

# ASCLD/LAB® INSPECTION REPORT

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**NORTH CAROLINA STATE BUREAU OF INVESTIGATION  
WESTERN REGIONAL CRIME LABORATORY**

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Inspected: August 27-28, 2003  
Supplemental Inspection Report: December 4, 2003

## INTRODUCTION

This is the Inspection Report of the ASCLD/LAB inspection of the North Carolina State Bureau of Investigation Western Regional Crime Laboratory. The initial inspection was conducted on August 27-28, 2003 using the principles, standards and criteria established in the 2003 version of the ASCLD/LAB Accreditation Manual. Staff Inspector Mike Johnston conducted a follow-up review of the documentation on November 5, 2003.

The ASCLD/LAB inspection team consisted of the following members:

**Craig Ogino, Site Leader**, San Bernardino County Crime Lab, San Bernardino, CA  
**Tom Darnell**, South Carolina Law Enforcement Division, Columbia, SC

## LABORATORY OVERVIEW

The North Carolina State Bureau of Investigation Western Regional Crime Laboratory is located at 9B Walden Ridge Drive, Ashville, North Carolina and is a state laboratory which provides services for the western counties of North Carolina. Laboratory Supervisor Joseph Reavis reports to State Bureau of Investigation Assistant Director Jerry Richardson. The laboratory provides services in Controlled Substances and Latent Prints and has a staff of 6 testifying analysts and 2 support staff.

The Laboratory also provides Crime Scene services but elected not to apply for accreditation in this discipline.

## INSPECTION TEAM FINDINGS

The following document lists each of the ASCLD/LAB Accreditation Standards and Evaluation Criteria from the 2003 Accreditation Manual. Each criterion for which the inspection team determined the laboratory to be in compliance is scored "Yes." Criteria for which the inspection team found the laboratory to not be in total compliance are scored "No." Criteria which are not applicable to the inspection of this laboratory are scored "N/A."

The Summary portion of the report documents the basis for all non-compliance and all non-applicable findings of the Inspection Team.

## STANDARDS AND CRITERIA

*The laboratory should establish objectives which are relevant to the community that it serves and communicate them to all employees orally and in written form.*

	Yes	No	N/A
1.1.1.1 (I) Does the laboratory have a written statement of its objectives?	<u>✓</u>	___	___
1.1.1.2 (I) Do the objectives appear to be relevant to the needs of the community serviced by the laboratory?	<u>✓</u>	___	___
1.1.1.3 (D) Does the laboratory staff understand and support the objectives?	<u>✓</u>	___	___

*A laboratory or its parent agency should have a formal written budget which is consistent with the forensic services provided by it.*

1.1.2.1 (I) Does the laboratory or its parent agency have a formal written budget?	<u>✓</u>	___	___
1.1.2.2 (I) Is the budget adequate to meet the written objectives?	<u>✓</u>	___	___

*Clearly written and well understood procedures must exist for handling and preserving the integrity of evidence; laboratory security; preparation, storage, security and disposition of case records and reports; and for maintenance and calibration of equipment and instruments. Clearly written and well understood procedures should also exist for control of materials and supplies; inventory of equipment and instruments; duty hours; leave time; job requirements and descriptions; personnel evaluations and objectives; and for employee grievances.*

Do clearly written and well understood procedures exist for the following:

1.1.2.3 (E) Handling and preserving the integrity of evidence.	<u>✓</u>	___	___
1.1.2.4 (E) Laboratory security.	<u>✓</u>	___	___
1.1.2.5 (E) Preparation, storage, security and disposition of case records or reports.	<u>✓</u>	___	___
1.1.2.6 (D) Control of materials and supplies.	<u>✓</u>	___	___
1.1.2.7 (E) Calibration of equipment and instruments.	<u>✓</u>	___	___
1.1.2.8 (D) Inventory of equipment and instruments.	<u>✓</u>	___	___
1.1.2.9 (I) Duty hours.	<u>✓</u>	___	___
1.1.2.10 (I) Leave time.	<u>✓</u>	___	___
1.1.2.11 (D) Job requirements and descriptions.	<u>✓</u>	___	___

	Yes	No	N/A
1.1.2.12 (D) Personnel evaluations and objectives.	<u>✓</u>	_____	_____

