1	0	0			
3.2.2	Desirable							1	0	0
3.2.3	Important				1	0	0			
3.2.4	Important				1	0	0			

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
3.2.5	Important				1	0	0			
3.2.6	Important				1	0	0			
3.3.1	Essential	1	0	0						
3.3.2	Essential	1	0	0						
3.3.3	Essential	1	0	0						
3.3.4	Essential	1	0	0						
3.3.5	Essential	1	0	0						
3.3.6	Important				1	0	0			
3.4.1	Important				1	0	0			
3.4.2	Important				1	0	0			
3.4.3	Important				1	0	0			
3.4.4	Important				1	0	0			
3.4.5	Important				1	0	0			
3.4.6	Important				1	0	0			
3.4.7	Important				1	0	0			
3.4.8	Important				1	0	0			
3.4.9	Important				1	0	0			
3.4.10	Important				1	0	0			
3.4.11	Important				1	0	0			
3.4.12	Desirable							1	0	0
		41	**0**	**30**	**42**	**0**	**4**	**17**	**0**	**3**

Possible		Total Possible After Subtracting Non-Applicable	
Desirable	20	Desirbale minus Non-Applicable "Ds"	17
Important	46	Important minus Non-Applicable "Is"	42
Essential	71	Essential minus Non-Applicable "Es"	41
			100 Total Applicable Standards

	Total Number Possible	Total Yes	Total No
Essential	41	41	0
Important	42	42	0
Desirable	17	17	0

Calculations	
% Essential	100.00
% Important	100.00
% Desirable	100.00

Standards	
% Essential	100
% Important	75
% Desirable	50

NORTH CAROLINA
STATE BUREAU OF INVESTIGATION
DEPARTMENT OF JUSTICE

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MICHAEL F. EASLEY
ATTORNEY GENERAL

BRYAN E. BEATTY
DIRECTOR

June 26, 2000

TO: **Assistant Deputy Director John Neuner, Quality Assurance Manger**

FROM: **SAC Douglas Branch**

SUBJECT: **Response to 2000 Annual Internal Audit of the Firearm and Tool Mark Section**

Based on the recommendations of the Audit Team after the completion of the 2000 Annual Internal Audit of the Firearm and Tool Mark Section the following actions have been taken:

1) A meeting will be scheduled with the Quality Assurance Manager to discuss the possible revision of the section's "test fire" policy.
2) During a section meeting employees were reminded that:
   a) That all digits of laboratory numbers must appear when recording the laboratory number on evidence.
   b) That all stock chemicals received from vendors should be clearly labeled with the date received, expiration date, and the date opened.
   c) That marijuana standards must not be stored with or in evidence containers. Secured non-evidence storage areas where identified for the agents conducting drug analyses.
   d) That case note files should reflect the type(s) of evidence container and condition of all seals.
   e) That all evidence must show the initials and date received.

2000 Annual Internal Audit
of the

LATENT EVIDENCE SECTION

to determine compliance with
ASCLD-LAB Standards & Criteria

February 2000

North Carolina State Bureau of Investigation
Crime Laboratory Division

Deputy Assistant Director John Neuner
Special Agent in Charge David Dunn
Special Agent in Charge Mark Nelson

AMS 6/21/

North Carolina State Bureau of Investigation
Crime Laboratory Division

February 2000

Annual Internal ASCLD-LAB Compliance Audit

Latent Evidence Section

Audit Team:

As required by ASCLD-LAB, an annual compliance audit was conducted of the Latent Evidence Section during February 2000.

The audit was conducted by Deputy Assistant Director John Neuner, Special Agent in Mark Nelson, and Special Agent in Charge David Dunn.

Compliance with ASCLD-LAB Standards and Criteria:

The audit revealed that ninety-six (96) of the one-hundred-thirty-seven (137) accreditation criteria are applicable to the operations of the Latent Evidence Section. More specifically, there are thirty-seven (37) Essential criteria, forty-two (42) Important criteria, and seventeen (17) Desirable criteria that are applicable to the operations of this unit.

To meet accreditation standards, ASCLD-LAB requires that a laboratory meet 100% of the Essential criteria, 75% of the Important criteria, and 50% of the Desirable criteria. The final calculations for the Latent Evidence Section are:

Essential Standards	100% Compliance
Important Standards	95.24% Compliance
Desirable Standards	100% Compliance

The standards which the Latent Evidence Section failed to meet is:

1.4.2.12 Are the instruments/equipment in proper working order?
Important

Meeting this standard would require that all out-of-service instruments (i.e., vacuum metal deposition) be fully functional or disposed of in accordance with state regulations.

2.9.1 Does each examiner possess a baccalaureate degree with science courses?
Important

Several examiners do not possess a baccalaureate degree.

Overall, the audit revealed an outstanding effort at on-going compliance with ASCLD-LAB standards and all employees of the unit are to be commended for their continuing efforts to comply with accreditation standards and criteria.

Other Observations/Comments/Recommendations:

Though not rising to the level of non-compliance with published ASCLD-LAB standards and criteria, the following observations, comments, and recommendations were gathered during the audit process:

- One piece of evidence was observed in the section's evidence vault in an unprotected status. It was a large, uncovered door. All evidence should be protected during storage.
- Two Analyst I's are performing Analyst II duties but their job description does not reflect that fact.
- In the Petzka/Parker lab suite, Agent Parker has access to Agent Petzka's lab area because the locks are reversed on the door. This needs to be corrected.
- All administrative documents in case files must bear the lab number and initials of the individual placing the document in the folder.
- One instrument has been out of service for an extended period. The instrument should either be repaired or removed.
- One safety shower needs to be relocated.

Employee Comments:

- Manuals, policies, and procedures are too voluminous. We need to form a committee to consolidate our laboratory manuals.
- We need more people. It takes way too long to fill vacancies in the laboratory. This puts unnecessary pressure on those working here.
- There should be less emphasis on numbers of cases worked.
- We need a LIMS technical manual for the whole lab.

Annual Internal ASCLD-LAB Compliance Audit

Laboratory Management - Planning							
1.1.1.1	Does the laboratory have a written statement of its objectives?	Yes	X	No		N/A	
1.1.1.2	Do the objectives appear to be relevant to the needs of the community serviced by the laboratory?	Yes	X	No		N/A	
1.1.1.3	Does the laboratory staff understand and support the objectives?	Yes	X	No		N/A	
1.1.2.1	Does the laboratory or its parent agency have a formal written budget?	Yes	X	No		N/A	
1.1.2.2	Is the budget adequate to meet the written objectives?	Yes	X	No		N/A	
Do clearly written and well understood procedures exist for the following:							
1.1.2.3	Handling and preserving the integrity of evidence	Yes	X	No		N/A	
1.1.2.4	Laboratory security	Yes	X	No		N/A	
1.1.2.5	Preparation, storage, security and disposition of case records or reports	Yes	X	No		N/A	
1.1.2.6	Control of materials and supplies	Yes	X	No		N/A	
1.1.2.7	Calibration of equipment and instruments	Yes	X	No		N/A	
1.1.2.8	Inventory of equipment and instruments	Yes	X	No		N/A	
1.1.2.9	Duty hours	Yes	X	No		N/A	
1.1.2.10	Leave time	Yes	X	No		N/A	
1.1.2.11	Job requirements and descriptions	Yes	X	No		N/A	
1.1.2.12	Personnel evaluations and objectives	Yes	X	No		N/A	
1.1.2.13	Employee grievances	Yes	X	No		N/A	
1.1.2.14	Does the laboratory have and use a management information system?	Yes	X	No		N/A	

Laboratory Management - Organizing							
1.2.1.1	Does the organizational structure group the work and personnel in a manner that allows for efficiency of operation, taking into account the interpretation of various forensic disciplines?	Yes	X	No		N/A	
1.2.1.2	Has the laboratory director considered and taken appropriate action to correct any discrepancies with regard to numbers of personnel when grouping work and resources?	Yes	X	No		N/A	
1.2.2.1	Is the laboratory director's authority well defined?	Yes	X	No		N/A	
1.2.2.2	Does the laboratory director have authority commensurate with responsibilities?	Yes	X	No		N/A	
1.2.2.3	Is there sufficient delegation of authority?	Yes	X	No		N/A	
1.2.2.4	Is authority of supervisors commensurate with their responsibilities?	Yes	X	No		N/A	
1.2.2.5	Is each subordinate accountable to one and only one immediate supervisor?	Yes	X	No		N/A	
1.2.2.6	Are performance expectations established and are they understood by laboratory personnel?	Yes	X	No		N/A	
Laboratory Management - Directing							
1.3.1.1	Is there constructive discussion between supervisors and subordinates?	Yes	X	No		N/A	
1.3.1.2	Do supervisors carefully and objectively review laboratory activities and personnel?	Yes	X	No		N/A	
1.3.1.3	Do the supervisory techniques encourage creative, objective thinking and recognize meritorious performance?	Yes	X	No		N/A	
1.3.2.1	Do clear vertical, horizontal and diagonal channels of communication exist within and external to the laboratory?	Yes	X	No		N/A	
1.3.2.2	Are vertical channels of communication used for administrative functions?	Yes	X	No		N/A	
1.3.2.3	Are staff meetings held on a regular basis?	Yes	X	No		N/A	
1.3.3.1	Does the laboratory have and use a documented training program in each functional area for employees who are new, untrained or in need of remedial training?	Yes	X	No		N/A	
1.3.3.2	Does the laboratory have an employee development program?	Yes	X	No		N/A	
1.3.3.3	Does the forensic library contain current books, journals, and other literature dealing with each functional area?	Yes	X	No		N/A	

1.3.3.4	Does a system exist to encourage each examiner to review appropriate new literature?	Yes	X	No		N/A	
Laboratory Management - Controlling							
1.4.1.1	Does the laboratory have a written or secure electronic chain of custody record with all necessary data which provides for complete tracking of all evidence?	Yes	X	No		N/A	
1.4.1.2	Is all evidence marked for identification?	Yes	X	No		N/A	
1.4.1.3	Is evidence stored under proper seal?	Yes	X	No		N/A	
1.4.1.4	Is evidence protected from loss, cross transfer, contamination and/or deleterious changes?	Yes	X	No		N/A	
1.4.1.5	Is there a secure area for overnight and/or long-term storage of evidence?	Yes	X	No		N/A	
1.4.2.1	Does the laboratory have a quality manual?	Yes	X	No		N/A	
1.4.2.2	Is an individual designated as the quality manager?	Yes	X	No		N/A	
1.4.2.3	Are audits of the management operations and disciplines of the laboratory completed and documented annually?	Yes	X	No		N/A	
1.4.2.4	Does the laboratory conduct and document an annual review of its quality system?	Yes	X	No		N/A	
1.4.2.5	Are the procedures used generally accepted in the field or supported by data gathered and recorded in a scientific manner?	Yes	X	No		N/A	
1.4.2.6	Are new technical procedures scientifically validated before being used in casework and is the validation documentation available for review?	Yes	X	No		N/A	
1.4.2.7	Are the technical procedures used by the laboratory documented and are the documents available to laboratory personnel for review?	Yes	X	No		N/A	
1.4.2.8	Are appropriate controls and standards specified in the procedures and are they used and documented in the case record to ensure the validity of examination results?	Yes	X	No		N/A	
1.4.2.9	Is the quality of the standard samples and reagents adequate for the procedure used?	Yes	X	No		N/A	
1.4.2.10	Does the laboratory routinely check the reliability of its reagents?	Yes	X	No		N/A	
1.4.2.11	Are the instruments/equipment adequate for the procedures used?	Yes	X	No		N/A	
1.4.2.12	Are the instruments/equipment in proper working order?	Yes		No	X	N/A	
1.4.2.13	Are the instruments/equipment properly calibrated?	Yes	X	No		N/A	

1.4.2.14	Do the examiners generate and does the laboratory maintain, in a case record, all the notes, worksheets, photographs, spectra, printouts, charts and other data or records used by examiners to support their conclusions?	Yes	X	No		N/A	
1.4.2.15	Does the laboratory maintain case related administrative documentation generated and received, in a retrievable form?	Yes	X	No		N/A	
1.4.2.16	Does the laboratory have, use and document a system of peer review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?	Yes	X	No		N/A	
1.4.2.17	Does the laboratory conduct and document administrative reviews of all reports issued?	Yes	X	No		N/A	
1.4.2.18	Does the laboratory monitor the testimony of each examiner at least annually and is the examiner given feedback from the evaluation?	Yes	X	No		N/A	
1.4.2.19	If the laboratory has an indication of a significant technical problem, is there a procedure in writing and in use whereby the laboratory initiates a review and takes any corrective action required?	Yes	X	No		N/A	
1.4.3.1	Does the laboratory have a documented program of proficiency testing?	Yes	X	No		N/A	
1.4.3.2	Does the laboratory participate in proficiency testing programs conducted by approved test providers, where available?	Yes	X	No		N/A	
1.4.3.3	Does each DNA examiner participate in at least one external proficiency test from an approved test provider?	Yes		No		N/A	X
1.4.3.4	Was each examiner proficiency tested annually in each subdiscipline in which casework was performed?	Yes	X	No		N/A	
1.4.3.5	Does the laboratory conduct proficiency testing using reexamination or blind techniques?	Yes		No		N/A	X
Personnel - Management							
2.1.1	Does the laboratory director possess a degree in a natural science, criminalistics or in a closely related field, or is the laboratory director supported by scientific personnel of sufficient managerial rank and authority?	Yes		No		N/A	X
2.1.2	Does the laboratory director have at least five years of forensic science experience?	Yes		No		N/A	X
2.1.3	Does the laboratory director have some formal training in management?	Yes		No		N/A	X
2.1.4	Does the laboratory director have at least two years of managerial experience?	Yes		No		N/A	X

Personnel - Controlled Substances							
2.2.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.2.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.2.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.2.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Toxicology							
2.3.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.3.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.3.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.3.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Trace Evidence							
2.4.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.4.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.4.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.4.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Serology							
2.5.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.5.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X

2.5.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.5.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - DNA							
2.6.1	Does each examiner have education, training and experience consistent with those required by the DNA Advisory Board (DAB)?	Yes		No		N/A	X
2.6.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.6.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.6.4	Did each examiner successfully complete two proficiency tests annually?	Yes		No		N/A	X
Personnel - Firearms/Toolmarks							
2.7.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.7.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.7.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.7.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.7.5	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Questioned Documents							
2.8.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.8.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.8.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.8.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.8.5	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Latent Prints							

2.9.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No	X	N/A	
2.9.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes	X	No		N/A	
2.9.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes	X	No		N/A	
2.9.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes	X	No		N/A	
2.9.5	Did each examiner successfully complete an annual proficiency test?		X				
Personnel - Technical Support							
2.10.1	Do technical support personnel meet the requirements of their job descriptions?	Yes		No		N/A	X
2.10.2	Are the job descriptions and the duties in agreement?	Yes		No		N/A	X
2.10.3	Did each member of the technical support staff successfully complete an appropriate competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.10.4	Did all technical support personnel successfully complete an appropriate proficiency test, annually?	Yes		No		N/A	X
Physical Plant							
3.1.1	Does each employee have adequate work space to accomplish assigned tasks?	Yes	X	No		N/A	
3.1.2	Is there sufficient space provided for storage of supplies, equipment and tools?	Yes	X	No		N/A	
3.1.3	Is there adequate space available for examiners for writing reports and other official communications?	Yes	X	No		N/A	
3.1.4	Is there adequate and appropriate space available for records, reference works and other necessary documents?	Yes	X	No		N/A	
3.1.5	Is adequate space available for each instrument to facilitate its operation?	Yes	X	No		N/A	
3.1.6	Are accessories stored near each instrument to facilitate its use and operation?	Yes	X	No		N/A	
Physical Plant - Design							
3.2.1	Does the physical design permit the efficient flow of evidence from the time of its acceptance until its proper disposal?	Yes	X	No		N/A	

