NATIONAL COMMISSION ON FORENSIC SCIENCE

Critical Steps to Accreditation

Subcommittee

Accreditation and Proficiency Testing

Type of Work Product

Adjudication of Public Comments on Final Draft Views Document

Public Comment Summary:

The document was posted as proscribed by Commission by-laws. Six individuals or groups submitted comments.

- One individual praised the document as "well written and comprehensive."
- Another individual representing the American Society of Crime Laboratory Directors (ASCLD) noted that although the Board of Directors supports the proposed views document in its entirety, they are concerned about the fiscal impact to FSSPs that will require accreditation.
- One individual, a member of the Commission, provided multiple comments that provided recommended edits to improve clarity and to increase the scope of the critical steps listed to encompass a greater portion of accreditation requirements.
- Two individuals had recommendations to improve clarity and increase focus on method validation.
- Lastly, an individual expressed concern over the impact of accreditation to solo practitioners.

Adjudication Process Used by Subcommittee:

The subcommittee met via teleconference on February 9, 2016. All comments, responses and proposed changes to the views document were discussed. On February 25-29, 2016, the subcommittee voted to send the revised document to the Commission for a final vote.

Itemized Issues and Adjudication Summary:

1. "Management requirements" are not included in the list of the nine critical steps toward accreditation. The creation of a quality management system in a laboratory is arguably the most critical step in the path toward accreditation, but is not specifically listed in the draft document as a critical step. None of the critical steps listed can become operational without such a system in place. A highly responsible and responsive management system is also a central component of the requirements of ISO/IEC 17025. Consider including steps toward the creation of a quality management system as one of the (now 10) critical steps to be listed.

Although management requirements are not listed a critical step, the first two sentences in the Statement of Issue section state that the creation of a quality management system is critical. This can be accomplished either as a whole, which is what this comment suggests, or incrementally. This Views document is outlining a way to start the process incrementally.

2. The subcommittee may have decided that by preliminarily building out these nine components, a quality management system will begin to take shape. It's my view, however, that the first element should consist of creating the basic components of a quality management system commensurate with that envisioned in ISO 17025, Requirement 4. Unless the basics of that structure are created in the very beginning, none of the nine listed elements will begin to take shape and will never be satisfactorily completed due a lack of accountability by and to an organizing management framework.

   It is true that our view was to outline building blocks that are necessary for accreditation that could allow for portions of a system that can be completed. The purpose of this document is to provide a path that is easily accessible. Although it will be required for accreditation, starting with the management system could be overwhelming. The summary paragraph is changed from "These nine essential elements represent the critical path…" to "These nine essential elements represent a critical path…"

3. Consider listing "Method validation" under the "Technical procedures" component of step #6.

   Agreed - Added "Written technical procedures should be based on method validation"

4. Consider listing "Measurement uncertainty, when appropriate," under the "Technical procedure" component of step #6.

   It is true that measurement uncertainty is important and required for reported measurements, but it is a large task in addition to having written technical procedures.

5. Consider listing "Internal audits and management reviews" under "Corrective and preventative action process" in step #9.

   Internal audits are mentioned specifically in the last sentence of the document. Changed language to "Other important accreditation elements…"

6. Under the second bullet point beneath the critical step #1, the word "will" is used. All other listed points state that "procedures should…." For the sake of consistency, substitute "should" for "will."

   Agreed – Suggested change incorporated.

7. Under step #7, “Training program,” the first bullet reads, “Prior to handling evidence independently, a competency test should be used as a mechanism of assessment.” This is a bit under-inclusive. Consider revising this sentence to read, “Prior to handling evidence, testing case work samples, or initiating a newly validated technology, method, or technique, a competency test should be administered as a mechanism for assessing the forensic science practitioner’s qualification to perform the relevant function.”

   Agreed that clarification would be helpful - changed language to "Prior to working independently in a discipline or category of testing, a competency test should be used as a mechanism of assessment of qualification."