1.1.2.13 (D) Employee grievances.	<u>✓</u>	_____	_____
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*A laboratory should have a management information system which provides information which assists the laboratory in accomplishing its objectives.*

1.1.2.14 (I) Does the laboratory have and use a management information system?	<u>✓</u>	_____	_____
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*The laboratory manager should be able to relate the organizational structure to interacting variables such as those stated in the principle.*

1.2.1.1 (D) Does the organizational structure group the work and personnel in a manner that allows for efficiency of operation, taking into account the interrelation of various forensic disciplines?	<u>✓</u>	_____	_____
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1.2.1.2 (D) Has the laboratory director considered and taken appropriate action to correct any discrepancies with regard to numbers of personnel when grouping work and resources?	<u>✓</u>	_____	_____
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*The laboratory director should have authority commensurate with the assigned responsibilities.*

1.2.2.1 (I) Is the laboratory director's authority well defined?	<u>✓</u>	_____	_____
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1.2.2.2 (I) Does the laboratory director have authority commensurate with responsibilities?	<u>✓</u>	_____	_____
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*Delegation of authority within the laboratory should follow the organizational process outlined in the principle.*

1.2.2.3 (I) Is there sufficient delegation of authority?	<u>✓</u>	_____	_____
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1.2.2.4 (I) Is authority of supervisors commensurate with their responsibilities?	<u>✓</u>	_____	_____
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1.2.2.5 (I) Is each subordinate accountable to one and only one immediate supervisor per function?	<u>✓</u>	_____	_____
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1.2.2.6 (I) Are performance expectations established and are they understood by laboratory personnel?	<u>✓</u>	_____	_____
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*Constructive discussion should occur between supervisors and subordinates.*

1.3.1.1 (D) Is there constructive discussion between supervisors and subordinates?	<u>✓</u>	_____	_____
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*Supervisors should carefully and objectively review laboratory activities and personnel.*

	Yes	No	N/A
1.3.1.2 (I) Do supervisors carefully and objectively review laboratory activities and personnel?	<u>✓</u>	<u>    </u>	<u>    </u>

*Supervisory techniques should encourage creative thinking and objectivity and should recognize meritorious performance of subordinates.*

1.3.1.3 (D) Do the supervisory techniques encourage creative, objective thinking and recognize meritorious performance?	<u>✓</u>	<u>    </u>	<u>    </u>
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*Channels of communication within the laboratory should exist for coordination of case work and to ensure wide dissemination of technical information. Vertical, horizontal and diagonal channels of communication should exist within and external to the laboratory.*

1.3.2.1 (D) Do clear vertical, horizontal and diagonal channels of communication exist within and external to the laboratory?	<u>✓</u>	<u>    </u>	<u>    </u>
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*Vertical channels of communication should normally be used for administrative functions.*

1.3.2.2 (D) Are vertical channels of communication used for administrative functions?	<u>✓</u>	<u>    </u>	<u>    </u>
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*Staff meetings should be conducted on a regular basis.*

1.3.2.3 (D) Are staff meetings held on a regular basis?	<u>✓</u>	<u>    </u>	<u>    </u>
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*A training program to develop the technical skills of employees is essential in each applicable functional area.*

1.3.3.1 (E) 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?	<u>✓</u>	<u>    </u>	<u>    </u>
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*A formalized personnel development program is important to prepare employees to assume more responsible jobs.*

1.3.3.2 (I) Does the laboratory have an employee development program?	<u>✓</u>	<u>    </u>	<u>    </u>
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*The laboratory should maintain an adequate forensic library to include literature published in the applicable functional areas.*

1.3.3.3 (I) Does the forensic library contain current books, journals, and other literature dealing with each functional area?	<u>✓</u>	<u>    </u>	<u>    </u>
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*A system or procedure should exist to encourage a review of appropriate new literature by personnel.*

	Yes	No	N/A
1.3.3.4 (I) Does a system exist to encourage each examiner to review appropriate new literature?	<u>✓</u>	___	___

*A chain of custody record (e.g., signature, date, description of evidence) must be maintained which provides a comprehensive, documented history of each evidence transfer over which the laboratory has control.*

1.4.1.1 (E) 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?	<u>✓</u>	___	___
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*Each individual item of evidence must be marked for identification, when practical. If the item does not lend itself to marking, its proximal container or identifying tag must be marked.*