3.2.2.	Do the relative locations of functional areas facilitate the use of equipment and instruments?	Yes	X	No		N/A	
3.2.3	Is there adequate and proper lighting available for personnel to carry out assigned tasks?	Yes	X	No		N/A	
3.2.4	Is there adequate and proper plumbing and wiring available and accessible to carry out assigned tasks?	Yes	X	No		N/A	
3.2.5	Does the laboratory have proper general ventilation?	Yes	X	No		N/A	
3.2.6	Is the heating, cooling and humidity control in the laboratory adequate?	Yes	X	No		N/A	
Physical Plant - Security							
3.3.1	Is access to the operational area of the laboratory controllable and limited?	Yes	X	No		N/A	
3.3.2	Do all exterior entrance/exit points have adequate security control?	Yes	X	No		N/A	
3.3.3	Do all internal areas requiring limited/controlled access have a lock system?	Yes	X	No		N/A	
3.3.4	Is distribution of all keys, magnetic cards, etc., documented and is distribution limited to those individuals designated by the laboratory director to have access?	Yes	X	No		N/A	
3.3.5	Is the laboratory secured during vacant hours by means of an intrusion alarm or by security personnel?	Yes	X	No		N/A	
3.3.6	Does the laboratory have a fire detection system?	Yes	X	No		N/A	
Health and Safety							
3.4.1	Does the laboratory have an effective health and safety program documented in a manual?	Yes	X	No		N/A	
3.4.2	Is an individual designated as the health and safety manager?	Yes	X	No		N/A	
3.4.3	Is the health and safety program monitored regularly and reviewed annually to ensure that its requirements are being met?	Yes	X	No		N/A	
3.4.4	Does the laboratory have available and encourage the use of safety devices, particularly those required by its health and safety manual?	Yes	X	No		N/A	
3.4.5	Does the laboratory have proper equipment and material available for the handling of carcinogenic, toxic and/or dangerous material spills?	Yes	X	No		N/A	
3.4.6	Does the laboratory have a safety shower and eye wash equipment in appropriate locations and in good working condition?	Yes	X	No		N/A	

3.4.7	Are sufficient exhaust hoods available to maintain a safe work environment?	Yes	X	No		N/A	
3.4.8	Are sufficient first-aid kits available and strategically located?	Yes	X	No		N/A	
3.4.9	Does the laboratory have an adequate number of personnel holding current certificates in first-aid training?	Yes	X	No		N/A	
3.4.10	Is appropriate space provided for safe storage of volatile, flammable, explosive and other hazardous materials?	Yes	X	No		N/A	
3.4.11	Are the emergency exits from the laboratory adequate for safe exit in an emergency?	Yes	X	No		N/A	
3.4.12	Is there general cleanliness and apparent good-housekeeping in the laboratory?	Yes	X	No		N/A	

ASCLD-LAB Accreditation Grade Computation Sheet		LATENT EVIDENCE SECTION - Audit 2000								
Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
		Yes	No	N/A	Yes	No	N/A	Yes	No	N/A
1.1.1.1	Important				1	0	0			
1.1.1.2	Important				1	0	0			
1.1.1.3	Desirable							1	0	0
1.1.2.1	Important				1	0	0			
1.1.2.2	Important				1	0	0			
1.1.2.3	Essential	1	0	0						
1.1.2.4	Essential	1	0	0						
1.1.2.5	Essential	1	0	0						
1.1.2.6	Desirable							1	0	0
1.1.2.7	Essential	1	0	0						
1.1.2.8	Desirable							1	0	0
1.1.2.9	Important				1	0	0			
1.1.2.10	Important				1	0	0			
1.1.2.11	Desirable							1	0	0
1.1.2.12	Desirable							1	0	0
1.1.2.13	Desirable							1	0	0
1.1.2.14	Important				1	0	0			
1.2.1.1	Desirable							1	0	0
1.2.1.2	Desirable							1	0	0
1.2.2.1	Important				1	0	0			
1.2.2.2	Important				1	0	0			
1.2.2.3	Important				1	0	0			
1.2.2.4	Important				1	0	0			
1.2.2.5	Important				1	0	0			
1.2.2.6	Important				1	0	0			
1.3.1.1	Desirable							1	0	0
1.3.1.2	Important				1	0	0			
1.3.1.3	Desirable							1	0	0
1.3.2.1	Desirable							1	0	0
1.3.2.2	Desirable							1	0	0
1.3.2.3	Desirable							1	0	0
1.3.3.1	Essential	1	0	0						
1.3.3.2	Important				1	0	0			
1.3.3.3	Important				1	0	0			
1.3.3.4	Important				1	0	0			
1.4.1.1	Essential	1	0	0						
1.4.1.2	Essential	1	0	0						
1.4.1.3	Essential	1	0	0						
1.4.1.4	Essential	1	0	0						
1.4.1.5	Essential	1	0	0						
1.4.2.1	Essential	1	0	0						
1.4.2.2	Essential	1	0	0						
1.4.2.3	Essential	1	0	0						
1.4.2.4	Essential	1	0	0						
1.4.2.5	Essential	1	0	0						
1.4.2.6	Essential	0	0	1						
1.4.2.7	Essential	1	0	0						
1.4.2.8	Essential	1	0	0						
1.4.2.9	Essential	1	0	0						
1.4.2.10	Essential	1	0	0						
1.4.2.11	Important				1	0	0			
1.4.2.12	Important				0	1	0			
1.4.2.13	Essential	1	0	0						
1.4.2.14	Essential	1	0	0						
1.4.2.15	Essential	1	0	0						
1.4.2.16	Essential	1	0	0						
1.4.2.17	Essential	1	0	0						

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
1.4.2.18	Essential	1	0	0						
1.4.2.19	Essential	1	0	0						
1.4.3.1	Essential	1	0	0						
1.4.3.2	Essential	1	0	0						
1.4.3.3	Essential	0	0	1						
1.4.3.4	Important				1	0	0			
1.4.3.5	Important				0	0	1			
2.1.1	Important				0	0	1			
2.1.2	Desirable							0	0	1
2.1.3	Desirable							0	0	1
2.1.4	Desirable							0	0	1
2.2.1	Essential	0	0	1						
2.2.2	Essential	0	0	1						
2.2.3	Essential	0	0	1						
2.2.4	Essential	0	0	1						
2.3.1	Essential	0	0	1						
2.3.2	Essential	0	0	1						
2.3.3	Essential	0	0	1						
2.3.4	Essential	0	0	1						
2.4.1	Essential	0	0	1						
2.4.2	Essential	0	0	1						
2.4.3	Essential	0	0	1						
2.4.4	Essential	0	0	1						
2.5.1	Essential	0	0	1						
2.5.2	Essential	0	0	1						
2.5.3	Essential	0	0	1						
2.5.4	Essential	0	0	1						
2.6.1	Essential	0	0	1						
2.6.2	Essential	0	0	1						
2.6.3	Essential	0	0	1						
2.6.4	Essential	0	0	1						
2.7.1	Important				0	0	1			
2.7.2	Essential	0	0	1						
2.7.3	Essential	0	0	1						
2.7.4	Essential	0	0	1						
2.7.5	Essential	0	0	1						
2.8.1	Important				0	0	1			
2.8.2	Essential	0	0	1						
2.8.3	Essential	0	0	1						
2.8.4	Essential	0	0	1						
2.8.5	Essential	0	0	1						
2.9.1	Important				0	1	0			
2.9.2	Essential	1	0	0						
2.9.3	Essential	1	0	0						
2.9.4	Essential	1	0	0						
2.9.5	Essential	1	0	0						
2.10.1	Essential	0	0	1						
2.10.2	Essential	0	0	1						
2.10.3	Essential	0	0	1						
2.10.4	Essential	0	0	1						
3.1.1	Important				1	0	0			
3.1.2	Desirable							1	0	0
3.1.3	Important				1	0	0			
3.1.4	Important				1	0	0			
3.1.5	Important				1	0	0			
3.1.6	Desirable							1	0	0
3.2.1	Important				1	0	0			
3.2.2	Desirable							1	0	0
3.2.3	Important				1	0	0			
3.2.4	Important				1	0	0			

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
3.2.5	Important				1	0	0			
3.2.6	Important				1	0	0			
3.3.1	Essential	1	0	0						
3.3.2	Essential	1	0	0						
3.3.3	Essential	1	0	0						
3.3.4	Essential	1	0	0						
3.3.5	Essential	1	0	0						
3.3.6	Important				1	0	0			
3.4.1	Important				1	0	0			
3.4.2	Important				1	0	0			
3.4.3	Important				1	0	0			
3.4.4	Important				1	0	0			
3.4.5	Important				1	0	0			
3.4.6	Important				1	0	0			
3.4.7	Important				1	0	0			
3.4.8	Important				1	0	0			
3.4.9	Important				1	0	0			
3.4.10	Important				1	0	0			
3.4.11	Important				1	0	0			
3.4.12	Desirable							1	0	0
		37	0	34	40	2	4	17	0	3

Possible		Total Possible After Subtracting Non-Applicable	
Desirable	20	Desirbale minus Non-Applicable "Ds"	17
Important	46	Important minus Non-Applicable "Is"	42
Essential	71	Essential minus Non-Applicable "Es"	37
		96	Total Applicable Standards

	Total Number Possible	Total Yes	Total No
Essential	37	37	0
Important	42	40	2
Desirable	17	17	0

Calculations	
% Essential	100.00
% Important	95.24
% Desirable	100.00

Standards	
% Essential	100
% Important	75
% Desirable	50

NORTH CAROLINA
STATE BUREAU OF INVESTIGATION
DEPARTMENT OF JUSTICE

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MICHAEL F. EASLEY
ATTORNEY GENERAL

BRYAN E. BEATTY
DIRECTOR

MEMORANDUM

TO: Deputy Assistant Director J. K. Neuner

FROM: SAC Jerry Richardson JR

DATE: June 20, 2000

SUBJECT: Response to Annual Internal ASCLD-LAB Compliance Audit - February 2000

The purpose of this memorandum is to provide a response to the Latent Evidence Section Annual Internal ASCLD-LAB Compliance Audit. The following actions have been taken or will be taken as indicated:

ASCLD Standard 1.4.2.12 **Instrumentation/Equipment**

The vacuum metal deposition unit of the section has been experiencing a problem with one of the pumps for a period of time. The vendor for this equipment was consulted and provided a quote for subsistence and travel to Raleigh to determine the problem with the pumps. This particular unit was one of the earlier models produced for this technology and may need to be replaced in the future. Section personnel will continue to evaluate this equipment and a decision to surplus and/or seek funds to obtain a new unit will occur prior to the end of the calender year.

ASCLD Standard 2.9.1 **Baccalaureate Degree with Science Courses**

Analysts not possessing a baccalaureate degree will continually be encouraged to take college level course work to obtain an undergraduate degree. All future vacancies will require the appropriate science degree prior to any employment consideration within the section.

Response to Other Observations/Comments/Recommendations and Employee Concerns:

- During a staff meeting on February 16, 2000, all analysts were instructed to ensure that unworked evidence is protected during storage and to repackage if necessary prior to placing evidence in storage areas.

- Two analysts recently have completed the Imprint Evidence (footwear and tire track evidence) training program and started to accept cases in this discipline. A formal request to upgrade their positions to the level II status will be submitted to the Department of Justice Personnel Division for review in the near future. This effort has been temporarily delayed to allow for the posting of the Level III position within the section.

- A formal request to reverse the locks on the doors in the suite of S/A Parker and S/A Petzka was provided to the SBI Support Services Division on May 12, 2000.

- During a staff meeting on February 16, 2000, all section analysts were reminded to record the lab number and initials on all administrative documents in case files.

- The safety shower in the work suite for SAC Richardson was relocated on February 15, 2000.

- All section employees have been advised that a committee is currently reviewing and evaluating laboratory policy and procedure manuals. Future plans include placing these manuals on a laboratory file server for updates and revisions. Further, section staff was advised that the LIMS does have an on-line help section and updates to this program will be incorporated as needed.

- The past vacancy within the section was filled in a very short period of time and Trainee Murray is currently in the SBI Academy. In the future, a formal request will be submitted for additional personnel when applicable

- During a staff meeting on February 16, 2000, all section personnel were reminded that producing a quality-based work product in a timely manner is the most important factor when conducting case analyses. The SAC will continue to monitor individual caseloads to ensure equitable portions of casework are completed by each analyst within specified periods.

Finally, the Latent Evidence Section would like to thank the Audit Team for the professional manner in which the audit was conducted and emphasize our continual commitment to meet and exceed all applicable ASCLD-LAB accreditation standards.

jr

cc: Assistant Director A. R. Stevens

2000 Annual Internal Audit of the

MOLECULAR GENETICS SECTION

to determine compliance with ASCLD-LAB Standards & Criteria

April 2000

North Carolina State Bureau of Investigation
Crime Laboratory Division

Deputy Assistant Director John Neuner
Special Agent in Charge Jerry Richardson
Special Agent John Dilday

AMS 6/21/

North Carolina State Bureau of Investigation
Crime Laboratory Division

April 2000

Annual Internal ASCLD-LAB Compliance Audit

Molecular Genetics Section

Audit Team:

As required by ASCLD-LAB, an annual compliance audit was conducted of the Molecular Genetics Section during February 2000.

The audit was conducted by Deputy Assistant Director John Neuner, Special Agent in Charge Jerry Richardson, and Special Agent Jon Dilday.

Compliance with ASCLD-LAB Standards and Criteria:

The audit revealed that one-hundred-three (105) of the one-hundred-thirty-seven (137) accreditation criteria are applicable to the operations of the Molecular Genetics Section. More specifically, there are forty-seven (47) Essential criteria, forty-two (42) Important criteria, and seventeen (17) Desirable criteria that are applicable to the operations of this section.

To meet accreditation standards, ASCLD-LAB requires that a laboratory meet 100% of the Essential criteria, 75% of the Important criteria, and 50% of the Desirable criteria. The final calculations for the Molecular Genetics Section are:

Essential Standards	100% Compliance
Important Standards	100% Compliance
Desirable Standards	100% Compliance

Overall, the audit revealed an outstanding effort at on-going compliance with ASCLD-LAB standards and all employees of the section are to be commended for their continuing efforts to comply with accreditation standards and criteria.

Other Observations/Comments/Recommendations:

Though not rising to the level of non-compliance with published ASCLD-LAB standards and criteria, the following observations, comments, and recommendations were gathered during the audit process:

- SAC Nelson should remind analysts of their responsibility to immediately identify evidence upon receipt and to check to ensure that the individual submitting the evidence to them has done the same.

- Stock chemicals bearing an expired expiration date should be removed from the work area (and properly disposed of). In addition, stock chemicals should be dated upon receipt and when they are opened. This practice takes any guesswork out of the age of a stock chemical from the stock room.

- Commercial buffer solutions supplied with ABA cards should be used only with the kit for which they are supplied and then discarded. Quantities of unused buffer bottles which come with these kits should not be collected, or a single bottle held out for extended use.

- SAC Nelson should review the way in which analysts are using small evidence-storage refrigerators in the shared room between labs. Long term storage of evidence in this location must be prohibited.

- The policy of allowing inserted case note pages into a case file should be strengthened by requiring a notation on the case note cover sheet that a page(s) has been added.

- Unless the analyst intends to complete all blanks, the use of stamps bearing "Page _____ of _____" should be discontinued.

- All analysts are reminded that corrections (single strike throughs) must be initialed.

- Ensure that all records related to cases involving pre-LIMS & LIMS work are cross-referenced.

- Films taped to some case note sheets are labeled with case number and initials and some are not. The best practice seems to be to require labeling on all films.

- Non-evidence (e.g., old proficiency samples) should not be stored in areas designated for evidence storage.

- Case files should not contain both a LIMS and non-LIMS case note cover sheet.

- One employee is concerned about participating in DNA proficiencies without official training in PowerPlex procedures.

Employee Comments:

- Quality of what we do has not suffered, but we need more people and less overtime.
- Our multiple inspection process needs to be modified to combine inspections/audits wherever possible.
- A greater emphasis needs to be placed on getting federal funds for *people*, not more instruments and supplies.
- Constant overtime is not the answer to our backlog problem.
- Moving DNA Database to sworn status would allow us to use them to reduce backlog of evidence cases, and also allow us to use them on overtime.
- Body Fluid analysts should be allowed (and trained) to take a case all the way through DNA analysis.