8. The third bullet point under step #7 states that “Training topics should include ethics.” Consider amending this sentence to delete the word “ethics” and insert the term “professional responsibility” in its place to make that description consistent with the title of our pending NCFS document which uses “professional responsibility” instead of “ethics.”

   Agreed – Suggested change incorporated.

9. Under point 2, “Written reports,” the second bullet reads, “Reporting procedures should include report format, signature authority, content and so on.” Since this bullet point is under the heading, “Critical Steps to Accreditation,” use of the phrase “and so on” is not appropriately descriptive and provides the reader with insufficient guidance as to exactly which reporting procedure topics should be addressed. The use of “and so on” is not self-defining and is not helpful. The sentence (and the thought) need to be completed with substantive content. Bullet point one, beneath critical step #6, also concludes with the phrase “and so on.” That sentence also needs to be completed with substantive content. If the subcommittee is concerned about setting forth an exhaustive list of topics that should be covered in a laboratory’s reporting procedures/written technical procedures, then consider excluding all examples, and merely state that written procedures should be created and followed when generating test or calibration reports/technical procedures.

   The subcommittee was trying to give examples of the types of items that should be included, not provide an exhaustive list. In both locations, language was added to "specify the required elements…that may include but are not limited to…"

10. Under critical step #9, consider revising the 3 listed bullet points to read as follows: Bullet #1 - “A written policy and procedure should be in place to address non-conforming work.” (This verbiage covers NC work that both currently exists and has the potential to occur in the future). Bullet #2 – “A written policy and procedure should designate appropriate authorities to investigate non-conforming work and explain how the root cause(s) of the problem(s) will be determined. Bullet #3 – “A written policy and procedure should describe how the corrective action process will address non-conforming work, prevent its recurrence, establish notification requirements, and how the investigation will be documented.”

    Agreed – Suggested change incorporated.

11. The first sentence next to last paragraph of the document states, “The written procedures developed for the elements above, when taken together, can form the basis for a FSSP quality manual.” Consider revising this sentence to read, “The written policies and procedures for the Critical Steps to Accreditation, taken together, can act as the catalyst for the creation of a FSSP quality manual.” I think it’s a stretch to say that these 9 elements – standing alone – can form the basis for a quality manual. A quality manual contains many more topics and much information than the 9 listed critical steps. Basis is too strong a statement.

    Although these nine elements are not all inclusive, they do encompass large subject areas of any quality manual. The subcommittee agreed to change "basis" to "foundation."

12. Comments on “Appendix A”:
    a. Is this appendix (A) really necessary? I don’t think so. I don’t think it adds any critical information to the document. Consider deleting it.
    b. First paragraph below “Forensic Science Practitioner” – sentence begins, “Providers that…” It should read, “Providers who…”.
    c. Second paragraph below “Forensic Science Practitioner” reads, “Examples of functions that would be included are below, whether in public or private practice.” This sentence, as written, is very confusing. What is a function? Included in what? What is public or private practice? Consider revising it to read, “Listed below are examples of disciplines, whether performed by public or private FSSPs, to which the Critical Steps to Accreditation are applicable.”
    d. Below the ninth forensic discipline listed on page 4, the sentence reads, “Examples of functions that would be excluded are below, whether in public or private practice.” This sentence, as stated, is also confusing and is unnecessary. In addition, it is not workable because it provides an exception that would swallow the previously passed recommendation on universal accreditation. Under provisions 1-4, the “opinion” of a government-sponsored witness from a public crime lab relating to the listed topics would constitute a “function” that would be “excluded” from the critical steps toward accreditation. If the subcommittee insists on retaining this sentence, consider revising it to read, “Whether performed by public or private FSSPs, the types of expert assistance set forth below would be excluded.”

    Appendix A is identical in concept to the Appendix in the Universal Accreditation document. The subcommittee included it for ease of comparison and to incorporate the NCFS definitions. The subcommittee agreed with suggestion 12b and changed “that” to “who.”