1.4.1.2 (E) Is all evidence marked for identification?	<u>✓</u>	___	___
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*Evidence seals must be designed and used to protect the integrity of the evidence.*

1.4.1.3 (E) Is evidence stored under proper seal?	<u>✓</u>	___	___
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*Procedural precautions must exist which reduce the risk of evidence loss, cross transfer, contamination and/or other deleterious change.*

1.4.1.4 (E) Is evidence protected from loss, cross transfer, contamination and/or deleterious change?	<u>✓</u>	___	___
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*A secure area for overnight and/or long-term storage of evidence must be available.*

1.4.1.5 (E) Is there a secure area for overnight and/or long-term storage of evidence?	<u>✓</u>	___	___
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*All elements of a laboratory's quality system must be clearly documented in a quality manual which is kept current under the responsibility of a quality manager.*

1.4.2.1 (E) Does the laboratory have a comprehensive quality manual?	<u>✓</u>	___	___
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*A laboratory must have an individual designated as the Quality Manager.*

1.4.2.2 (E) Is an individual designated as the quality manager?	<u>✓</u>	___	___
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*To verify that its operations continue to comply with the requirements of its quality system and the standards under which ASCLD/LAB accreditation was granted, each laboratory must conduct an annual audit of its operations and submit an Annual Accreditation Audit Report (Appendix 6) to ASCLD/LAB, by April 1, each year.*

Yes No N/A

1.4.2.3 (E) Did the laboratory conduct and document an annual audit of its operations and submit an annual accreditation audit report to ASCLD/LAB by the required deadline?

*The quality system requires that laboratory management conduct a review at least once yearly to ensure the continued suitability and effectiveness of such a system.*

1.4.2.4 (E) Does the laboratory conduct and document an annual review of its quality system?

*Procedures used must be generally accepted in the field or supported by data gathered and recorded in a scientific manner.*

1.4.2.5 (E) Are the procedures used generally accepted in the field or supported by data gathered and recorded in a scientific manner?

*New technical procedures must be validated to prove their efficacy in examining evidence material before being implemented on casework.*

1.4.2.6 (E) Are new technical procedures scientifically validated before being used in casework and is the validation documentation available for review?

*The laboratory must maintain written copies of appropriate technical procedures.*

1.4.2.7 (E) Are the technical procedures used by the laboratory documented and are the documents available to laboratory personnel for review?

*Controls and standard samples must be used and documented in the case record to ensure the validity of the testing parameters and, thereby, the conclusion.*

1.4.2.8 (E) 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?

*The quality of the standard samples and reagents must be adequate for the procedure used.*

1.4.2.9 (E) Is the quality of the standard samples and reagents adequate for the procedure used?

*All reagents must be routinely tested for their reliability.*

1.4.2.10 (E) Does the laboratory routinely check the reliability of its reagents?

*Instruments/equipment should be adequate for the procedures used.*

1.4.2.11 (I) Are the instruments/equipment adequate for the procedures used?

*Instruments/equipment should be maintained in proper working order.*

Yes No N/A

1.4.2.12 (I) Are the instruments/equipment in proper working order?

*Instruments/equipment must be properly calibrated and calibration records maintained for all calibrated instruments.*

1.4.2.13 (E) Are the instruments/equipment properly calibrated?

*The laboratory must create and maintain a case record for administrative and examination documentation generated or received by the laboratory on each case which it receives. Examination documentation such as notes, worksheets, photographs, spectra, printouts, charts, and other data or records which support conclusions must be generated and kept in the case record.*

1.4.2.14 (E) 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?

1.4.2.15 (E) Does the laboratory maintain case related administrative documentation generated and received, in a retrievable form?

*It is essential that a representative number of reports be subjected to a technical review.*

1.4.2.16 (E) Does the laboratory have, use and document a system of technical review of the reports to ensure that the conclusions of its examiners are reasonable and within the constraints of scientific knowledge?

*Administrative reviews must be conducted to ensure the completeness and correctness of the reports issued.*

1.4.2.17 (E) Does the laboratory conduct and document administrative reviews of all reports issued?

*The laboratory must have and follow a written procedure whereby the testimony of each examiner is monitored at least once every year.*

1.4.2.18 (E) Does the laboratory monitor the testimony of each examiner at least annually and is the examiner given feedback from the evaluation?