Annual Internal ASCLD-LAB Compliance Audit

Laboratory Management - Planning							
1.1.1.1	Does the laboratory have a written statement of its objectives?	Yes	X	No		N/A	
1.1.1.2	Do the objectives appear to be relevant to the needs of the community serviced by the laboratory?	Yes	X	No		N/A	
1.1.1.3	Does the laboratory staff understand and support the objectives?	Yes	X	No		N/A	
1.1.2.1	Does the laboratory or its parent agency have a formal written budget?	Yes	X	No		N/A	
1.1.2.2	Is the budget adequate to meet the written objectives?	Yes	X	No		N/A	
Do clearly written and well understood procedures exist for the following:							
1.1.2.3	Handling and preserving the integrity of evidence	Yes	X	No		N/A	
1.1.2.4	Laboratory security	Yes	X	No		N/A	
1.1.2.5	Preparation, storage, security and disposition of case records or reports	Yes	X	No		N/A	
1.1.2.6	Control of materials and supplies	Yes	X	No		N/A	
1.1.2.7	Calibration of equipment and instruments	Yes	X	No		N/A	
1.1.2.8	Inventory of equipment and instruments	Yes	X	No		N/A	
1.1.2.9	Duty hours	Yes	X	No		N/A	
1.1.2.10	Leave time	Yes	X	No		N/A	
1.1.2.11	Job requirements and descriptions	Yes	X	No		N/A	
1.1.2.12	Personnel evaluations and objectives	Yes	X	No		N/A	
1.1.2.13	Employee grievances	Yes	X	No		N/A	
1.1.2.14	Does the laboratory have and use a management information system?	Yes	X	No		N/A	

Laboratory Management - Organizing							
1.2.1.1	Does the organizational structure group the work and personnel in a manner that allows for efficiency of operation, taking into account the interpretation of various forensic disciplines?	Yes	X	No		N/A	
1.2.1.2	Has the laboratory director considered and taken appropriate action to correct any discrepancies with regard to numbers of personnel when grouping work and resources?	Yes	X	No		N/A	
1.2.2.1	Is the laboratory director's authority well defined?	Yes	X	No		N/A	
1.2.2.2	Does the laboratory director have authority commensurate with responsibilities?	Yes	X	No		N/A	
1.2.2.3	Is there sufficient delegation of authority?	Yes	X	No		N/A	
1.2.2.4	Is authority of supervisors commensurate with their responsibilities?	Yes	X	No		N/A	
1.2.2.5	Is each subordinate accountable to one and only one immediate supervisor?	Yes	X	No		N/A	
1.2.2.6	Are performance expectations established and are they understood by laboratory personnel?	Yes	X	No		N/A	
Laboratory Management - Directing							
1.3.1.1	Is there constructive discussion between supervisors and subordinates?	Yes	X	No		N/A	
1.3.1.2	Do supervisors carefully and objectively review laboratory activities and personnel?	Yes	X	No		N/A	
1.3.1.3	Do the supervisory techniques encourage creative, objective thinking and recognize meritorious performance?	Yes	X	No		N/A	
1.3.2.1	Do clear vertical, horizontal and diagonal channels of communication exist within and external to the laboratory?	Yes	X	No		N/A	
1.3.2.2	Are vertical channels of communication used for administrative functions?	Yes	X	No		N/A	
1.3.2.3	Are staff meetings held on a regular basis?	Yes	X	No		N/A	
1.3.3.1	Does the laboratory have and use a documented training program in each functional area for employees who are new, untrained or in need of remedial training?	Yes	X	No		N/A	
1.3.3.2	Does the laboratory have an employee development program?	Yes	X	No		N/A	
1.3.3.3	Does the forensic library contain current books, journals, and other literature dealing with each functional area?	Yes	X	No		N/A	

1.3.3.4	Does a system exist to encourage each examiner to review appropriate new literature?	Yes	X	No		N/A	
Laboratory Management - Controlling							
1.4.1.1	Does the laboratory have a written or secure electronic chain of custody record with all necessary data which provides for complete tracking of all evidence?	Yes	X	No		N/A	
1.4.1.2	Is all evidence marked for identification?	Yes	X	No		N/A	
1.4.1.3	Is evidence stored under proper seal?	Yes	X	No		N/A	
1.4.1.4	Is evidence protected from loss, cross transfer, contamination and/or deleterious changes?	Yes	X	No		N/A	
1.4.1.5	Is there a secure area for overnight and/or long-term storage of evidence?	Yes	X	No		N/A	
1.4.2.1	Does the laboratory have a quality manual?	Yes	X	No		N/A	
1.4.2.2	Is an individual designated as the quality manager?	Yes	X	No		N/A	
1.4.2.3	Are audits of the management operations and disciplines of the laboratory completed and documented annually?	Yes	X	No		N/A	
1.4.2.4	Does the laboratory conduct and document an annual review of its quality system?	Yes	X	No		N/A	
1.4.2.5	Are the procedures used generally accepted in the field or supported by data gathered and recorded in a scientific manner?	Yes	X	No		N/A	
1.4.2.6	Are new technical procedures scientifically validated before being used in casework and is the validation documentation available for review?	Yes	X	No		N/A	
1.4.2.7	Are the technical procedures used by the laboratory documented and are the documents available to laboratory personnel for review?	Yes	X	No		N/A	
1.4.2.8	Are appropriate controls and standards specified in the procedures and are they used and documented in the case record to ensure the validity of examination results?	Yes	X	No		N/A	
1.4.2.9	Is the quality of the standard samples and reagents adequate for the procedure used?	Yes	X	No		N/A	
1.4.2.10	Does the laboratory routinely check the reliability of its reagents?	Yes	X	No		N/A	
1.4.2.11	Are the instruments/equipment adequate for the procedures used?	Yes	X	No		N/A	
1.4.2.12	Are the instruments/equipment in proper working order?	Yes	X	No		N/A	
1.4.2.13	Are the instruments/equipment properly calibrated?	Yes	X	No		N/A	

1.4.2.14	Do the examiners generate and does the laboratory maintain, in a case record, all the notes, worksheets, photographs, spectra, printouts, charts and other data or records used by examiners to support their conclusions?	Yes	X	No		N/A	
1.4.2.15	Does the laboratory maintain case related administrative documentation generated and received, in a retrievable form?	Yes	X	No		N/A	
1.4.2.16	Does the laboratory have, use and document a system of peer review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?	Yes	X	No		N/A	
1.4.2.17	Does the laboratory conduct and document administrative reviews of all reports issued?	Yes	X	No		N/A	
1.4.2.18	Does the laboratory monitor the testimony of each examiner at least annually and is the examiner given feedback from the evaluation?	Yes	X	No		N/A	
1.4.2.19	If the laboratory has an indication of a significant technical problem, is there a procedure in writing and in use whereby the laboratory initiates a review and takes any corrective action required?	Yes	X	No		N/A	
1.4.3.1	Does the laboratory have a documented program of proficiency testing?	Yes	X	No		N/A	
1.4.3.2	Does the laboratory participate in proficiency testing programs conducted by approved test providers, where available?	Yes	X	No		N/A	
1.4.3.3	Does each DNA examiner participate in at least one external proficiency test from an approved test provider?	Yes	X	No		N/A	
1.4.3.4	Was each examiner proficiency tested annually in each subdiscipline in which casework was performed?	Yes	X	No		N/A	
1.4.3.5	Does the laboratory conduct proficiency testing using reexamination or blind techniques?	Yes	X	No		N/A	
Personnel - Management							
2.1.1	Does the laboratory director possess a degree in a natural science, criminalistics or in a closely related field, or is the laboratory director supported by scientific personnel of sufficient managerial rank and authority?	Yes		No		N/A	X
2.1.2	Does the laboratory director have at least five years of forensic science experience?	Yes		No		N/A	X
2.1.3	Does the laboratory director have some formal training in management?	Yes		No		N/A	X
2.1.4	Does the laboratory director have at least two years of managerial experience?	Yes		No		N/A	X

Personnel - Controlled Substances							
2.2.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.2.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.2.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.2.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Toxicology							
2.3.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.3.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.3.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.3.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Trace Evidence							
2.4.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.4.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.4.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.4.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Serology							
2.5.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes	X	No		N/A	
2.5.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes	X	No		N/A	

2.5.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes	X	No		N/A	
2.5.4	Did each examiner successfully complete an annual proficiency test?	Yes	X	No		N/A	
Personnel - DNA							
2.6.1	Does each examiner have education, training and experience consistent with those required by the DNA Advisory Board (DAB)?	Yes	X	No		N/A	
2.6.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes	X	No		N/A	
2.6.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes	X	No		N/A	
2.6.4	Did each examiner successfully complete two proficiency tests annually?	Yes	X	No		N/A	
Personnel - Firearms/Toolmarks							
2.7.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.7.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.7.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.7.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.7.5	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Questioned Documents							
2.8.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.8.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.8.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.8.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.8.5	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Latent Prints							

2.9.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.9.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.9.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.9.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.9.5	Did each examiner successfully complete an annual proficiency test?						X
Personnel - Technical Support							
2.10.1	Do technical support personnel meet the requirements of their job descriptions?	Yes	X	No		N/A	
2.10.2	Are the job descriptions and the duties in agreement?	Yes	X	No		N/A	
2.10.3	Did each member of the technical support staff successfully complete an appropriate competency test prior to assuming casework responsibility?	Yes	X	No		N/A	
2.10.4	Did all technical support personnel successfully complete an appropriate proficiency test, annually?	Yes	X	No		N/A	
Physical Plant							
3.1.1	Does each employee have adequate work space to accomplish assigned tasks?	Yes	X	No		N/A	
3.1.2	Is there sufficient space provided for storage of supplies, equipment and tools?	Yes	X	No		N/A	
3.1.3	Is there adequate space available for examiners for writing reports and other official communications?	Yes	X	No		N/A	
3.1.4	Is there adequate and appropriate space available for records, reference works and other necessary documents?	Yes	X	No		N/A	
3.1.5	Is adequate space available for each instrument to facilitate its operation?	Yes	X	No		N/A	
3.1.6	Are accessories stored near each instrument to facilitate its use and operation?	Yes	X	No		N/A	
Physical Plant - Design							
3.2.1	Does the physical design permit the efficient flow of evidence from the time of its acceptance until its proper disposal?	Yes	X	No		N/A	

3.2.2.	Do the relative locations of functional areas facilitate the use of equipment and instruments?	Yes	X	No		N/A	
3.2.3	Is there adequate and proper lighting available for personnel to carry out assigned tasks?	Yes	X	No		N/A	
3.2.4	Is there adequate and proper plumbing and wiring available and accessible to carry out assigned tasks?	Yes	X	No		N/A	
3.2.5	Does the laboratory have proper general ventilation?	Yes	X	No		N/A	
3.2.6	Is the heating, cooling and humidity control in the laboratory adequate?	Yes	X	No		N/A	
Physical Plant - Security							
3.3.1	Is access to the operational area of the laboratory controllable and limited?	Yes	X	No		N/A	
3.3.2	Do all exterior entrance/exit points have adequate security control?	Yes	X	No		N/A	
3.3.3	Do all internal areas requiring limited/controlled access have a lock system?	Yes	X	No		N/A	
3.3.4	Is distribution of all keys, magnetic cards, etc., documented and is distribution limited to those individuals designated by the laboratory director to have access?	Yes	X	No		N/A	
3.3.5	Is the laboratory secured during vacant hours by means of an intrusion alarm or by security personnel?	Yes	X	No		N/A	
3.3.6	Does the laboratory have a fire detection system?	Yes	X	No		N/A	
Health and Safety							
3.4.1	Does the laboratory have an effective health and safety program documented in a manual?	Yes	X	No		N/A	
3.4.2	Is an individual designated as the health and safety manager?	Yes	X	No		N/A	
3.4.3	Is the health and safety program monitored regularly and reviewed annually to ensure that its requirements are being met?	Yes	X	No		N/A	
3.4.4	Does the laboratory have available and encourage the use of safety devices, particularly those required by its health and safety manual?	Yes	X	No		N/A	
3.4.5	Does the laboratory have proper equipment and material available for the handling of carcinogenic, toxic and/or dangerous material spills?	Yes	X	No		N/A	
3.4.6	Does the laboratory have a safety shower and eye wash equipment in appropriate locations and in good working condition?	Yes	X	No		N/A	

3.4.7	Are sufficient exhaust hoods available to maintain a safe work environment?	Yes	X	No		N/A	
3.4.8	Are sufficient first-aid kits available and strategically located?	Yes	X	No		N/A	
3.4.9	Does the laboratory have an adequate number of personnel holding current certificates in first-aid training?	Yes	X	No		N/A	
3.4.10	Is appropriate space provided for safe storage of volatile, flammable, explosive and other hazardous materials?	Yes	X	No		N/A	
3.4.11	Are the emergency exits from the laboratory adequate for safe exit in an emergency?	Yes	X	No		N/A	
3.4.12	Is there general cleanliness and apparent good-housekeeping in the laboratory?	Yes	X	No		N/A	

ASCLD-LAB Accreditation Grade Computation Sheet		MOLECULAR GENETICS SECTION - 2000 Audit								
Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
		Yes	No	N/A	Yes	No	N/A	Yes	No	N/A
1.1.1.1	Important				1	0	0			
1.1.1.2	Important				1	0	0			
1.1.1.3	Desirable							1	0	0
1.1.2.1	Important				1	0	0			
1.1.2.2	Important				1	0	0			
1.1.2.3	Essential	1	0	0						
1.1.2.4	Essential	1	0	0						
1.1.2.5	Essential	1	0	0						
1.1.2.6	Desirable							1	0	0
1.1.2.7	Essential	1	0	0						
1.1.2.8	Desirable							1	0	0
1.1.2.9	Important				1	0	0			
1.1.2.10	Important				1	0	0			
1.1.2.11	Desirable							1	0	0
1.1.2.12	Desirable							1	0	0
1.1.2.13	Desirable							1	0	0
1.1.2.14	Important				1	0	0			
1.2.1.1	Desirable							1	0	0
1.2.1.2	Desirable							1	0	0
1.2.2.1	Important				1	0	0			
1.2.2.2	Important				1	0	0			
1.2.2.3	Important				1	0	0			
1.2.2.4	Important				1	0	0			
1.2.2.5	Important				1	0	0			
1.2.2.6	Important				1	0	0			
1.3.1.1	Desirable							1	0	0
1.3.1.2	Important				1	0	0			
1.3.1.3	Desirable							1	0	0
1.3.2.1	Desirable							1	0	0
1.3.2.2	Desirable							1	0	0
1.3.2.3	Desirable							1	0	0
1.3.3.1	Essential	1	0	0						
1.3.3.2	Important				1	0	0			
1.3.3.3	Important				1	0	0			
1.3.3.4	Important				1	0	0			
1.4.1.1	Essential	1	0	0						
1.4.1.2	Essential	1	0	0						
1.4.1.3	Essential	1	0	0						
1.4.1.4	Essential	1	0	0						
1.4.1.5	Essential	1	0	0						
1.4.2.1	Essential	1	0	0						
1.4.2.2	Essential	1	0	0						
1.4.2.3	Essential	1	0	0						
1.4.2.4	Essential	1	0	0						
1.4.2.5	Essential	1	0	0						
1.4.2.6	Essential	1	0	0						
1.4.2.7	Essential	1	0	0						
1.4.2.8	Essential	1	0	0						
1.4.2.9	Essential	1	0	0						
1.4.2.10	Essential	1	0	0						
1.4.2.11	Important				1	0	0			
1.4.2.12	Important				1	0	0			
1.4.2.13	Essential	1	0	0						
1.4.2.14	Essential	1	0	0						
1.4.2.15	Essential	1	0	0						
1.4.2.16	Essential	1	0	0						
1.4.2.17	Essential	1	0	0						

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
1.4.2.18	Essential	1	0	0						
1.4.2.19	Essential	1	0	0						
1.4.3.1	Essential	1	0	0						
1.4.3.2	Essential	1	0	0						
1.4.3.3	Essential	1	0	0						
1.4.3.4	Important				1	0	0			
1.4.3.5	Important				1	0	0			
2.1.1	Important				0	0	1			
2.1.2	Desirable							0	0	1
2.1.3	Desirable							0	0	1
2.1.4	Desirable							0	0	1
2.2.1	Essential	0	0	1						
2.2.2	Essential	0	0	1						
2.2.3	Essential	0	0	1						
2.2.4	Essential	0	0	1						
2.3.1	Essential	0	0	1						
2.3.2	Essential	0	0	1						
2.3.3	Essential	0	0	1						
2.3.4	Essential	0	0	1						
2.4.1	Essential	0	0	1						
2.4.2	Essential	0	0	1						
2.4.3	Essential	0	0	1						
2.4.4	Essential	0	0	1						
2.5.1	Essential	1	0	0						
2.5.2	Essential	1	0	0						
2.5.3	Essential	1	0	0						
2.5.4	Essential	1	0	0						
2.6.1	Essential	1	0	0						
2.6.2	Essential	1	0	0						
2.6.3	Essential	1	0	0						
2.6.4	Essential	1	0	0						
2.7.1	Important				0	0	1			
2.7.2	Essential	0	0	1						
2.7.3	Essential	0	0	1						
2.7.4	Essential	0	0	1						
2.7.5	Essential	0	0	1						
2.8.1	Important				0	0	1			
2.8.2	Essential	0	0	1						
2.8.3	Essential	0	0	1						
2.8.4	Essential	0	0	1						
2.8.5	Essential	0	0	1						
2.9.1	Important				0	0	1			
2.9.2	Essential	0	0	1						
2.9.3	Essential	0	0	1						
2.9.4	Essential	0	0	1						
2.9.5	Essential	0	0	1						
2.10.1	Essential	1	0	0						
2.10.2	Essential	1	0	0						
2.10.3	Essential	1	0	0						
2.10.4	Essential	1	0	0						
3.1.1	Important				1	0	0			
3.1.2	Desirable							1	0	0
3.1.3	Important				1	0	0			
3.1.4	Important				1	0	0			
3.1.5	Important				1	0	0			
3.1.6	Desirable							1	0	0
3.2.1	Important				1	0	0			
3.2.2	Desirable							1	0	0
3.2.3	Important				1	0	0			
3.2.4	Important				1	0	0			