13. Recognizing that this is an overview document, it still lacks strong guidance on the role of method validation in the process of authoring test methods, which should also reinforce the need to base interpretation and reporting guidance on the validation studies.

    Agreed - added "Written technical procedures should be based on method validation" to Step 6.

14. It is not clear how this should be applied to the non-laboratory paradigm. In some disciplines, forensic science services are not provided within the context of a large enterprise. Establishing requirements that do not recognize or allow individual independent practitioners is incorrect. There needs to be recognition and accommodation for accreditation of those who do not have access to the overhead associated with large governmental or commercial activities. If, in fact, the purpose of this is to make it impossible for solo practitioners to practice, then it should be explicitly stated that this is the goal.

    The goal is for all FSSPs to work toward accreditation. Small or solo FSSPs may require unique procedures, but still benefit from written procedures, technical reviews, etc. No changes were incorporated.

15. The second bullet point under #1 on page 2 says "or acquired from person to storage area." Should this say "acquired from storage area by person"? The current wording seems awkward.

    Agreed – Suggested change incorporated.

16. The first bullet point under #9 on page 3 says "procedures should recognize existing and potential nonconforming work." I'm confused by the use of "existing." Perhaps it is intended to convey that labs should have procedures to address both nonconforming work (corrective action) and potential nonconforming work (preventive action), but it seems to assume that a lab already has nonconforming work.

    Agreed - Changed to "Written procedures should be in place to address non-conforming work."

17. The American Society of Crime Laboratory Directors represents more than 600 members of crime laboratory directors and forensic science managers dedicated to providing excellence in forensic science through leadership and innovation. The membership represents both private and public institutions from all 50 states in the U.S. and eighteen countries from across the globe. Our mission is to promote the effectiveness of crime laboratory leaders throughout the world by facilitating communication among members, sharing critical information, providing relevant training, promoting crime laboratory accreditation, and encouraging scientific and managerial excellence in the global forensic science community. ASCLD remains ready to be a continuing resource to assist the Commission and the Department of Justice in the development of these important work products for the forensic science community so that a broader based acceptance and implementation of these products may be realized. ASCLD is dedicated to advancing forensic science through a multitude of initiatives including the National Commission on Forensic Science. ASCLD currently has twenty-five members serving on the Commission and its sub-committees. The efforts of the Commission are important and have significant implications for the entire criminal justice community. As a result, the ASCLD Board of Directors offers the following comments, recommendations, and impact statements for consideration by the sub- committee for the “Critical Steps to Accreditation”. The ASCLD Board of Directors supports the proposed views document on “Critical Steps to Accreditation” in its entirety.

However, the Board does have a significant concern with the fiscal impact to FSSPs who are not currently accredited. To address this concern, the number of FSSPs must be determined and funding opportunities must be made available for organizations to achieve accreditation. Problem: There is no consensus as to the total number of FSSPs in the United States. A comprehensive study determining the number of FSSPs would allow for an estimation of the fiscal impact for all FSSPs to become accredited. Seeking accreditation is a cost intensive pursuit. Not having appropriate levels of funding present barriers to FSSPs becoming accredited. The criminal justice community must ensure appropriate resources are available for this endeavor to include funding as well as the resources cited in the Views Document. Recommendation: The National Commission on Forensic Science (NCFS) should recommend the Attorney General place dedicated funding for achieving accreditation of state and local laboratories in the DOJ budget recommendation to the President of the United States. The magnitude of the funding request should be responsive to the results of the BJS Census of Publicly Funded Crime Laboratories currently in progress. It is important to note, however, that existing grant funding for forensic laboratories such as the Paul Coverdell grant should not be supplanted by monies made available for accreditation pursuant to this recommendation.

> *The census of FSSPs is in development by the Bureau of Justice Statistics. The subcommittee will bear these concerns in mind as additional documents are considered. This is a Views document provided to assist FSSPs in moving towards accreditation and does not require accreditation. No changes were incorporated.*