*The laboratory must have a written procedure which it uses to initiate a review and to take corrective action when the laboratory has an indication of a significant problem with a technical procedure or the work of an analyst.*

Yes No N/A

- 1.4.2.19 (E) 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?

*Each laboratory must have a documented program of proficiency testing which measures the capability of its examiners and the reliability of its analytical results.*

- 1.4.3.1 (E) Does the laboratory have a documented program of proficiency testing?

*The laboratory must participate in proficiency testing programs in which samples are provided by an external test provider. ASCLD/LAB approved providers must be used where available.*

- 1.4.3.2 (E) Does the laboratory participate in proficiency testing programs conducted by approved test providers or by other external provider(s) when no approved provider is available?

*Each Examiner should be proficiency tested annually in each subdiscipline in which casework is performed.*

- 1.4.3.3 (I) Was each examiner proficiency tested annually in each subdiscipline in which casework was performed?

*The laboratory should conduct annual proficiency testing in each discipline using re-examination or blind techniques.*

- 1.4.3.4 (I) Does the laboratory conduct proficiency testing using re-examination or blind techniques?

## MANAGEMENT

*The laboratory director should have a minimum of a baccalaureate degree in a natural science, criminalistics or a closely related field. If the director lacks a scientific background, then there should be support within management by personnel with appropriate scientific background.*

- 2.1.1 (I) 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?

*A laboratory director should have at least five years of forensic science experience performing casework in one of the ASCLD/LAB accredited disciplines.*

- 2.1.2 (D) Does the laboratory director have at least five years of forensic science experience?

*Additional education in management or business administration by college course work or short training courses (or both) is recommended.*

	Yes	No	N/A
2.1.3 (D) Does the laboratory director have some formal training in management?	<u>✓</u>	___	___

*The laboratory director should have at least two years of experience in management.*

2.1.4 (D) Does the laboratory director have at least two years of managerial experience?	<u>✓</u>	___	___
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### CONTROLLED SUBSTANCES

*Examiners must have education and experience/training commensurate with the examinations and testimony provided. A baccalaureate degree in a natural science, criminalistics or in a closely related field is required.*

2.2.1 (E) Does each examiner possess a baccalaureate degree in a natural science, criminalistics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	<u>✓</u>	___	___
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*Examiners must have a good understanding of the principles, uses and limitations of the instruments, and the methods and procedures as applied to the tasks performed.*

2.2.2 (E) Does each examiner understand the instruments, and the methods and procedures used?	<u>✓</u>	___	___
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*Examiners must have successfully completed a competency test.*

2.2.3 (E) Did each examiner successfully complete a competency test prior to assuming casework responsibility?	<u>✓</u>	___	___
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*A proficiency test must be successfully completed by each examiner at least annually.*

2.2.4 (E) Did each examiner successfully complete an annual proficiency test?	<u>✓</u>	___	___
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### TOXICOLOGY

*Examiners must have education and experience/training commensurate with the examinations and testimony provided. A baccalaureate degree in a natural science, toxicology, criminalistics or in a closely related field is required.*

2.3.1 (E) Does each examiner have a baccalaureate degree in a natural science, toxicology, criminalistics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	___	___	<u>✓</u>
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*Examiners must have a good understanding of the principles, uses and limitations of the instruments, and the methods and procedures applied to the tasks performed.*

	Yes	No	N/A
2.3.2 (E) Does each examiner understand the instruments, and the methods and procedures used?	___	___	✓

*Examiners must have successfully completed a competency test.*

2.3.3 (E) Did each examiner successfully complete a competency test prior to assuming casework responsibility?	___	___	✓
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*A proficiency test must be successfully completed by each examiner at least annually.*

2.3.4 (E) Did each examiner successfully complete an annual proficiency test?	___	___	✓
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#### TRACE EVIDENCE

*Examiners must have education and experience/training commensurate with the examinations and testimony provided. A baccalaureate degree in a natural science, criminalistics or in a closely related field is required.*

2.4.1 (E) Does each examiner possess a baccalaureate degree in a natural science, criminalistics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	___	___	✓
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*Examiners must have a good understanding of the principles, uses and limitations of the instruments, and the methods and procedures applied to the tasks performed.*

2.4.2 (E) Does each examiner understand the instruments, and the methods and procedures used?	___	___	✓
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*A competency test must be successfully completed prior to working cases of each evidence type.*