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
3.2.5	Important				1	0	0			
3.2.6	Important				1	0	0			
3.3.1	Essential	1	0	0						
3.3.2	Essential	1	0	0						
3.3.3	Essential	1	0	0						
3.3.4	Essential	1	0	0						
3.3.5	Essential	1	0	0						
3.3.6	Important				1	0	0			
3.4.1	Important				1	0	0			
3.4.2	Important				1	0	0			
3.4.3	Important				1	0	0			
3.4.4	Important				1	0	0			
3.4.5	Important				1	0	0			
3.4.6	Important				1	0	0			
3.4.7	Important				1	0	0			
3.4.8	Important				1	0	0			
3.4.9	Important				1	0	0			
3.4.10	Important				1	0	0			
3.4.11	Important				1	0	0			
3.4.12	Desirable							1	0	0
		47	0	24	42	0	4	17	0	3

Possible		Total Possible After Subtracting Non-Applicable	
Desirable	20	Desirbale minus Non-Applicable "Ds"	17
Important	46	Important minus Non-Applicable "Is"	42
Essential	71	Essential minus Non-Applicable "Es"	47
		106	Total Applicable Standards

	Total Number Possible	Total Yes	Total No
Essential	47	47	0
Important	42	42	0
Desirable	17	17	0

Calculations	
% Essential	100.00
% Important	100.00
% Desirable	100.00

Standards	
% Essential	100
% Important	75
% Desirable	50

NORTH CAROLINA
STATE BUREAU OF INVESTIGATION
DEPARTMENT OF JUSTICE

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MICHAEL F. EASLEY
ATTORNEY GENERAL

BRYAN E. BEATTY
DIRECTOR

MEMORANDUM:

TO : Molecular Genetics Section

FROM : SAC Mark Nelson

SUBJECT : RESULTS FROM OUR RECENT INTERNAL ASCLD/LAB AUDIT

DATE : May 1, 2000

Our internal ASCLD/LAB compliance audit went very well, but there are a few items we need to fine tune or brush up on. I've listed these items below:

- There was only one instance of evidence-related problems. The ECU analyst didn't identify their evidence before transferring it to an agent. Agents are reminded that they are to immediately identify evidence when receiving it from ECU, and the best place to do this is near the ECU markings. If this had been done, the problem would have been caught.
- One bottle of hydrogen peroxide was found that had been expired for 2 years. Body fluid analysts are reminded that stock peroxide solutions remain in the stock room refrigerator and not in the refrigerators in their work area.
- Do not retain buffers associated with the ABA cards. Use the buffer for the tests you run and throw out the remainder of the material.
- Body fluid identification agents are reminded that the refrigerator in your shared work area is to be used ONLY for the short term storage of liquid blood samples and kits...until the bloodstains are made....which by Section policy is to occur within 2 days of receipt.
- Case files:
  - If you insert pages (eg. Page 2a) into a case file....put the total number of pages on the cover sheet and add "+ Page 2a" below the total number of pages. Similarity if you find pages missing (misnumbering problem) ,, note that on the cover sheet (Page 15 missing).
  - Make sure the LIMS cover sheet is not included in the case files.

- Please discontinue the use of rubber stamps that say Page __of ___. Reviewers expect something to be in the 2nd blank space.
- Make sure that all corrections (whether you make a correction to a note you made or if you are changing a pre-printed form) are initialed single strike thrus.
- Make sure that if you are working a pre-LIMS case that has a new LIMS number, that you cross reference the old case number above the header to the report.
- Reviewers shouldn't correct another analyst's work, even though they initial the strike-thru.
- Make sure all film is labeled with the case number and your initials, at minimum. All film should also be secured to the notes with tape.

- Do NOT store old proficiency tests in evidence lockers or drawers. Remember to turn in remaining Proficiency test samples to David Freeman for use in our training program.

I should note that the problems noted above were limited to isolated instances and do not constitute non-compliance issues. I raise the issues to help raise awareness of the analysts and reviewers to look for these issues in case files and practices.

I require this section to initial administrative files, something not done in other sections of this lab. We can have higher standards that required, and I want to keep doing this since I want you to always be in practice initialing your notes and files.

The audit team also suggested that we mark bottles of chemicals with the date received in the lab, as well as the date we open them. There is no Bureau policy on this, but the auditors indicated that there probably would be in the future. I want this practice to start immediately, and our section manuals will be updated to reflect this around September, 2000.

cc: Assistant Director A.R. Stevens
Deputy Assistant Director J. K. Neuner

00memo/ascldaudit.wpd

From: Mark Nelson
To: Neuner, John
Subject: April , 2000 ASCLD-LAB AUdit

John-

You asked that I respond in writing to a comment made by Jenny Elwell to one of the auditors about concern in participating in DNA proficiencies without official training in PowerPlex technologies.

First off Jeny was trained in CTTA STR analysis and wished to keep her DNA training certification active. In 1998 we changed from CTTA STR testing to PowerPlex 1.1, which encompased 5 additional loci. Jenny's profciency tests were in interpretation only, and **she was given these tests to accomodate her desires to keep her status as a DNA qualified analyst.**

With the addition of PowerPlex 2.1 technologies, it has become apparent that Jenny would have to undergo a complete re-training. Therefore I have decided to not administer any more DNA proficiency tests to her. This was covered in a recent section meeting, and now formalized in writing.

I am also copying this e-mail message to our CODIS State Administrator, Buddy Early, with instructions that he remove Jenny's access to CODIS and file a stop date for her immediately. This is necessary since CODIS will expect proficiency tesing records every 6 months for all DNA analysts, and if we don't put a stop date on Jenny, we will be in violation of NDIS regulations.

Buddy - Please send me a copy of the paperwork you send to Barry Brown for Jenny's stop date.

SAC Mark Nelson
6/23/00

CC: bearly; Jelwell

2000 Annual Internal Audit of the

QUESTIONED DOCUMENTS SECTION

to determine compliance with ASCLD-LAB Standards & Criteria

February 2000

North Carolina State Bureau of Investigation
Crime Laboratory Division

Deputy Assistant Director John Neuner
Special Agent Ron Marrs

AMS 6/21/00

North Carolina State Bureau of Investigation
Crime Laboratory Division

February 2000

Annual Internal ASCLD-LAB Compliance Audit Questioned Documents Section

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Audit Team:

As required by ASCLD-LAB, an annual compliance audit was conducted of the Questioned Documents during February 2000.

The audit was conducted by Deputy Assistant Director John Neuner and Special Agent Ron Marrs.

Compliance with ASCLD-LAB Standards and Criteria:

The audit revealed that ninety-nine (99) of the one-hundred-thirty-seven (137) accreditation criteria are applicable to the operations of the Questioned Documents Section. More specifically, there are forty (40) Essential criteria, forty-two (42) Important criteria, and seventeen (17) Desirable criteria that are applicable to the operations of this section.

To meet accreditation standards, ASCLD-LAB requires that a laboratory meet 100% of the Essential criteria, 75% of the Important criteria, and 50% of the Desirable criteria. The final calculations for the Questioned Documents Section are:

Essential Standards	100% Compliance
Important Standards	100% Compliance
Desirable Standards	100% Compliance

Overall, the audit revealed an outstanding effort at on-going compliance with ASCLD-LAB standards and all employees of the section are to be commended for their continuing efforts to comply with accreditation standards and criteria.

Other Observations/Comments/Recommendations:

Though not rising to the level of non-compliance with published ASCLD-LAB standards and criteria, the following observations, comments, and recommendations were gathered during the audit process:

- Only one evidence issue was noted. The submitting officer's seals were not initialed and had not been remediated. The oversight was corrected on the spot.
- SAC David Dunn was notified that effective immediately original initials must appear on all pages of case notes and administrative documents contained within a case file.
- The section should continue working on updating their Quality Manual.
- All stock chemicals received from vendors should be labeled with the date received, the date opened, and a date of expiration (or "Expiration - N/A").
- When placed in the back of a case file, envelopes of pictures or other illustrative documents should not be sealed in such a manner as to create an appearance that we regard these as evidence.
- Training files for analysts who completed training prior to the creation of a documented training program in the section should contain a memo stating that the employee did undergo training and has demonstrated their skills and abilities through on-going proficiency testing.
- MSDS for office supplies should be available for all employees.
- At the time of the audit, the section did not have a sufficient number of personnel with current first-aid certification. The deficiency has since been corrected.

Employee Comments:

- The laboratory has made too many small rules and we have created narrow ranges in which to operate. We are micro-managing ourselves.
- Employees do feel *encouraged* to review new literature, but cannot find the time.

Annual Internal ASCLD-LAB Compliance Audit

Laboratory Management - Planning							
1.1.1.1	Does the laboratory have a written statement of its objectives?	Yes	X	No		N/A	
1.1.1.2	Do the objectives appear to be relevant to the needs of the community serviced by the laboratory?	Yes	X	No		N/A	
1.1.1.3	Does the laboratory staff understand and support the objectives?	Yes	X	No		N/A	
1.1.2.1	Does the laboratory or its parent agency have a formal written budget?	Yes	X	No		N/A	
1.1.2.2	Is the budget adequate to meet the written objectives?	Yes	X	No		N/A	
Do clearly written and well understood procedures exist for the following:							
1.1.2.3	Handling and preserving the integrity of evidence	Yes	X	No		N/A	
1.1.2.4	Laboratory security	Yes	X	No		N/A	
1.1.2.5	Preparation, storage, security and disposition of case records or reports	Yes	X	No		N/A	
1.1.2.6	Control of materials and supplies	Yes	X	No		N/A	
1.1.2.7	Calibration of equipment and instruments	Yes	X	No		N/A	
1.1.2.8	Inventory of equipment and instruments	Yes	X	No		N/A	
1.1.2.9	Duty hours	Yes	X	No		N/A	
1.1.2.10	Leave time	Yes	X	No		N/A	
1.1.2.11	Job requirements and descriptions	Yes	X	No		N/A	
1.1.2.12	Personnel evaluations and objectives	Yes	X	No		N/A	
1.1.2.13	Employee grievances	Yes	X	No		N/A	
1.1.2.14	Does the laboratory have and use a management information system?	Yes	X	No		N/A	

Laboratory Management - Organizing							
1.2.1.1	Does the organizational structure group the work and personnel in a manner that allows for efficiency of operation, taking into account the interpretation of various forensic disciplines?	Yes	X	No		N/A	
1.2.1.2	Has the laboratory director considered and taken appropriate action to correct any discrepancies with regard to numbers of personnel when grouping work and resources?	Yes	X	No		N/A	
1.2.2.1	Is the laboratory director's authority well defined?	Yes	X	No		N/A	
1.2.2.2	Does the laboratory director have authority commensurate with responsibilities?	Yes	X	No		N/A	
1.2.2.3	Is there sufficient delegation of authority?	Yes	X	No		N/A	
1.2.2.4	Is authority of supervisors commensurate with their responsibilities?	Yes	X	No		N/A	
1.2.2.5	Is each subordinate accountable to one and only one immediate supervisor?	Yes	X	No		N/A	
1.2.2.6	Are performance expectations established and are they understood by laboratory personnel?	Yes	X	No		N/A	
Laboratory Management - Directing							
1.3.1.1	Is there constructive discussion between supervisors and subordinates?	Yes	X	No		N/A	
1.3.1.2	Do supervisors carefully and objectively review laboratory activities and personnel?	Yes	X	No		N/A	
1.3.1.3	Do the supervisory techniques encourage creative, objective thinking and recognize meritorious performance?	Yes	X	No		N/A	
1.3.2.1	Do clear vertical, horizontal and diagonal channels of communication exist within and external to the laboratory?	Yes	X	No		N/A	
1.3.2.2	Are vertical channels of communication used for administrative functions?	Yes	X	No		N/A	
1.3.2.3	Are staff meetings held on a regular basis?	Yes	X	No		N/A	
1.3.3.1	Does the laboratory have and use a documented training program in each functional area for employees who are new, untrained or in need of remedial training?	Yes	X	No		N/A	
1.3.3.2	Does the laboratory have an employee development program?	Yes	X	No		N/A	
1.3.3.3	Does the forensic library contain current books, journals, and other literature dealing with each functional area?	Yes	X	No		N/A	

1.3.3.4	Does a system exist to encourage each examiner to review appropriate new literature?	Yes	X	No		N/A	
Laboratory Management - Controlling							
1.4.1.1	Does the laboratory have a written or secure electronic chain of custody record with all necessary data which provides for complete tracking of all evidence?	Yes	X	No		N/A	
1.4.1.2	Is all evidence marked for identification?	Yes	X	No		N/A	
1.4.1.3	Is evidence stored under proper seal?	Yes	X	No		N/A	
1.4.1.4	Is evidence protected from loss, cross transfer, contamination and/or deleterious changes?	Yes	X	No		N/A	
1.4.1.5	Is there a secure area for overnight and/or long-term storage of evidence?	Yes	X	No		N/A	
1.4.2.1	Does the laboratory have a quality manual?	Yes	X	No		N/A	
1.4.2.2	Is an individual designated as the quality manager?	Yes	X	No		N/A	
1.4.2.3	Are audits of the management operations and disciplines of the laboratory completed and documented annually?	Yes	X	No		N/A	
1.4.2.4	Does the laboratory conduct and document an annual review of its quality system?	Yes	X	No		N/A	
1.4.2.5	Are the procedures used generally accepted in the field or supported by data gathered and recorded in a scientific manner?	Yes	X	No		N/A	
1.4.2.6	Are new technical procedures scientifically validated before being used in casework and is the validation documentation available for review?	Yes		No		N/A	X
1.4.2.7	Are the technical procedures used by the laboratory documented and are the documents available to laboratory personnel for review?	Yes	X	No		N/A	
1.4.2.8	Are appropriate controls and standards specified in the procedures and are they used and documented in the case record to ensure the validity of examination results?	Yes	X	No		N/A	
1.4.2.9	Is the quality of the standard samples and reagents adequate for the procedure used?	Yes	X	No		N/A	
1.4.2.10	Does the laboratory routinely check the reliability of its reagents?	Yes	X	No		N/A	
1.4.2.11	Are the instruments/equipment adequate for the procedures used?	Yes	X	No		N/A	
1.4.2.12	Are the instruments/equipment in proper working order?	Yes	X	No		N/A	
1.4.2.13	Are the instruments/equipment properly calibrated?	Yes		No		N/A	X

1.4.2.14	Do the examiners generate and does the laboratory maintain, in a case record, all the notes, worksheets, photographs, spectra, printouts, charts and other data or records used by examiners to support their conclusions?	Yes	X	No		N/A	
1.4.2.15	Does the laboratory maintain case related administrative documentation generated and received, in a retrievable form?	Yes	X	No		N/A	
1.4.2.16	Does the laboratory have, use and document a system of peer review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?	Yes	X	No		N/A	
1.4.2.17	Does the laboratory conduct and document administrative reviews of all reports issued?	Yes	X	No		N/A	
1.4.2.18	Does the laboratory monitor the testimony of each examiner at least annually and is the examiner given feedback from the evaluation?	Yes	X	No		N/A	
1.4.2.19	If the laboratory has an indication of a significant technical problem, is there a procedure in writing and in use whereby the laboratory initiates a review and takes any corrective action required?	Yes	X	No		N/A	
1.4.3.1	Does the laboratory have a documented program of proficiency testing?	Yes	X	No		N/A	
1.4.3.2	Does the laboratory participate in proficiency testing programs conducted by approved test providers, where available?	Yes	X	No		N/A	
1.4.3.3	Does each DNA examiner participate in at least one external proficiency test from an approved test provider?	Yes		No		N/A	X
1.4.3.4	Was each examiner proficiency tested annually in each subdiscipline in which casework was performed?	Yes	X	No		N/A	
1.4.3.5	Does the laboratory conduct proficiency testing using reexamination or blind techniques?	Yes		No		N/A	X
Personnel - Management							
2.1.1	Does the laboratory director possess a degree in a natural science, criminalistics or in a closely related field, or is the laboratory director supported by scientific personnel of sufficient managerial rank and authority?	Yes		No		N/A	X
2.1.2	Does the laboratory director have at least five years of forensic science experience?	Yes		No		N/A	X
2.1.3	Does the laboratory director have some formal training in management?	Yes		No		N/A	X
2.1.4	Does the laboratory director have at least two years of managerial experience?	Yes		No		N/A	X

Personnel - Controlled Substances							
2.2.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.2.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.2.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.2.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Toxicology							
2.3.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.3.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.3.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.3.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Trace Evidence							
2.4.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.4.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.4.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.4.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Serology							
2.5.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.5.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X

2.5.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.5.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - DNA							
2.6.1	Does each examiner have education, training and experience consistent with those required by the DNA Advisory Board (DAB)?	Yes		No		N/A	X
2.6.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.6.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.6.4	Did each examiner successfully complete two proficiency tests annually?	Yes		No		N/A	X
Personnel - Firearms/Toolmarks							
2.7.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.7.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.7.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.7.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.7.5	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Questioned Documents							
2.8.1	Does each examiner possess a baccalaureate degree with science courses?	Yes	X	No		N/A	
2.8.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes	X	No		N/A	
2.8.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes	X	No		N/A	
2.8.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes	X	No		N/A	
2.8.5	Did each examiner successfully complete an annual proficiency test?	Yes	X	No		N/A	
Personnel - Latent Prints							

2.9.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.9.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.9.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.9.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.9.5	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Technical Support							
2.10.1	Do technical support personnel meet the requirements of their job descriptions?	Yes	X	No		N/A	
2.10.2	Are the job descriptions and the duties in agreement?	Yes	X	No		N/A	
2.10.3	Did each member of the technical support staff successfully complete an appropriate competency test prior to assuming casework responsibility?	Yes	X	No		N/A	
2.10.4	Did all technical support personnel successfully complete an appropriate proficiency test, annually?	Yes	X	No		N/A	
Physical Plant							
3.1.1	Does each employee have adequate work space to accomplish assigned tasks?	Yes	X	No		N/A	
3.1.2	Is there sufficient space provided for storage of supplies, equipment and tools?	Yes	X	No		N/A	
3.1.3	Is there adequate space available for examiners for writing reports and other official communications?	Yes	X	No		N/A	
3.1.4	Is there adequate and appropriate space available for records, reference works and other necessary documents?	Yes	X	No		N/A	
3.1.5	Is adequate space available for each instrument to facilitate its operation?	Yes	X	No		N/A	
3.1.6	Are accessories stored near each instrument to facilitate its use and operation?	Yes	X	No		N/A	
Physical Plant - Design							
3.2.1	Does the physical design permit the efficient flow of evidence from the time of its acceptance until its proper disposal?	Yes	X	No		N/A	

3.2.2.	Do the relative locations of functional areas facilitate the use of equipment and instruments?	Yes	X	No		N/A	
3.2.3	Is there adequate and proper lighting available for personnel to carry out assigned tasks?	Yes	X	No		N/A	
3.2.4	Is there adequate and proper plumbing and wiring available and accessible to carry out assigned tasks?	Yes	X	No		N/A	
3.2.5	Does the laboratory have proper general ventilation?	Yes	X	No		N/A	
3.2.6	Is the heating, cooling and humidity control in the laboratory adequate?	Yes	X	No		N/A	
Physical Plant - Security							
3.3.1	Is access to the operational area of the laboratory controllable and limited?	Yes	X	No		N/A	
3.3.2	Do all exterior entrance/exit points have adequate security control?	Yes	X	No		N/A	
3.3.3	Do all internal areas requiring limited/controlled access have a lock system?	Yes	X	No		N/A	
3.3.4	Is distribution of all keys, magnetic cards, etc., documented and is distribution limited to those individuals designated by the laboratory director to have access?	Yes	X	No		N/A	
3.3.5	Is the laboratory secured during vacant hours by means of an intrusion alarm or by security personnel?	Yes	X	No		N/A	
3.3.6	Does the laboratory have a fire detection system?	Yes	X	No		N/A	
Health and Safety							
3.4.1	Does the laboratory have an effective health and safety program documented in a manual?	Yes	X	No		N/A	
3.4.2	Is an individual designated as the health and safety manager?	Yes	X	No		N/A	
3.4.3	Is the health and safety program monitored regularly and reviewed annually to ensure that its requirements are being met?	Yes	X	No		N/A	
3.4.4	Does the laboratory have available and encourage the use of safety devices, particularly those required by its health and safety manual?	Yes	X	No		N/A	
3.4.5	Does the laboratory have proper equipment and material available for the handling of carcinogenic, toxic and/or dangerous material spills?	Yes	X	No		N/A	
3.4.6	Does the laboratory have a safety shower and eye wash equipment in appropriate locations and in good working condition?	Yes	X	No		N/A	

3.4.7	Are sufficient exhaust hoods available to maintain a safe work environment?	Yes	X	No		N/A	
3.4.8	Are sufficient first-aid kits available and strategically located?	Yes	X	No		N/A	
3.4.9	Does the laboratory have an adequate number of personnel holding current certificates in first-aid training?	Yes	X	No		N/A	
3.4.10	Is appropriate space provided for safe storage of volatile, flammable, explosive and other hazardous materials?	Yes	X	No		N/A	
3.4.11	Are the emergency exits from the laboratory adequate for safe exit in an emergency?	Yes	X	No		N/A	
3.4.12	Is there general cleanliness and apparent good-housekeeping in the laboratory?	Yes	X	No		N/A	

ASCLD-LAB Accreditation Grade Computation Sheet						QUESTIONED DOCUMENTS SECTION - 2000 Audit					
Criteria		ESSENTIAL			IMPORTANT			DESIRABLE			
		Yes	No	N/A	Yes	No	N/A	Yes	No	N/A	
1.1.1.1	Important				1	0	0				
1.1.1.2	Important				1	0	0				
1.1.1.3	Desirable							1	0	0	
1.1.2.1	Important				1	0	0				
1.1.2.2	Important				1	0	0				
1.1.2.3	Essential	1	0	0							
1.1.2.4	Essential	1	0	0							
1.1.2.5	Essential	1	0	0							
1.1.2.6	Desirable							1	0	0	
1.1.2.7	Essential	1	0	0							
1.1.2.8	Desirable							1	0	0	
1.1.2.9	Important				1	0	0				
1.1.2.10	Important				1	0	0				
1.1.2.11	Desirable							1	0	0	
1.1.2.12	Desirable							1	0	0	
1.1.2.13	Desirable							1	0	0	
1.1.2.14	Important				1	0	0				
1.2.1.1	Desirable							1	0	0	
1.2.1.2	Desirable							1	0	0	
1.2.2.1	Important				1	0	0				
1.2.2.2	Important				1	0	0				
1.2.2.3	Important				1	0	0				
1.2.2.4	Important				1	0	0				
1.2.2.5	Important				1	0	0				
1.2.2.6	Important				1	0	0				
1.3.1.1	Desirable							1	0	0	
1.3.1.2	Important				1	0	0				
1.3.1.3	Desirable							1	0	0	
1.3.2.1	Desirable							1	0	0	
1.3.2.2	Desirable							1	0	0	
1.3.2.3	Desirable							1	0	0	
1.3.3.1	Essential	1	0	0							
1.3.3.2	Important				1	0	0				
1.3.3.3	Important				1	0	0				
1.3.3.4	Important				1	0	0				
1.4.1.1	Essential	1	0	0							
1.4.1.2	Essential	1	0	0							
1.4.1.3	Essential	1	0	0							
1.4.1.4	Essential	1	0	0							
1.4.1.5	Essential	1	0	0							
1.4.2.1	Essential	1	0	0							
1.4.2.2	Essential	1	0	0							
1.4.2.3	Essential	1	0	0							
1.4.2.4	Essential	1	0	0							
1.4.2.5	Essential	1	0	0							
1.4.2.6	Essential	0	0	1							
1.4.2.7	Essential	1	0	0							
1.4.2.8	Essential	1	0	0							
1.4.2.9	Essential	1	0	0							
1.4.2.10	Essential	1	0	0							
1.4.2.11	Important				1	0	0				
1.4.2.12	Important				1	0	0				
1.4.2.13	Essential	0	0	1							
1.4.2.14	Essential	1	0	0							
1.4.2.15	Essential	1	0	0							
1.4.2.16	Essential	1	0	0							
1.4.2.17	Essential	1	0	0							

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
1.4.2.18	Essential	1	0	0						
1.4.2.19	Essential	1	0	0						
1.4.3.1	Essential	1	0	0						
1.4.3.2	Essential	1	0	0						
1.4.3.3	Essential	0	0	1						
1.4.3.4	Important				1	0	0			
1.4.3.5	Important				0	0	1			
2.1.1	Important				0	0	1			
2.1.2	Desirable							0	0	1
2.1.3	Desirable							0	0	1
2.1.4	Desirable							0	0	1
2.2.1	Essential	0	0	1						
2.2.2	Essential	0	0	1						
2.2.3	Essential	0	0	1						
2.2.4	Essential	0	0	1						
2.3.1	Essential	0	0	1						
2.3.2	Essential	0	0	1						
2.3.3	Essential	0	0	1						
2.3.4	Essential	0	0	1						
2.4.1	Essential	0	0	1						
2.4.2	Essential	0	0	1						
2.4.3	Essential	0	0	1						
2.4.4	Essential	0	0	1						
2.5.1	Essential	0	0	1						
2.5.2	Essential	0	0	1						
2.5.3	Essential	0	0	1						
2.5.4	Essential	0	0	1						
2.6.1	Essential	0	0	1						
2.6.2	Essential	0	0	1						
2.6.3	Essential	0	0	1						
2.6.4	Essential	0	0	1						
2.7.1	Important				0	0	1			
2.7.2	Essential	0	0	1						
2.7.3	Essential	0	0	1						
2.7.4	Essential	0	0	1						
2.7.5	Essential	0	0	1						
2.8.1	Important				1	0	0			
2.8.2	Essential	1	0	0						
2.8.3	Essential	1	0	0						
2.8.4	Essential	1	0	0						
2.8.5	Essential	1	0	0						
2.9.1	Important				0	0	1			
2.9.2	Essential	0	0	1						
2.9.3	Essential	0	0	1						
2.9.4	Essential	0	0	1						
2.9.5	Essential	0	0	1						
2.10.1	Essential	1	0	0						
2.10.2	Essential	1	0	0						
2.10.3	Essential	1	0	0						
2.10.4	Essential	1	0	0						
3.1.1	Important				1	0	0			
3.1.2	Desirable							1	0	0
3.1.3	Important				1	0	0			
3.1.4	Important				1	0	0			
3.1.5	Important				1	0	0			
3.1.6	Desirable							1	0	0
3.2.1	Important				1	0	0			
3.2.2	Desirable							1	0	0
3.2.3	Important				1	0	0			
3.2.4	Important				1	0	0			

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
3.2.5	Important				1	0	0			
3.2.6	Important				1	0	0			
3.3.1	Essential	1	0	0						
3.3.2	Essential	1	0	0						
3.3.3	Essential	1	0	0						
3.3.4	Essential	1	0	0						
3.3.5	Essential	1	0	0						
3.3.6	Important				1	0	0			
3.4.1	Important				1	0	0			
3.4.2	Important				1	0	0			
3.4.3	Important				1	0	0			
3.4.4	Important				1	0	0			
3.4.5	Important				1	0	0			
3.4.6	Important				1	0	0			
3.4.7	Important				1	0	0			
3.4.8	Important				1	0	0			
3.4.9	Important				1	0	0			
3.4.10	Important				1	0	0			
3.4.11	Important				1	0	0			
3.4.12	Desirable							1	0	0
		40	**0**	**31**	**42**	**0**	**4**	**17**	**0**	**3**

Possible		**Total Possible After Subtracting Non-Applicable**	
Desirable	20	Desirbale minus Non-Applicable "Ds"	17
Important	46	Important minus Non-Applicable "Is"	42
Essential	71	Essential minus Non-Applicable "Es"	40
			99 Total Applicable Standards

	Total Number Possible	Total Yes	Total No
Essential	40	40	0
Important	42	42	0
Desirable	17	17	0

Calculations

% Essential	100.00
% Important	100.00
% Desirable	100.00

Standards

% Essential	100
% Important	75
% Desirable	50

NORTH CAROLINA
STATE BUREAU OF INVESTIGATION
DEPARTMENT OF JUSTICE

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MICHAEL F. EASLEY
ATTORNEY GENERAL

BRYAN E. BEATTY
DIRECTOR

February 11, 2000

COPY

MEMORANDUM

To: SA Tom Currin, SA Mike Creasy, Ken Martin, Cindy Clifton

From: SAC D. C. Dunn

Subject: Results of the Internal Audit - February 9, 2000

Deputy A/D John Neuner and SA Ron Marrs have completed the internal audit of our section with the following findings:

Health & Safety:

3.4.9 Does the laboratory have an adequate number of personnel holding current certificates in first-aid training?

None of the employees have a current certificate in first-aid training. Ken Martin, Safety Officer, will be scheduled for training in this area as soon as possible.

Deputy A/D Neuner suggested that MSDS sheets for office products and cleaning supplies be added to the Material Safety Data Sheets manual. Ken Martin will secure MSDS sheets for these items.

Chemicals

All chemicals should be labeled with the date of receipt as soon as they are received in the Section. Any chemicals received prior to this policy should reflect today's date.

Evidence Seals

A case was found to be improperly sealed. The Evidence Technician failed to properly remediate the seal. Remember to review cases as they are received to ascertain if they are in compliance. You are responsible for compliance as soon as it comes into your possession.

Training

Documentation of training will be done in a "Grandfather" memorandum for David Dunn, Tom Currin and Ken Martin. Deputy A/D Neuner will provide this documentation.

Technical Materials

Effective immediately each Examiner and the Documents Assistant will read technical materials of their choice a minimum of 30 minutes per week. This should be documented on their weekly report under "Administrative" time using "300" as the code.

Case Notes

Remember that note pages must have the *original initials*. Case Numbers, page numbers and case information can be copied.

Attachments to the file (photographs, etc.) should not be sealed so that they don't appear to contain evidence.

DCD:cc

cc: Deputy A/D John Neuner

2000 Annual Internal Audit
of the

TRACE EVIDENCE SECTION

to determine compliance with
ASCLD-LAB Standards & Criteria

April 2000

North Carolina State Bureau of Investigation
Crime Laboratory Division

Deputy Assistant Director John Neuner
Special Agent in Charge Glenn Parham
Special Agent Mark Boodée

AMS
6/21/

North Carolina State Bureau of Investigation
Crime Laboratory Division

April 2000

Annual Internal ASCLD-LAB Compliance Audit

Trace Evidence Section

Audit Team:

As required by ASCLD-LAB, an annual compliance audit was conducted of the Trace Evidence Section during April 2000.

The audit was conducted by Deputy Assistant Director John Neuner, Special Agent in Charge Glenn Parham, and Special Agent Mark Boodée.

Compliance with ASCLD-LAB Standards and Criteria:

The audit revealed that ninety-six (96) of the one-hundred-thirty-seven (137) accreditation criteria are applicable to the operations of the Trace Evidence Section. More specifically, there are thirty-seven (37) Essential criteria, forty-two (42) Important criteria, and seventeen (17) Desirable criteria that are applicable to the operations of this section.

To meet accreditation standards, ASCLD-LAB requires that a laboratory meet 100% of the Essential criteria, 75% of the Important criteria, and 50% of the Desirable criteria. The final calculations for the Trace Evidence Section are:

Essential Standards	100% Compliance
Important Standards	97.62% Compliance
Desirable Standards	100% Compliance

The standard which the Trace Evidence Section failed to meet is:

1.4.2.12 Are the instruments/equipment in proper working order?
Important

Meeting this standard would require that all instruments in current use be fully functional and that all instruments not in use (some for very long periods of time now) be either repaired and placed into service or disposed of in accordance with state regulations.

The current edition of the Technical Procedures Manual contains numerous procedures for which instrumentation is not available.

Overall, the audit revealed an outstanding effort at on-going compliance with ASCLD-LAB standards and all employees of the unit are to be commended for their continuing efforts to comply with accreditation standards and criteria.

Other Observations/Comments/Recommendations:

Though not rising to the level of non-compliance with published ASCLD-LAB standards and criteria, the following observations, comments, and recommendations were gathered during the audit process:

- Physical Match technical procedures were missing from the master copy of the Technical Procedures Manual. SAC Hamlin was able to locate these and place them back into the proper location.

- The August 1999 calibration entry is missing on one instrument. The missing entry appears to be an oversight due to the upgrading of equipment (Old Fire/New Fire installation process). Analysts should be reminded to make notations in calibration logs any time the scheduled calibration cannot be completed for some reason.