2.4.3 (E) Did each examiner successfully complete a competency test in each of the subdisciplines processed prior to assuming casework responsibility?	___	___	✓
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*A proficiency test must be successfully completed by each examiner at least annually.*

2.4.4 (E) Did each examiner successfully complete an annual proficiency test?	___	___	✓
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#### BIOLOGY

*Examiners must have education and experience/training commensurate with the examinations and testimony provided. A baccalaureate degree in a natural science, criminalistics or in a closely related field is required.*

		Yes	No	N/A
2.5.1 (E)	Does each examiner possess a baccalaureate degree in a natural science, criminalistics or in a closely related field and does each have experience/training commensurate with the examinations and testimony provided?	___	___	✓

2.5.2 (E)	Does each examiner performing DNA analysis have education, training and experience consistent with those required by the quality assurance audit document?	___	___	✓
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*Examiners must have a good understanding of the principles, uses and limitations of the instruments, and the methods and procedures applied to the tasks performed.*

2.5.3 (E)	Does each examiner understand the instruments, and the methods and procedures used?	___	___	✓
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*Examiners must have successfully completed a competency test.*

2.5.4 (E)	Did each examiner successfully complete a competency test prior to assuming casework responsibility?	___	___	✓
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*A proficiency test must be successfully completed by each examiner at least annually?*

2.5.5 (E)	Did each examiner successfully complete an annual proficiency test?	___	___	✓
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*Two proficiency tests must be successfully completed by each DNA examiner annually.*

2.5.6 (E)	Did each examiner performing DNA analysis successfully complete two annual proficiency tests from an approved test provider?	___	___	✓
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### FIREARMS/TOOLMARKS

*Firearms/toolmarks examiners should have a baccalaureate degree with science courses.*

2.6.1 (I)	Does each examiner possess a baccalaureate degree with science courses?	___	___	✓
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*Examiners must have a good understanding of the principles, uses and limitations of the instruments, and the methods and procedures used as applied to the tasks performed.*

2.6.2 (E)	Does each examiner understand the instruments, and the methods and procedures used?	___	___	✓
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*Examiners must have education and experience/training commensurate with the examinations and testimony provided. Independent case examinations must not be undertaken until extensive instruction from a qualified examiner has been completed.*

		Yes	No	N/A
2.6.3 (E)	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	___	___	✓

*Examiners must successfully complete a competency test.*

2.6.4 (E)	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	___	___	✓
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*A proficiency test must be successfully completed by each examiner at least annually.*

2.6.5 (E)	Did each examiner successfully complete an annual proficiency test?	___	___	✓
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### QUESTIONED DOCUMENTS

*Questioned document examiners should have a baccalaureate degree with science courses.*

2.7.1 (I)	Does each examiner possess a baccalaureate degree with science courses?	___	___	✓
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*Examiners must have a good understanding of the principles, uses and limitations of the instruments, and the methods and procedures used as applied to the tasks performed.*

2.7.2 (E)	Does each examiner understand the instruments, and the methods and procedures used?	___	___	✓
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*Examiners must have education and training/experience commensurate with the examinations and testimony provided. Independent case examinations must not be undertaken until extensive instruction from a qualified document examiner has been completed.*

2.7.3 (E)	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	___	___	✓
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*Examiners must have successfully completed a competency test.*

2.7.4 (E)	Did each examiner successfully complete a competency test prior to assuming case work responsibility?	___	___	✓
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*A proficiency test must be successfully completed by each examiner at least annually.*

2.7.5 (E)	Did each examiner successfully complete an annual proficiency test?	___	___	✓
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## LATENT PRINTS

*Latent print examiners should have a baccalaureate degree with science courses.*

	Yes	No	N/A
2.8.1 (I) Does each examiner possess a baccalaureate degree with science courses?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Examiners must have a good understanding of the concept of individualization and the principles, uses and limitations of the instruments, and the methods and procedures used as applied to the tasks performed.*

2.8.2 (E) Does each examiner understand the instruments, and the methods and procedures used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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*Examiners must have education and training/experience commensurate with the examinations and testimony provided. Independent case examinations must not be undertaken until extensive instruction from a qualified latent print examiner has been completed.*

2.8.3 (E) Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations and testimony provided?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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*Examiners must have successfully completed a competency test.*