- In the Section's quality manual, the list of instruments to be calibrated included instruments which are not actually calibrated (e.g., microscopes and microtone).

- Remind all analysts that every page of case notes must reflect the date the work was performed.

- There were some problems noted with Technical and Administrative reviews not being signed for. SAC Hamlin had already addressed this issue after it was pointed out in a recent Bureau Staff Inspection.

- All dates on all case note pages must be complete. For example **6/15/2000** cannot be written as **6/15**.

- All stock chemicals should be dated with the date received, the date opened, and an expiration date (or "Expiration - N/A").

- All unused blocks on pre-formatted case note sheets must have a strike through them to signify that they were not just simply overlooked. This is not consistently being done.

Employee Comments:

- Need more time to do additional *"research"* on some cases.

  Note: Employee was personally informed by the Laboratory Quality Manager that special circumstances surrounding a case could always be brought to the attention of the laboratory management and that extra time on a case would be approved if necessary and justifiable.

- Employees feel *encouraged* to stay current with relevant scientific literature, but do not feel they have the time.

- We need more people to reduce the caseload per examiner.

Annual Internal ASCLD-LAB Compliance Audit

Laboratory Management - Planning							
1.1.1.1	Does the laboratory have a written statement of its objectives?	Yes	X	No		N/A	
1.1.1.2	Do the objectives appear to be relevant to the needs of the community serviced by the laboratory?	Yes	X	No		N/A	
1.1.1.3	Does the laboratory staff understand and support the objectives?	Yes	X	No		N/A	
1.1.2.1	Does the laboratory or its parent agency have a formal written budget?	Yes	X	No		N/A	
1.1.2.2	Is the budget adequate to meet the written objectives?	Yes	X	No		N/A	
Do clearly written and well understood procedures exist for the following:							
1.1.2.3	Handling and preserving the integrity of evidence	Yes	X	No		N/A	
1.1.2.4	Laboratory security	Yes	X	No		N/A	
1.1.2.5	Preparation, storage, security and disposition of case records or reports	Yes	X	No		N/A	
1.1.2.6	Control of materials and supplies	Yes	X	No		N/A	
1.1.2.7	Calibration of equipment and instruments	Yes	X	No		N/A	
1.1.2.8	Inventory of equipment and instruments	Yes	X	No		N/A	
1.1.2.9	Duty hours	Yes	X	No		N/A	
1.1.2.10	Leave time	Yes	X	No		N/A	
1.1.2.11	Job requirements and descriptions	Yes	X	No		N/A	
1.1.2.12	Personnel evaluations and objectives	Yes	X	No		N/A	
1.1.2.13	Employee grievances	Yes	X	No		N/A	
1.1.2.14	Does the laboratory have and use a management information system?	Yes	X	No		N/A	

Laboratory Management - Organizing							
1.2.1.1	Does the organizational structure group the work and personnel in a manner that allows for efficiency of operation, taking into account the interpretation of various forensic disciplines?	Yes	X	No		N/A	
1.2.1.2	Has the laboratory director considered and taken appropriate action to correct any discrepancies with regard to numbers of personnel when grouping work and resources?	Yes	X	No		N/A	
1.2.2.1	Is the laboratory director's authority well defined?	Yes	X	No		N/A	
1.2.2.2	Does the laboratory director have authority commensurate with responsibilities?	Yes	X	No		N/A	
1.2.2.3	Is there sufficient delegation of authority?	Yes	X	No		N/A	
1.2.2.4	Is authority of supervisors commensurate with their responsibilities?	Yes	X	No		N/A	
1.2.2.5	Is each subordinate accountable to one and only one immediate supervisor?	Yes	X	No		N/A	
1.2.2.6	Are performance expectations established and are they understood by laboratory personnel?	Yes	X	No		N/A	
Laboratory Management - Directing							
1.3.1.1	Is there constructive discussion between supervisors and subordinates?	Yes	X	No		N/A	
1.3.1.2	Do supervisors carefully and objectively review laboratory activities and personnel?	Yes	X	No		N/A	
1.3.1.3	Do the supervisory techniques encourage creative, objective thinking and recognize meritorious performance?	Yes	X	No		N/A	
1.3.2.1	Do clear vertical, horizontal and diagonal channels of communication exist within and external to the laboratory?	Yes	X	No		N/A	
1.3.2.2	Are vertical channels of communication used for administrative functions?	Yes	X	No		N/A	
1.3.2.3	Are staff meetings held on a regular basis?	Yes	X	No		N/A	
1.3.3.1	Does the laboratory have and use a documented training program in each functional area for employees who are new, untrained or in need of remedial training?	Yes	X	No		N/A	
1.3.3.2	Does the laboratory have an employee development program?	Yes	X	No		N/A	
1.3.3.3	Does the forensic library contain current books, journals, and other literature dealing with each functional area?	Yes	X	No		N/A	

1.3.3.4	Does a system exist to encourage each examiner to review appropriate new literature?	Yes	X	No		N/A	
Laboratory Management - Controlling							
1.4.1.1	Does the laboratory have a written or secure electronic chain of custody record with all necessary data which provides for complete tracking of all evidence?	Yes	X	No		N/A	
1.4.1.2	Is all evidence marked for identification?	Yes	X	No		N/A	
1.4.1.3	Is evidence stored under proper seal?	Yes	X	No		N/A	
1.4.1.4	Is evidence protected from loss, cross transfer, contamination and/or deleterious changes?	Yes	X	No		N/A	
1.4.1.5	Is there a secure area for overnight and/or long-term storage of evidence?	Yes	X	No		N/A	
1.4.2.1	Does the laboratory have a quality manual?	Yes	X	No		N/A	
1.4.2.2	Is an individual designated as the quality manager?	Yes	X	No		N/A	
1.4.2.3	Are audits of the management operations and disciplines of the laboratory completed and documented annually?	Yes	X	No		N/A	
1.4.2.4	Does the laboratory conduct and document an annual review of its quality system?	Yes	X	No		N/A	
1.4.2.5	Are the procedures used generally accepted in the field or supported by data gathered and recorded in a scientific manner?	Yes	X	No		N/A	
1.4.2.6	Are new technical procedures scientifically validated before being used in casework and is the validation documentation available for review?	Yes	X	No		N/A	
1.4.2.7	Are the technical procedures used by the laboratory documented and are the documents available to laboratory personnel for review?	Yes	X	No		N/A	
1.4.2.8	Are appropriate controls and standards specified in the procedures and are they used and documented in the case record to ensure the validity of examination results?	Yes	X	No		N/A	
1.4.2.9	Is the quality of the standard samples and reagents adequate for the procedure used?	Yes	X	No		N/A	
1.4.2.10	Does the laboratory routinely check the reliability of its reagents?	Yes	X	No		N/A	
1.4.2.11	Are the instruments/equipment adequate for the procedures used?	Yes	X	No		N/A	
1.4.2.12	Are the instruments/equipment in proper working order?	Yes		No	X	N/A	
1.4.2.13	Are the instruments/equipment properly calibrated?	Yes	X	No		N/A	

1.4.2.14	Do the examiners generate and does the laboratory maintain, in a case record, all the notes, worksheets, photographs, spectra, printouts, charts and other data or records used by examiners to support their conclusions?	Yes	X	No		N/A	
1.4.2.15	Does the laboratory maintain case related administrative documentation generated and received, in a retrievable form?	Yes	X	No		N/A	
1.4.2.16	Does the laboratory have, use and document a system of peer review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?	Yes	X	No		N/A	
1.4.2.17	Does the laboratory conduct and document administrative reviews of all reports issued?	Yes	X	No		N/A	
1.4.2.18	Does the laboratory monitor the testimony of each examiner at least annually and is the examiner given feedback from the evaluation?	Yes	X	No		N/A	
1.4.2.19	If the laboratory has an indication of a significant technical problem, is there a procedure in writing and in use whereby the laboratory initiates a review and takes any corrective action required?	Yes	X	No		N/A	
1.4.3.1	Does the laboratory have a documented program of proficiency testing?	Yes	X	No		N/A	
1.4.3.2	Does the laboratory participate in proficiency testing programs conducted by approved test providers, where available?	Yes	X	No		N/A	
1.4.3.3	Does each DNA examiner participate in at least one external proficiency test from an approved test provider?	Yes		No		N/A	X
1.4.3.4	Was each examiner proficiency tested annually in each subdiscipline in which casework was performed?	Yes	X	No		N/A	
1.4.3.5	Does the laboratory conduct proficiency testing using reexamination or blind techniques?	Yes	X	No		N/A	
Personnel - Management							
2.1.1	Does the laboratory director possess a degree in a natural science, criminalistics or in a closely related field, or is the laboratory director supported by scientific personnel of sufficient managerial rank and authority?	Yes		No		N/A	X
2.1.2	Does the laboratory director have at least five years of forensic science experience?	Yes		No		N/A	X
2.1.3	Does the laboratory director have some formal training in management?	Yes		No		N/A	X
2.1.4	Does the laboratory director have at least two years of managerial experience?	Yes		No		N/A	X

Personnel - Controlled Substances							
2.2.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.2.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.2.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.2.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Toxicology							
2.3.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.3.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.3.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.3.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Trace Evidence							
2.4.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes	X	No		N/A	
2.4.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes	X	No		N/A	
2.4.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes	X	No		N/A	
2.4.4	Did each examiner successfully complete an annual proficiency test?	Yes	X	No		N/A	
Personnel - Serology							
2.5.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.5.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X

2.5.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.5.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - DNA							
2.6.1	Does each examiner have education, training and experience consistent with those required by the DNA Advisory Board (DAB)?	Yes		No		N/A	X
2.6.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.6.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.6.4	Did each examiner successfully complete two proficiency tests annually?	Yes		No		N/A	X
Personnel - Firearms/Toolmarks							
2.7.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.7.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.7.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.7.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.7.5	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Questioned Documents							
2.8.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.8.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.8.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.8.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.8.5	Did each examiner successfully complete an annual proficiency test?						X
Personnel - Latent Prints							

2.9.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.9.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.9.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.9.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.9.5	Did each examiner successfully complete an annual proficiency test?						X
Personnel - Technical Support							
2.10.1	Do technical support personnel meet the requirements of their job descriptions?	Yes		No		N/A	X
2.10.2	Are the job descriptions and the duties in agreement?	Yes		No		N/A	X
2.10.3	Did each member of the technical support staff successfully complete an appropriate competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.10.4	Did all technical support personnel successfully complete an appropriate proficiency test, annually?	Yes		No		N/A	X
Physical Plant							
3.1.1	Does each employee have adequate work space to accomplish assigned tasks?	Yes	X	No		N/A	
3.1.2	Is there sufficient space provided for storage of supplies, equipment and tools?	Yes	X	No		N/A	
3.1.3	Is there adequate space available for examiners for writing reports and other official communications?	Yes	X	No		N/A	
3.1.4	Is there adequate and appropriate space available for records, reference works and other necessary documents?	Yes	X	No		N/A	
3.1.5	Is adequate space available for each instrument to facilitate its operation?	Yes	X	No		N/A	
3.1.6	Are accessories stored near each instrument to facilitate its use and operation?	Yes	X	No		N/A	
Physical Plant - Design							
3.2.1	Does the physical design permit the efficient flow of evidence from the time of its acceptance until its proper disposal?	Yes	X	No		N/A	

3.2.2.	Do the relative locations of functional areas facilitate the use of equipment and instruments?	Yes	X	No		N/A	
3.2.3	Is there adequate and proper lighting available for personnel to carry out assigned tasks?	Yes	X	No		N/A	
3.2.4	Is there adequate and proper plumbing and wiring available and accessible to carry out assigned tasks?	Yes	X	No		N/A	
3.2.5	Does the laboratory have proper general ventilation?	Yes	X	No		N/A	
3.2.6	Is the heating, cooling and humidity control in the laboratory adequate?	Yes	X	No		N/A	
Physical Plant - Security							
3.3.1	Is access to the operational area of the laboratory controllable and limited?	Yes	X	No		N/A	
3.3.2	Do all exterior entrance/exit points have adequate security control?	Yes	X	No		N/A	
3.3.3	Do all internal areas requiring limited/controlled access have a lock system?	Yes	X	No		N/A	
3.3.4	Is distribution of all keys, magnetic cards, etc., documented and is distribution limited to those individuals designated by the laboratory director to have access?	Yes	X	No		N/A	
3.3.5	Is the laboratory secured during vacant hours by means of an intrusion alarm or by security personnel?	Yes	X	No		N/A	
3.3.6	Does the laboratory have a fire detection system?	Yes	X	No		N/A	
Health and Safety							
3.4.1	Does the laboratory have an effective health and safety program documented in a manual?	Yes	X	No		N/A	
3.4.2	Is an individual designated as the health and safety manager?	Yes	X	No		N/A	
3.4.3	Is the health and safety program monitored regularly and reviewed annually to ensure that its requirements are being met?	Yes	X	No		N/A	
3.4.4	Does the laboratory have available and encourage the use of safety devices, particularly those required by its health and safety manual?	Yes	X	No		N/A	
3.4.5	Does the laboratory have proper equipment and material available for the handling of carcinogenic, toxic and/or dangerous material spills?	Yes	X	No		N/A	
3.4.6	Does the laboratory have a safety shower and eye wash equipment in appropriate locations and in good working condition?	Yes	X	No		N/A	

3.4.7	Are sufficient exhaust hoods available to maintain a safe work environment?	Yes	X	No		N/A	
3.4.8	Are sufficient first-aid kits available and strategically located?	Yes	X	No		N/A	
3.4.9	Does the laboratory have an adequate number of personnel holding current certificates in first-aid training?	Yes	X	No		N/A	
3.4.10	Is appropriate space provided for safe storage of volatile, flammable, explosive and other hazardous materials?	Yes	X	No		N/A	
3.4.11	Are the emergency exits from the laboratory adequate for safe exit in an emergency?	Yes	X	No		N/A	
3.4.12	Is there general cleanliness and apparent good-housekeeping in the laboratory?	Yes	X	No		N/A	

ASCLD-LAB Accreditation Grade Computation Sheet					TRACE EVIDENCE SECTION - 2000 Audit					
Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
		Yes	No	N/A	Yes	No	N/A	Yes	No	N/A
1.1.1.1	Important				1	0	0			
1.1.1.2	Important				1	0	0			
1.1.1.3	Desirable							1	0	0
1.1.2.1	Important				1	0	0			
1.1.2.2	Important				1	0	0			
1.1.2.3	Essential	1	0	0						
1.1.2.4	Essential	1	0	0						
1.1.2.5	Essential	1	0	0						
1.1.2.6	Desirable							1	0	0
1.1.2.7	Essential	1	0	0						
1.1.2.8	Desirable							1	0	0
1.1.2.9	Important				1	0	0			
1.1.2.10	Important				1	0	0			
1.1.2.11	Desirable							1	0	0
1.1.2.12	Desirable							1	0	0
1.1.2.13	Desirable							1	0	0
1.1.2.14	Important				1	0	0			
1.2.1.1	Desirable							1	0	0
1.2.1.2	Desirable							1	0	0
1.2.2.1	Important				1	0	0			
1.2.2.2	Important				1	0	0			
1.2.2.3	Important				1	0	0			
1.2.2.4	Important				1	0	0			
1.2.2.5	Important				1	0	0			
1.2.2.6	Important				1	0	0			
1.3.1.1	Desirable							1	0	0
1.3.1.2	Important				1	0	0			
1.3.1.3	Desirable							1	0	0
1.3.2.1	Desirable							1	0	0
1.3.2.2	Desirable							1	0	0
1.3.2.3	Desirable							1	0	0
1.3.3.1	Essential	1	0	0						
1.3.3.2	Important				1	0	0			
1.3.3.3	Important				1	0	0			
1.3.3.4	Important				1	0	0			
1.4.1.1	Essential	1	0	0						
1.4.1.2	Essential	1	0	0						
1.4.1.3	Essential	1	0	0						
1.4.1.4	Essential	1	0	0						
1.4.1.5	Essential	1	0	0						
1.4.2.1	Essential	1	0	0						
1.4.2.2	Essential	1	0	0						
1.4.2.3	Essential	1	0	0						
1.4.2.4	Essential	1	0	0						
1.4.2.5	Essential	1	0	0						
1.4.2.6	Essential	0	0	1						
1.4.2.7	Essential	1	0	0						
1.4.2.8	Essential	1	0	0						
1.4.2.9	Essential	1	0	0						
1.4.2.10	Essential	1	0	0						
1.4.2.11	Important				1	0	0			
1.4.2.12	Important				0	1	0			
1.4.2.13	Essential	1	0	0						
1.4.2.14	Essential	1	0	0						
1.4.2.15	Essential	1	0	0						
1.4.2.16	Essential	1	0	0						
1.4.2.17	Essential	1	0	0						

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
1.4.2.18	Essential	1	0	0						
1.4.2.19	Essential	1	0	0						
1.4.3.1	Essential	1	0	0						
1.4.3.2	Essential	1	0	0						
1.4.3.3	Essential	0	0	1						
1.4.3.4	Important				1	0	0			
1.4.3.5	Important				1	0	0			
2.1.1	Important				0	0	1			
2.1.2	Desirable							0	0	1
2.1.3	Desirable							0	0	1
2.1.4	Desirable							0	0	1
2.2.1	Essential	0	0	1						
2.2.2	Essential	0	0	1						
2.2.3	Essential	0	0	1						
2.2.4	Essential	0	0	1						
2.3.1	Essential	0	0	1						
2.3.2	Essential	0	0	1						
2.3.3	Essential	0	0	1						
2.3.4	Essential	0	0	1						
2.4.1	Essential	1	0	0						
2.4.2	Essential	1	0	0						
2.4.3	Essential	1	0	0						
2.4.4	Essential	1	0	0						
2.5.1	Essential	0	0	1						
2.5.2	Essential	0	0	1						
2.5.3	Essential	0	0	1						
2.5.4	Essential	0	0	1						
2.6.1	Essential	0	0	1						
2.6.2	Essential	0	0	1						
2.6.3	Essential	0	0	1						
2.6.4	Essential	0	0	1						
2.7.1	Important				0	0	1			
2.7.2	Essential	0	0	1						
2.7.3	Essential	0	0	1						
2.7.4	Essential	0	0	1						
2.7.5	Essential	0	0	1						
2.8.1	Important				0	0	1			
2.8.2	Essential	0	0	1						
2.8.3	Essential	0	0	1						
2.8.4	Essential	0	0	1						
2.8.5	Essential	0	0	1						
2.9.1	Important				0	0	1			
2.9.2	Essential	0	0	1						
2.9.3	Essential	0	0	1						
2.9.4	Essential	0	0	1						
2.9.5	Essential	0	0	1						
2.10.1	Essential	0	0	1						
2.10.2	Essential	0	0	1						
2.10.3	Essential	0	0	1						
2.10.4	Essential	0	0	1						
3.1.1	Important				1	0	0			
3.1.2	Desirable							1	0	0
3.1.3	Important				1	0	0			
3.1.4	Important				1	0	0			
3.1.5	Important				1	0	0			
3.1.6	Desirable							1	0	0
3.2.1	Important				1	0	0			
3.2.2	Desirable							1	0	0
3.2.3	Important				1	0	0			
3.2.4	Important				1	0	0			

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
3.2.5	Important				1	0	0			
3.2.6	Important				1	0	0			
3.3.1	Essential	1	0	0						
3.3.2	Essential	1	0	0						
3.3.3	Essential	1	0	0						
3.3.4	Essential	1	0	0						
3.3.5	Essential	1	0	0						
3.3.6	Important				1	0	0			
3.4.1	Important				1	0	0			
3.4.2	Important				1	0	0			
3.4.3	Important				1	0	0			
3.4.4	Important				1	0	0			
3.4.5	Important				1	0	0			
3.4.6	Important				1	0	0			
3.4.7	Important				1	0	0			
3.4.8	Important				1	0	0			
3.4.9	Important				1	0	0			
3.4.10	Important				1	0	0			
3.4.11	Important				1	0	0			
3.4.12	Desirable							1	0	0
		37	**0**	**34**	**41**	**1**	**4**	**17**	**0**	**3**

Possible		Total Possible After Subtracting Non-Applicable	
Desirable	20	Desirbale minus Non-Applicable "Ds"	17
Important	46	Important minus Non-Applicable "Is"	42
Essential	71	Essential minus Non-Applicable "Es"	37
		96	Total Applicable Standards

	Total Number Possible	Total Yes	Total No
Essential	37	37	0
Important	42	41	1
Desirable	17	17	0

Calculations

% Essential	100.00
% Important	97.62
% Desirable	100.00

Standards

% Essential	100
% Important	75
% Desirable	50

NORTH CAROLINA
STATE BUREAU OF INVESTIGATION
DEPARTMENT OF JUSTICE

3320 GARNER ROAD
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MICHAEL F. EASLEY
ATTORNEY GENERAL

BRYAN E. BEATTY
DIRECTOR

MEMORANDUM

TO: John Neuner Deputy Asst. Director / Quality Manager

FROM: Acting Special Agent in Charge Chuck McClelland

DATE: June 19, 2000

SUBJECT: Response to 2000 Annual ASCLD-LAB Internal Audit

Response to Standard 1.4.2.12. (Are the instruments/ equipment in proper working order. (Important):

A request for a Thermal Analysis upgrade is being made in our equipment budget for the next fiscal year. This upgrade would allow the following instrumentation (Differential Thermal Analyzer DTA. Differential Scanning Calorimeter DSC. and the Thermal Mechanical Analyzer TMA) to be of service. It should be noted that the budget request for this upgrade is not high on our priority list for equipment. Should the money not be available for the upgrade then the instrumentation will be disposed of in accordance with state regulations at the end of the fiscal year 2000/2001.

Response to "Bullets" (Other observations/comments/recommendations):

Microscopes and the microtome do not require calibration and were removed from the list of instruments requiring regular calibration.

"Bullets" pertaining to calibration logs. dates on stock chemicals. dates on case notes and unused blocks on pre-formatted case note sheets were addressed with the section in a memo by Acting Special Agent in Charge Chuck McClelland dated June 19, 2000.

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MICHAEL F. EASLEY
ATTORNEY GENERAL

BRYAN E. BEATTY
DIRECTOR

MEMORANDUM

TO: Trace Evidence Section

FROM: SA Chuck McClelland

DATE: June 19, 2000

SUBJECT: 2000 Annual ASCLD-LAB Internal Audit

The overall 2000 Annual ASCLD Internal Audit for our section was outstanding and it was noted that our section should be commended for our continuing efforts to comply with accreditation standards and criteria.

There were a few minor points and reminders made from the inspection audit and they are as follows:

* Notations to calibration logs should be made anytime scheduled calibrations are required. If scheduled calibrations cannot be completed for some reason an entry into the calibration log should be made noting the reason.

*When conducting administrative and/or technical reviews please remember every page of case notes must reflect the date the work was performed. All dates on all case notes must be complete. For example 6/19/2000 cannot be written 6/19. All unused blocks on pre-formatted case note sheets must have a strike through them to signify they were not just simply overlooked.

*All stock chemicals should be dated with the date received, date opened and expiration date (or "Expiration - N/A")

cc: John Neuner Deputy Assistant Director/ Quality Manager

2000 Annual Internal Audit of the

WESTERN REGIONAL LABORATORY

to determine compliance with ASCLD-LAB Standards & Criteria

May 2000

North Carolina State Bureau of Investigation
Crime Laboratory Division

Deputy Assistant Director John Neuner
Supervisor Diane Brown
Special Agent Mark Boodée

APS 6/21/10

North Carolina State Bureau of Investigation
Crime Laboratory Division

May 2000

Annual Internal ASCLD-LAB Compliance Audit

Western Regional Laboratory

Audit Team:

As required by ASCLD-LAB, an annual compliance audit was conducted of the Western Regional Laboratory during May 2000.

The audit was conducted by Deputy Assistant Director John Neuner and Supervisor Diane Brown.

Compliance with ASCLD-LAB Standards and Criteria:

The audit revealed that one-hundred-three (103) of the one-hundred-thirty-seven (137) accreditation criteria are applicable to the operations of the Western Regional Laboratory. More specifically, there are forty-one (41) Essential criteria, forty-two (42) Important criteria, and twenty (20) Desirable criteria that are applicable to the operations of this facility.

To meet accreditation standards, ASCLD-LAB requires that a laboratory meet 100% of the Essential criteria, 75% of the Important criteria, and 50% of the Desirable criteria. The final calculations for the Western Regional Laboratory are:

Essential Standards	100% Compliance
Important Standards	100% Compliance
Desirable Standards	95% Compliance

The standard which the Western Regional Laboratory failed to fully meet is:

1.4.2.12 (Do clearly written and well understood procedures exist for the following:) Employee grievances.
Desirable

Clearly written procedures do exist (DOJ Employee Grievance Policy); however, employees in this laboratory were not aware of the contents of this policy or where it is located (i.e., not clearly understood). Meeting this standard would require SAC Parham to reiterate this information in such a fashion that it does become clearly understood.

In addition, most employees expressed the opinion that the efforts of Assistant Director Stevens kept the Western Regional Laboratory in compliance with the following standard and that there is a need for SAC Parham to place more emphasis here:

1.3.1.3 Do the supervisory techniques encourage creative, objective thinking and recognize meritorious performance?
Desirable

The Audit Team elected to rate the laboratory's compliance with this standard as "Yes" since Assistant Director Stevens is a part of the "supervisory" chain-of-command of this laboratory facility. However, responsibility for compliance should be addressed more fully by SAC Parham in the future.

Overall, the audit revealed an outstanding effort at on-going compliance with ASCLD-LAB standards and all employees of the unit are to be commended for their continuing efforts to comply with accreditation standards and criteria.

Other Observations/Comments/Recommendations:

Though not rising to the level of non-compliance with published ASCLD-LAB standards and criteria, the following observations, comments, and recommendations were gathered during the audit process:

- Date of receipt, expiration date, and date opened needs to appear on all stock chemical containers.

- One analyst had completed laboratory reports on hand (never been mailed) for cases that were 8, 9, and 10 months old. The analyst's defense was that he had been holding the cases pending needed information from the Raleigh Latent Evidence Section. A follow-up with the Raleigh Lab revealed otherwise. Holding completed reports for extended periods is unacceptable. In addition, even if the analyst had been waiting for additional information, SAC Parham should have been notified of the problem well before 8, 9, or 10 months had elapsed.

- The administrative review of case files includes the finished laboratory report and SAC Parham should ensure that the review process in the lab incorporates this - with an emphasis on latent print reports. The Audit team found examples of transposed numbers and other clerical type errors on these reports.

- To reduce the expense of purchasing specially printed SBI evidence mailing envelopes, analysts should not be using them to package evidence to be held for pick-up.

- Pre-formatted case note sheets should not include "pre-printed" results for types of analyses which are not even performed (e.g., microscopic and Duguenois results appearing in a non-marijuana case).

- Analysts should maintain an awareness of the quality when copying a supply of pre-formatted case note sheets. Some pages were observed on which pertinent information (i.e., page number) was getting very weak. A clean and clear *"master"* should be kept on hand from which to make copies.

- Analysts and the evidence technician should check behind each other. There was one example of an electronic transfer not "taking" in the system and a few minor seal issues were noted in the vault.

- Expiration dates were not present on all latent print reagents.

- The facility safety officer should review the laboratory's biological hazard waste practices. There has been no recent pick-up of biological waste. Papers used to cover bench surfaces, used gloves, and/or sharps used during the examination of evidence containing or suspected of containing body fluids should always be placed into the biological waste stream. Are we doing this at this facility?

Employee Comments:

- (SAC Parham) Expressed a concern that the Western Regional Laboratory often feels disconnected from Raleigh (including himself as a manager). For example, SAC/Supervisor meetings are held in Raleigh without his attendance.

- (SAC Parham) Feels that supervisors (including himself) should work less cases so more time could be devoted to addressing management duties.

- *"Elephant-trunk"* venting (like that in the Raleigh lab) is needed in the lab spaces of the Western Regional Laboratory.

- The supervisor of the Western Regional Laboratory is "not objective" in making management decisions. Employee perception is that he may be unfairly "dumping" his share of the casework on full-time chemists.

- Employees expressed that Assistant Director Stevens makes them feel "more appreciated." They reference his regular visits to the laboratory and his efforts to acquire new equipment and furnishings for their facility.

Annual Internal ASCLD-LAB Compliance Audit

Laboratory Management - Planning							
1.1.1.1	Does the laboratory have a written statement of its objectives?	Yes	X	No		N/A	
1.1.1.2	Do the objectives appear to be relevant to the needs of the community serviced by the laboratory?	Yes	X	No		N/A	
1.1.1.3	Does the laboratory staff understand and support the objectives?	Yes	X	No		N/A	
1.1.2.1	Does the laboratory or its parent agency have a formal written budget?	Yes	X	No		N/A	
1.1.2.2	Is the budget adequate to meet the written objectives?	Yes	X	No		N/A	
Do clearly written and well understood procedures exist for the following:							
1.1.2.3	Handling and preserving the integrity of evidence	Yes	X	No		N/A	
1.1.2.4	Laboratory security	Yes	X	No		N/A	
1.1.2.5	Preparation, storage, security and disposition of case records or reports	Yes	X	No		N/A	
1.1.2.6	Control of materials and supplies	Yes	X	No		N/A	
1.1.2.7	Calibration of equipment and instruments	Yes	X	No		N/A	
1.1.2.8	Inventory of equipment and instruments	Yes	X	No		N/A	
1.1.2.9	Duty hours	Yes	X	No		N/A	
1.1.2.10	Leave time	Yes	X	No		N/A	
1.1.2.11	Job requirements and descriptions	Yes	X	No		N/A	
1.1.2.12	Personnel evaluations and objectives	Yes	X	No		N/A	
1.1.2.13	Employee grievances	Yes		No	X	N/A	
1.1.2.14	Does the laboratory have and use a management information system?	Yes	X	No		N/A	

Laboratory Management - Organizing							
1.2.1.1	Does the organizational structure group the work and personnel in a manner that allows for efficiency of operation, taking into account the interpretation of various forensic disciplines?	Yes	X	No		N/A	
1.2.1.2	Has the laboratory director considered and taken appropriate action to correct any discrepancies with regard to numbers of personnel when grouping work and resources?	Yes	X	No		N/A	
1.2.2.1	Is the laboratory director's authority well defined?	Yes	X	No		N/A	
1.2.2.2	Does the laboratory director have authority commensurate with responsibilities?	Yes	X	No		N/A	
1.2.2.3	Is there sufficient delegation of authority?	Yes	X	No		N/A	
1.2.2.4	Is authority of supervisors commensurate with their responsibilities?	Yes	X	No		N/A	
1.2.2.5	Is each subordinate accountable to one and only one immediate supervisor?	Yes	X	No		N/A	
1.2.2.6	Are performance expectations established and are they understood by laboratory personnel?	Yes	X	No		N/A	
Laboratory Management - Directing							
1.3.1.1	Is there constructive discussion between supervisors and subordinates?	Yes	X	No		N/A	
1.3.1.2	Do supervisors carefully and objectively review laboratory activities and personnel?	Yes	X	No		N/A	
1.3.1.3	Do the supervisory techniques encourage creative, objective thinking and recognize meritorious performance?	Yes	X	No		N/A	
1.3.2.1	Do clear vertical, horizontal and diagonal channels of communication exist within and external to the laboratory?	Yes	X	No		N/A	
1.3.2.2	Are vertical channels of communication used for administrative functions?	Yes	X	No		N/A	
1.3.2.3	Are staff meetings held on a regular basis?	Yes	X	No		N/A	
1.3.3.1	Does the laboratory have and use a documented training program in each functional area for employees who are new, untrained or in need of remedial training?	Yes	X	No		N/A	
1.3.3.2	Does the laboratory have an employee development program?	Yes	X	No		N/A	
1.3.3.3	Does the forensic library contain current books, journals, and other literature dealing with each functional area?	Yes	X	No		N/A	

1.3.3.4	Does a system exist to encourage each examiner to review appropriate new literature?	Yes	X	No		N/A	
Laboratory Management - Controlling							
1.4.1.1	Does the laboratory have a written or secure electronic chain of custody record with all necessary data which provides for complete tracking of all evidence?	Yes	X	No		N/A	
1.4.1.2	Is all evidence marked for identification?	Yes	X	No		N/A	
1.4.1.3	Is evidence stored under proper seal?	Yes	X	No		N/A	
1.4.1.4	Is evidence protected from loss, cross transfer, contamination and/or deleterious changes?	Yes	X	No		N/A	
1.4.1.5	Is there a secure area for overnight and/or long-term storage of evidence?	Yes	X	No		N/A	
1.4.2.1	Does the laboratory have a quality manual?	Yes	X	No		N/A	
1.4.2.2	Is an individual designated as the quality manager?	Yes	X	No		N/A	
1.4.2.3	Are audits of the management operations and disciplines of the laboratory completed and documented annually?	Yes	X	No		N/A	
1.4.2.4	Does the laboratory conduct and document an annual review of its quality system?	Yes	X	No		N/A	
1.4.2.5	Are the procedures used generally accepted in the field or supported by data gathered and recorded in a scientific manner?	Yes	X	No		N/A	
1.4.2.6	Are new technical procedures scientifically validated before being used in casework and is the validation documentation available for review?	Yes		No		N/A	X
1.4.2.7	Are the technical procedures used by the laboratory documented and are the documents available to laboratory personnel for review?	Yes	X	No		N/A	
1.4.2.8	Are appropriate controls and standards specified in the procedures and are they used and documented in the case record to ensure the validity of examination results?	Yes	X	No		N/A	
1.4.2.9	Is the quality of the standard samples and reagents adequate for the procedure used?	Yes	X	No		N/A	
1.4.2.10	Does the laboratory routinely check the reliability of its reagents?	Yes	X	No		N/A	
1.4.2.11	Are the instruments/equipment adequate for the procedures used?	Yes	X	No		N/A	
1.4.2.12	Are the instruments/equipment in proper working order?	Yes	X	No		N/A	
1.4.2.13	Are the instruments/equipment properly calibrated?	Yes	X	No		N/A	