2.8.4 (E) Did each examiner successfully complete a competency test prior to assuming casework responsibility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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*A proficiency test must be successfully completed by each examiner at least annually.*

2.8.5 (E) Did each examiner successfully complete an annual proficiency test?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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## TECHNICAL SUPPORT

*The individual must meet the specification of the job description.*

2.9.1 (E) Do technical support personnel meet the requirements of their job descriptions?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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*The job description and the duties performed must be in agreement.*

2.9.2 (E) Are the job descriptions and the duties performed in agreement?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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*Technical support staff must have successfully completed an appropriate competency test.*

2.9.3 (E) Did each member of the technical support staff successfully complete an appropriate competency test prior to assuming casework responsibility?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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*Technical support personnel must successfully complete an appropriate proficiency test annually.*

		Yes	No	N/A
2.9.4 (E)	Did all technical support personnel successfully complete an appropriate proficiency test, annually?	___	___	<u>✓</u>

*Two proficiency tests must be successfully completed annually by all technical support personnel performing DNA analysis.*

2.9.5 (E)	Did all technical support personnel performing DNA analysis successfully complete two annual proficiency tests from an approved test provider?	___	___	<u>✓</u>
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### CRIME SCENE

*The examiner must meet the requirements of the job description.*

2.10.1 (E)	Do examiners meet the requirements of their job descriptions?	___	___	<u>✓</u>
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*Examiners must have a good understanding of the concept and theory of scene security and integrity, and the uses and limitations of the equipment, methods and procedures used to document and process crime scenes, as applied to the tasks performed.*

2.10.2 (E)	Does each examiner understand the equipment, methods and procedures used?	___	___	<u>✓</u>
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*Examiners must have training and experience commensurate with the examinations, documentation and testimony provided, as applied to the tasks performed. Independent examinations and documentation at crime scenes must not be undertaken until extensive instruction from a qualified examiner has been completed.*

2.10.3 (E)	Did each examiner have extensive training from a qualified examiner and does each have experience commensurate with the examinations/documentation and testimony provided?	___	___	<u>✓</u>
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*Examiners must have successfully completed a competency test(s) as applied to the task(s) performed.*

2.10.4 (E)	Did each examiner successfully complete a competency test(s) prior to primary responsibility for the examination, documentation and processing of a crime scene?	___	___	<u>✓</u>
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*A proficiency test must be completed by each person conducting crime scene examinations at least annually. The proficiency test should reflect the types of procedures, methods and equipment as applied to the typical task(s) performed.*

2.10.5 (E)	Did each examiner successfully complete an annual proficiency test?	___	___	<u>✓</u>
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**DIGITAL EVIDENCE**

*Digital evidence examiners should have a baccalaureate degree with science courses.*

	Yes	No	N/A
2.11.1 (I) Does each examiner possess a baccalaureate degree with science courses?	___	___	✓

*Examiners must have a good understanding of the principles, uses and limitations of the hardware, software, and the methods and procedures as applied to the tasks performed.*

2.11.2 (E) Does each examiner understand the equipment, programs, methods and procedures used?	___	___	✓
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*Examiners must have education and training/experience commensurate with the examinations and testimony provided. Independent case examinations must not be undertaken until extensive instruction from a qualified examiner has been completed.*

2.11.3 (E) Does each examiner have experience commensurate with the examinations/documentation and testimony provided?	___	___	✓
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*Examiners must have successfully completed a competency test.*

2.11.4 (E) Did each examiner successfully complete a competency test in each subdiscipline prior to assuming casework responsibility?	___	___	✓
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*A proficiency test must be successfully completed by each examiner at least annually.*

2.11.5 (E) Did each examiner successfully complete an annual proficiency test?	___	___	✓
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*Each employee should have adequate work space to accomplish assigned tasks.*

3.1.1 (I) Does each employee have adequate work space to accomplish assigned tasks?	✓	___	___
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*Sufficient space should be provided for storage of supplies, equipment and tools.*

3.1.2 (D) Is there sufficient space provided for storage of supplies, equipment and tools?	✓	___	___
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*Examiners should have space available for writing reports and other official communications.*

3.1.3 (I) Is there adequate space available for examiners for writing reports and other official communications?	✓	___	___
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*Adequate and appropriate space should exist for records and reference materials.*

		Yes	No	N/A
3.1.4 (I)	Is there adequate and appropriate space available for records, reference works and other necessary documents?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Sufficient space should be available for instrumentation/equipment to facilitate its operation.*

3.1.5 (I)	Is adequate space available for instrumentation/equipment to facilitate its operation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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*Accessories should be stored near instrumentation/equipment to facilitate its use and operation.*

3.1.6 (D)	Are accessories stored near instrumentation/equipment to facilitate its use and operation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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*The physical design should permit the efficient flow of evidence from the time of its acceptance until its proper disposal.*

3.2.1 (I)	Does the physical design permit the efficient flow of evidence from the time of its acceptance until its proper disposal?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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*The relative locations of functional areas should facilitate the use of equipment and instruments.*

3.2.2 (D)	Do the relative locations of functional areas facilitate the use of equipment and instruments?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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*Adequate and proper lighting should be available for personnel to carry out assigned tasks.*

3.2.3 (I)	Is there adequate and proper lighting available for personnel to carry out assigned tasks?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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*Adequate and proper plumbing and wiring should be available and accessible to carry out assigned tasks.*

3.2.4 (I)	Is there adequate and proper plumbing and wiring available and accessible to carry out assigned tasks?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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*The laboratory should have proper general ventilation.*

3.2.5 (I)	Does the laboratory have proper general ventilation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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*There should be adequate heating, cooling and humidity control in the laboratory.*

3.2.6 (I)	Is the heating, cooling and humidity control in the laboratory adequate?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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*Access to the operational area of the laboratory must be controllable and limited to those individuals who are assigned to routinely work in the area or to those individuals designated by the laboratory director to have access.*

	Yes	No	N/A
3.3.1 (E) Is access to the operational area of the laboratory controllable and limited?	<u>✓</u>	<u>    </u>	<u>    </u>

*All exterior entrance/exit points require adequate security control.*

3.3.2 (E) Do all exterior entrance/exit points have adequate security control?	<u>✓</u>	<u>    </u>	<u>    </u>
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*Internal areas requiring limited/controlled access must have a lock system.*

3.3.3 (E) Do all internal areas requiring limited/controlled access have a lock system?	<u>✓</u>	<u>    </u>	<u>    </u>
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*Accountability of all keys, magnetic cards, etc., must be documented and their distribution limited to those individuals designated by the laboratory director to have access.*

3.3.4 (E) Is distribution of all keys, magnetic cards, etc., documented and is distribution limited to those individuals designated by the laboratory director to have access?	<u>✓</u>	<u>    </u>	<u>    </u>
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*The laboratory must be monitored during vacant hours by an intrusion alarm or by security personnel.*

3.3.5 (E) Is the laboratory secured during vacant hours by means of an intrusion alarm or by security personnel?	<u>✓</u>	<u>    </u>	<u>    </u>
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*The laboratory should have a fire detection system.*

3.3.6 (I) Does the laboratory have a fire detection system?	<u>✓</u>	<u>    </u>	<u>    </u>
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*All elements of a laboratory's health and safety program must be clearly documented in a manual. The program should be monitored and the manual kept current by a health and safety manager.*

3.4.1 (I) Does the laboratory have an effective health and safety program documented in a manual?	<u>✓</u>	<u>    </u>	<u>    </u>
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3.4.2 (I) Is an individual designated as the health and safety manager?	<u>✓</u>	<u>    </u>	<u>    </u>
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3.4.3 (I) Is the health and safety program monitored regularly and reviewed annually to ensure that its requirements are being met?	<u>✓</u>	<u>    </u>	<u>    </u>
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*The laboratory should have available and encourage the use of safety devices (particularly those required in its health and safety manual). Examples of such devices are goggles, face protectors, ear protectors, gloves and fire extinguishers.*

		Yes	No	N/A
3.4.4 (I)	Does the laboratory have available and encourage the use of safety devices, particularly those required by its health and safety manual?	✓	_____	_____

*Proper equipment and material should be available for the handling of carcinogenic, toxic and/or other dangerous material spills.*

3.4.5 (I)	Does the laboratory have proper equipment and material available for the handling of carcinogenic, toxic and/or other dangerous material spills?	✓	_____	_____
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*The laboratory should have safety shower and eye wash equipment in appropriate locations and in good working condition.*