1.4.2.14	Do the examiners generate and does the laboratory maintain, in a case record, all the notes, worksheets, photographs, spectra, printouts, charts and other data or records used by examiners to support their conclusions?	Yes	X	No		N/A	
1.4.2.15	Does the laboratory maintain case related administrative documentation generated and received, in a retrievable form?	Yes	X	No		N/A	
1.4.2.16	Does the laboratory have, use and document a system of peer review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?	Yes	X	No		N/A	
1.4.2.17	Does the laboratory conduct and document administrative reviews of all reports issued?	Yes	X	No		N/A	
1.4.2.18	Does the laboratory monitor the testimony of each examiner at least annually and is the examiner given feedback from the evaluation?	Yes	X	No		N/A	
1.4.2.19	If the laboratory has an indication of a significant technical problem, is there a procedure in writing and in use whereby the laboratory initiates a review and takes any corrective action required?	Yes	X	No		N/A	
1.4.3.1	Does the laboratory have a documented program of proficiency testing?	Yes	X	No		N/A	
1.4.3.2	Does the laboratory participate in proficiency testing programs conducted by approved test providers, where available?	Yes	X	No		N/A	
1.4.3.3	Does each DNA examiner participate in at least one external proficiency test from an approved test provider?	Yes		No		N/A	X
1.4.3.4	Was each examiner proficiency tested annually in each subdiscipline in which casework was performed?	Yes		No		N/A	X
1.4.3.5	Does the laboratory conduct proficiency testing using reexamination or blind techniques?	Yes		No		N/A	X
Personnel - Management							
2.1.1	Does the laboratory director possess a degree in a natural science, criminalistics or in a closely related field, or is the laboratory director supported by scientific personnel of sufficient managerial rank and authority?	Yes	X	No		N/A	
2.1.2	Does the laboratory director have at least five years of forensic science experience?	Yes	X	No		N/A	
2.1.3	Does the laboratory director have some formal training in management?	Yes	X	No		N/A	
2.1.4	Does the laboratory director have at least two years of managerial experience?	Yes	X	No		N/A	

Personnel - Controlled Substances							
2.2.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes	X	No		N/A	
2.2.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes	X	No		N/A	
2.2.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes	X	No		N/A	
2.2.4	Did each examiner successfully complete an annual proficiency test?	Yes	X	No		N/A	
Personnel - Toxicology							
2.3.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.3.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.3.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.3.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Trace Evidence							
2.4.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.4.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.4.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.4.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Serology							
2.5.1	Does each examiner possess a baccalaureate degree in a natural science, criminalistsics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.5.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X

2.5.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.5.4	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - DNA							
2.6.1	Does each examiner have education, training and experience consistent with those required by the DNA Advisory Board (DAB)?	Yes		No		N/A	X
2.6.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.6.3	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.6.4	Did each examiner successfully complete two proficiency tests annually?	Yes		No		N/A	X
Personnel - Firearms/Toolmarks							
2.7.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.7.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.7.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.7.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.7.5	Did each examiner successfully complete an annual proficiency test?	Yes		No		N/A	X
Personnel - Questioned Documents							
2.8.1	Does each examiner possess a baccalaureate degree with science courses?	Yes		No		N/A	X
2.8.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes		No		N/A	X
2.8.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes		No		N/A	X
2.8.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes		No		N/A	X
2.8.5	Did each examiner successfully complete an annual proficiency test?						X
Personnel - Latent Prints							

2.9.1	Does each examiner possess a baccalaureate degree with science courses?	Yes	X	No		N/A	
2.9.2	Does each examiner understand the instruments, and the methods and procedures used?	Yes	X	No		N/A	
2.9.3	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	Yes	X	No		N/A	
2.9.4	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	Yes	X	No		N/A	
2.9.5	Did each examiner successfully complete an annual proficiency test?	Yes	X	No		N/A	
Personnel - Technical Support							
2.10.1	Do technical support personnel meet the requirements of their job descriptions?	Yes		No		N/A	X
2.10.2	Are the job descriptions and the duties in agreement?	Yes		No		N/A	X
2.10.3	Did each member of the technical support staff successfully complete an appropriate competency test prior to assuming casework responsibility?	Yes		No		N/A	X
2.10.4	Did all technical support personnel successfully complete an appropriate proficiency test, annually?	Yes		No		N/A	X
Physical Plant							
3.1.1	Does each employee have adequate work space to accomplish assigned tasks?	Yes	X	No		N/A	
3.1.2	Is there sufficient space provided for storage of supplies, equipment and tools?	Yes	X	No		N/A	
3.1.3	Is there adequate space available for examiners for writing reports and other official communications?	Yes	X	No		N/A	
3.1.4	Is there adequate and appropriate space available for records, reference works and other necessary documents?	Yes	X	No		N/A	
3.1.5	Is adequate space available for each instrument to facilitate its operation?	Yes	X	No		N/A	
3.1.6	Are accessories stored near each instrument to facilitate its use and operation?	Yes	X	No		N/A	
Physical Plant - Design							
3.2.1	Does the physical design permit the efficient flow of evidence from the time of its acceptance until its proper disposal?	Yes	X	No		N/A	

3.2.2.	Do the relative locations of functional areas facilitate the use of equipment and instruments?	Yes	X	No		N/A	
3.2.3	Is there adequate and proper lighting available for personnel to carry out assigned tasks?	Yes	X	No		N/A	
3.2.4	Is there adequate and proper plumbing and wiring available and accessible to carry out assigned tasks?	Yes	X	No		N/A	
3.2.5	Does the laboratory have proper general ventilation?	Yes	X	No		N/A	
3.2.6	Is the heating, cooling and humidity control in the laboratory adequate?	Yes	X	No		N/A	
Physical Plant - Security							
3.3.1	Is access to the operational area of the laboratory controllable and limited?	Yes	X	No		N/A	
3.3.2	Do all exterior entrance/exit points have adequate security control?	Yes	X	No		N/A	
3.3.3	Do all internal areas requiring limited/controlled access have a lock system?	Yes	X	No		N/A	
3.3.4	Is distribution of all keys, magnetic cards, etc., documented and is distribution limited to those individuals designated by the laboratory director to have access?	Yes	X	No		N/A	
3.3.5	Is the laboratory secured during vacant hours by means of an intrusion alarm or by security personnel?	Yes	X	No		N/A	
3.3.6	Does the laboratory have a fire detection system?	Yes	X	No		N/A	
Health and Safety							
3.4.1	Does the laboratory have an effective health and safety program documented in a manual?	Yes	X	No		N/A	
3.4.2	Is an individual designated as the health and safety manager?	Yes	X	No		N/A	
3.4.3	Is the health and safety program monitored regularly and reviewed annually to ensure that its requirements are being met?	Yes	X	No		N/A	
3.4.4	Does the laboratory have available and encourage the use of safety devices, particularly those required by its health and safety manual?	Yes	X	No		N/A	
3.4.5	Does the laboratory have proper equipment and material available for the handling of carcinogenic, toxic and/or dangerous material spills?	Yes	X	No		N/A	
3.4.6	Does the laboratory have a safety shower and eye wash equipment in appropriate locations and in good working condition?	Yes	X	No		N/A	

3.4.7	Are sufficient exhaust hoods available to maintain a safe work environment?	Yes	X	No		N/A	
3.4.8	Are sufficient first-aid kits available and strategically located?	Yes	X	No		N/A	
3.4.9	Does the laboratory have an adequate number of personnel holding current certificates in first-aid training?	Yes	X	No		N/A	
3.4.10	Is appropriate space provided for safe storage of volatile, flammable, explosive and other hazardous materials?	Yes	X	No		N/A	
3.4.11	Are the emergency exits from the laboratory adequate for safe exit in an emergency?	Yes	X	No		N/A	
3.4.12	Is there general cleanliness and apparent good housekeeping in the laboratory?	Yes	X	No		N/A	

ASCLD-LAB Accreditation Grade Computation Sheet										WESTERN REGIONAL LABORATORY 2000 Audit
Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
		Yes	No	N/A	Yes	No	N/A	Yes	No	N/A
1.1.1.1	Important	[redacted]			1	0	0	[redacted]		
1.1.1.2	Important				1	0	0			
1.1.1.3	Desirable				[redacted]			1	0	0
1.1.2.1	Important				1	0	0	[redacted]		
1.1.2.2	Important				1	0	0			
1.1.2.3	Essential	1	0	0	[redacted]					
1.1.2.4	Essential	1	0	0				1	0	0
1.1.2.5	Essential	1	0	0				[redacted]		
1.1.2.6	Desirable	[redacted]						1	0	0
1.1.2.7	Essential	1	0	0	1	0	0			
1.1.2.8	Desirable	[redacted]			1	0	0	1	0	0
1.1.2.9	Important				1	0	0	[redacted]		
1.1.2.10	Important				[redacted]			1	0	0
1.1.2.11	Desirable							1	0	0
1.1.2.12	Desirable							0	1	0
1.1.2.13	Desirable							[redacted]		
1.1.2.14	Important				1	0	0	1	0	0
1.2.1.1	Desirable				[redacted]			1	0	0
1.2.1.2	Desirable				1	0	0	[redacted]		
1.2.2.1	Important				1	0	0			
1.2.2.2	Important				1	0	0			
1.2.2.3	Important				1	0	0			
1.2.2.4	Important				1	0	0			
1.2.2.5	Important				1	0	0			
1.2.2.6	Important				[redacted]			1	0	0
1.3.1.1	Desirable				1	0	0	[redacted]		
1.3.1.2	Important				[redacted]			1	0	0
1.3.1.3	Desirable							1	0	0
1.3.2.1	Desirable							1	0	0
1.3.2.2	Desirable							1	0	0
1.3.2.3	Desirable							[redacted]		
1.3.3.1	Essential	1	0	0	1	0	0			
1.3.3.2	Important	[redacted]			1	0	0			
1.3.3.3	Important				1	0	0			
1.3.3.4	Important				[redacted]					
1.4.1.1	Essential	1	0	0						
1.4.1.2	Essential	1	0	0						
1.4.1.3	Essential	1	0	0						
1.4.1.4	Essential	1	0	0						
1.4.1.5	Essential	1	0	0						
1.4.2.1	Essential	1	0	0						
1.4.2.2	Essential	1	0	0						
1.4.2.3	Essential	1	0	0						
1.4.2.4	Essential	1	0	0						
1.4.2.5	Essential	1	0	0						
1.4.2.6	Essential	0	0	1						
1.4.2.7	Essential	1	0	0						
1.4.2.8	Essential	1	0	0						
1.4.2.9	Essential	1	0	0						
1.4.2.10	Essential	1	0	0						
1.4.2.11	Important	[redacted]			1	0	0			
1.4.2.12	Important				1	0	0			
1.4.2.13	Essential	1	0	0	[redacted]					
1.4.2.14	Essential	1	0	0						
1.4.2.15	Essential	1	0	0						
1.4.2.16	Essential	1	0	0						
1.4.2.17	Essential	1	0	0						

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
1.4.2.18	Essential	1	0	0						
1.4.2.19	Essential	1	0	0						
1.4.3.1	Essential	1	0	0						
1.4.3.2	Essential	1	0	0						
1.4.3.3	Essential	0	0	1						
1.4.3.4	Important				0	0	1			
1.4.3.5	Important				0	0	1			
2.1.1	Important				1	0	0			
2.1.2	Desirable							1	0	0
2.1.3	Desirable							1	0	0
2.1.4	Desirable							1	0	0
2.2.1	Essential	1	0	0						
2.2.2	Essential	1	0	0						
2.2.3	Essential	1	0	0						
2.2.4	Essential	1	0	0						
2.3.1	Essential	0	0	1						
2.3.2	Essential	0	0	1						
2.3.3	Essential	0	0	1						
2.3.4	Essential	0	0	1						
2.4.1	Essential	0	0	1						
2.4.2	Essential	0	0	1						
2.4.3	Essential	0	0	1						
2.4.4	Essential	0	0	1						
2.5.1	Essential	0	0	1						
2.5.2	Essential	0	0	1						
2.5.3	Essential	0	0	1						
2.5.4	Essential	0	0	1						
2.6.1	Essential	0	0	1						
2.6.2	Essential	0	0	1						
2.6.3	Essential	0	0	1						
2.6.4	Essential	0	0	1						
2.7.1	Important				0	0	1			
2.7.2	Essential	0	0	1						
2.7.3	Essential	0	0	1						
2.7.4	Essential	0	0	1						
2.7.5	Essential	0	0	1						
2.8.1	Important				0	0	1			
2.8.2	Essential	0	0	1						
2.8.3	Essential	0	0	1						
2.8.4	Essential	0	0	1						
2.8.5	Essential	0	0	1						
2.9.1	Important				1	0	0			
2.9.2	Essential	1	0	0						
2.9.3	Essential	1	0	0						
2.9.4	Essential	1	0	0						
2.9.5	Essential	1	0	0						
2.10.1	Essential	0	0	1						
2.10.2	Essential	0	0	1						
2.10.3	Essential	0	0	1						
2.10.4	Essential	0	0	1						
3.1.1	Important				1	0	0			
3.1.2	Desirable							1	0	0
3.1.3	Important				1	0	0			
3.1.4	Important				1	0	0			
3.1.5	Important				1	0	0			
3.1.6	Desirable							1	0	0
3.2.1	Important				1	0	0			
3.2.2	Desirable							1	0	0
3.2.3	Important				1	0	0			
3.2.4	Important				1	0	0			

Criteria		ESSENTIAL			IMPORTANT			DESIRABLE		
3.2.5	Important				1	0	0			
3.2.6	Important				1	0	0			
3.3.1	Essential	1	0	0						
3.3.2	Essential	1	0	0						
3.3.3	Essential	1	0	0						
3.3.4	Essential	1	0	0						
3.3.5	Essential	1	0	0						
3.3.6	Important				1	0	0			
3.4.1	Important				1	0	0			
3.4.2	Important				1	0	0			
3.4.3	Important				1	0	0			
3.4.4	Important				1	0	0			
3.4.5	Important				1	0	0			
3.4.6	Important				1	0	0			
3.4.7	Important				1	0	0			
3.4.8	Important				1	0	0			
3.4.9	Important				1	0	0			
3.4.10	Important				1	0	0			
3.4.11	Important				1	0	0			
3.4.12	Desirable							1	0	0
		41	0	30	42	0	4	19	1	0

Possible	
Desirable	20
Important	46
Essential	71

Total Possible After Subtracting Non-Applicable	
Desirable minus Non-Applicable "Ds"	20
Important minus Non-Applicable "Is"	42
Essential minus Non-Applicable "Es"	41

103 Total Applicable Standards

	Total Number Possible	Total Yes	Total No
Essential	41	41	0
Important	42	42	0
Desirable	20	19	1

Calculations	
% Essential	100.00
% Important	100.00
% Desirable	95.00

Standards	
% Essential	100
% Important	75
% Desirable	50

NORTH CAROLINA
STATE BUREAU OF INVESTIGATION
DEPARTMENT OF JUSTICE

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MICHAEL F. EASLEY
ATTORNEY GENERAL

BRYAN E. BEATTY
DIRECTOR

MEMORANDUM

TO: Deputy Assistant Director John Neuner

FROM: Special Agent in Charge Glenn Parham

DATE: June 20, 2000

SUBJECT: Response to ASCLD Audit

This memorandum is in response to the compliance audit conducted during May 2000. The Western Lab was in compliance with all applicable standards except 1.4.2.12 (Do clearly written and well understood procedures exist for Employee grievances.) **Desirable**

All employees were given a copy of the grievance procedure. I instructed all employees to become familiar with the grievance procedure. This was done by e-mail on June 19, 2000. The e-mail included the scores for the three standard categories and congratulations for a job well done.