3.4.6 (I)	Does the laboratory have safety shower and eye wash equipment in appropriate locations and in good working condition?	✓	_____	_____
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*Exhaust hoods must be available to maintain a safe work environment.*

3.4.7 (I)	Are sufficient exhaust hoods available to maintain a safe work environment?	✓	_____	_____
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*Sufficient first-aid kits should be available and strategically located.*

3.4.8 (I)	Are sufficient first-aid kits available and strategically located?	✓	_____	_____
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*An adequate number of personnel should hold current certification in first-aid.*

3.4.9 (I)	Does the laboratory have an adequate number of personnel holding current certification in first-aid?	✓	_____	_____
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*Space should be provided for safe storage of volatile, flammable, explosive and other hazardous materials.*

3.4.10 (I)	Is appropriate space provided for safe storage of volatile, flammable, explosive and other hazardous materials?	✓	_____	_____
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*Emergency exits from the laboratory should be in compliance with safe working requirements.*

3.4.11 (I)	Are the emergency exits from the laboratory adequate for safe exit in an emergency?	✓	_____	_____
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*General cleanliness and good-housekeeping should be apparent.*

3.4.12 (D)	Is there general cleanliness and apparent good-housekeeping in the laboratory?	✓	_____	_____
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## FINDINGS

The following summarizes the criteria for which the Inspection Team determined the laboratory was not in compliance at the time of the inspection and the basis for the finding. The summary also identifies criteria which were determined to be not applicable and the basis for that determination:

### 1.1.2.7 (E) CALIBRATION OF EQUIPMENT AND INSTRUMENTS.

#### Original inspection finding:

The calibration procedures for the balances and FTIR in the Drug Chemistry Section do not include accuracy tolerance limits.

The Drug Chemistry Section does not have written procedures for the calibration of the Gas Chromatograph portion of the Gas Chromatograph/Mass Spectrometer when the Gas Chromatograph portion is used in the identification of controlled substances.

#### Supplemental finding:

Accuracy tolerance limits are now included in the Calibration procedures in the Western Regional Laboratory Drug Chemistry Section. Certified weights have been purchased and are available in the laboratory.

Written procedures are now included in Western Regional Laboratory Drug Chemistry Section procedures manual for the calibration of the gas chromatography portion of the Gas Chromatograph/Mass Spectrometer when the gas chromatography portion is used in the identification of controlled substances.

### 1.4.2.8 (E) 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?

#### Original inspection finding:

On page A-1 of the Western Regional Laboratory Drug Chemistry Procedure Manual it states that the Marquis Reagent will be checked with Heroin. This lab is using other drugs such as Methamphetamine.

#### Supplemental finding:

The procedure for the Marquis Reagent check has been modified to reflect that the laboratory will use Methamphetamine in this test. The lab was previously using Methamphetamine.

### 1.4.2.9 (E) IS THE QUALITY OF THE STANDARD SAMPLES AND REAGENTS ADEQUATE FOR THE PROCEDURE USED?

#### Original inspection finding:

No source documentation was available in the Drug Chemistry section for the verification of controlled substance reference standards used for infrared and mass spectral comparisons.

Supplemental finding:

Certified drug standards have been obtained for the Drug Chemistry Section. Invoices were reviewed as the source documentation for the drug standards received. Review of several standard sample confirmation checks confirmed that has been done.

All criteria for 2.3 Toxicology, 2.4 Trace Evidence, 2.5 Biology, 2.6 Firearms/Toolmarks, 2.7 Questioned Documents, 2.9 Technical Support and 2.11 Digital Evidence were scored N/A because the laboratory does not perform work in the disciplines.

All criteria for 2.10 Crime Scene were scored N/A because the laboratory elected not to apply for Crime Scene accreditation.

## SUMMATION OF CRITERIA RATINGS

	Total Possible	Total Yes	Total No	Total N/A	Total Number Yes/No
Essential	78	42	0	36	42
Important	47	44	0	3	44
Desirable	20	20	0	0	20

Percent Essential: 100%

Percent Important: 100%

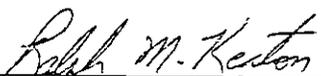
Percent Desirable: 100%

Areas sought for accreditation are as follows:

Controlled Substances

Latent Prints

Prepared by: Mike Johnston, Staff Inspector



Ralph M. Keaton, Executive Director

12-18-03

Date