



Commission on Forensic Science

December 11, 2020

**Division of Criminal Justice Services
Virtual Meeting¹**

9:04 AM – 11:53 AM

DRAFT MEETING MINUTES

Commission Members in Attendance:

Michael Green, Esq., Chair
 Pasquale Buffolino, Ph.D.
 Lydia de Castro
 Jill Dooley, Ph.D.
 Hon. William Fitzpatrick, Esq.
 Jessica Goldthwaite (non-voting proxy for David Loftis)
 Hon. Angela Mazzealli
 Hon. Scott McNamara, Esq.
 Scott O'Neill, Ph.D.
 Benjamin Ostrer, Esq.
 Anne Walsh, Ph.D., M.D.
 Ann Willey, Ph.D., J.D.

DCJS Staff in Attendance:

Michael Flaherty, Esq.
 Natasha Harvin-Locklear, Esq.
 Shelley Palmer
 Jackalynne Vimislik

Chairman Green opened the meeting by congratulating Commission member Superintendent Keith Corlett on his retirement with the New York State Police and thanking him for his service as a Commission member. The Chair also congratulated Commission member Ms. Lydia de Castro on her appointment as the Director of the Westchester

**Approximate
video times**

**00:00:00 –
00:03:14**

¹ Due to the Coronavirus (COVID-19), and pursuant to Governor Cuomo's Executive Order 202.1, issued on March 12, 2020, suspending the Open Meetings Law and **authorizing the attendance of meetings telephonically or other similar service.**

County Department of Laboratories and Research Division of Forensic Sciences. Chair Green then took a roll call to establish a quorum as the members were in attendance from their own locations. A quorum was established with 11 members in attendance (Buffolino, de Castro, Dooley, Fitzpatrick, Green, Mazzarelli, McNamara, O'Neill, Ostrer, Walsh, and Willey). Mr. David Loftis was unable to attend the meeting but, pursuant to and as authorized by the Commission's bylaws, requested that Ms. Jessica Goldthwaite represent him as a non-voting proxy and speak on his behalf.

*Approximate
video times*

00:03:14 -
00:04:40

A motion to approve the December 11, 2020 agenda was requested by the Chair, made by Judge Mazzarelli, seconded by Mr. Fitzpatrick, and approved unanimously.

00:04:40 -
00:05:51

The Chair then asked Commission members for questions or comments on the minutes from the September 16, 2020 Commission meeting. Mr. Fitzpatrick made a motion to accept the minutes, Mr. Ostrer seconded the motion, and it was approved unanimously.

00:05:51 -
00:30:11

Laboratory accreditation items and updates were then considered for the Nassau County Division of Forensic Services, New York City OCME Department of Forensic Biology, New York City Police Department Police Laboratory, ²New York State DCJS Latent Print Laboratory, Niagara County Sheriff's Office Forensic Laboratory, Onondaga County Center for Forensic Sciences, Onondaga County Center for Forensic Sciences, Suffolk County Crime Laboratory, Westchester County Division of Forensic Sciences, and Westchester County Division of Forensic Toxicology. Representatives from the laboratories were available via Web-Ex to respond to members' questions.

00:17:00
00:18:00

Chairman Green requested a motion to accept the binding recommendation from the DNA Subcommittee to renew the New York State accreditation of the Onondaga County Center for Forensic Sciences for a period concurrent with their ANAB accreditation. Mr. Ostrer made the motion, it was seconded by Dr. O'Neill, and approved unanimously.

00:18:00
00:23:26

Chairman Green requested a motion to grant an extension of NYS accreditation to the March 12, 2021 meeting of the Commission on Forensic Science for the Westchester County Division of Forensic Sciences. Dr. O'Neill made the motion, it was seconded by Judge Mazzarelli, and approved with 10 votes for, 0 votes against, and 1 abstention [deCastro].

00:23:26
00:30:11

Chairman Green requested a motion to renew the New York State accreditation for the New York State DCJS Latent Print Laboratory for the period concurrent with their ANAB accreditation. Mr. McNamara made the motion, it was seconded by Dr. O'Neill, and approved unanimously.

00:30:11
01:18:27

The Chair then moved to Old Business. Dr. Dooley provided Commission members with a verbal update on Familial Searching. Next, Dr. Walsh provided Commission members with an update on investigative genetic genealogy. Dr. O'Neill then provided

² Commission Members Chairman Green and Dr. Dooley inadvertently did not abstain from the vote pertaining to the accreditation of the NYS DCJS Latent Print Laboratory. Although they did vote in favor of the accreditation, the abstention does not affect the outcome of the vote.

Commission members with a summary of the discussion with NYCLAC regarding Marihuana/Hemp/THC quantitation, as well as laboratory accreditation programs. Dr. Dooley then provided Commission members with an update regarding the status of discussions related to the letter submitted by the NYS Biology Technical Working Group (BIOTWG) regarding STRMix. Dr. Dooley also provided members an update on the status of the Forensic Laboratory Accreditation program.

*Approximate
video times*

01:29:30 –
01:40:25

Last under Old Business, Dr. Graham Jones of American Board of Forensic Toxicologists (ABFT) was available via Web-Ex to discuss the measures taken by ABFT regarding virtual laboratory assessments.

Next item on the agenda was Laboratory Disclosures. The Commission reviewed disclosures from the Nassau County Division of Forensic Services, Nassau County Department of Forensic Toxicology, New York City Office of the Chief Medical Examiner Department of Forensic Toxicology, New York City Police Department Police Laboratory, New York State Police Crime Laboratory, and the Suffolk County Toxicology Laboratory. Representatives from the laboratories were available via Web-Ex to respond to members' questions.

01:18:37 -
01:57:10

The Chair then requested a motion to enter Executive Session to discuss matters relating to a current investigation or matters that may lead to the appointment, promotion, demotion, discipline, or suspension of a person. Mr. Ostrer made the motion, which was seconded by Mr. McNamara, and approved unanimously.

01:57:10
01:59:23

The Commission adjourned into Executive Session. Present were Commission members Buffolino, de Castro, Dooley, Fitzpatrick, Green, Mazzairelli, McNamara, O'Neill, Ostrer, Walsh and Willey; in addition to Mr. Loftis' proxy Ms. Goldthwaite. The Commission discussed a complaint and voted to request further information from ANAB and others regarding the issue. Chairman Green requested the motion which was made by Mr. Fitzpatrick, seconded by Judge Mazzairelli, and approved 10 votes for, no votes against, and 1 abstention (de Castro). Executive Session commenced at 11:02 AM and concluded at 11:53 AM. The Commission reconvened the Open Meeting.

01:59:23
02:00:32

The next meeting is scheduled for March 12, 2021. A motion to adjourn was made by Mr. Fitzpatrick, seconded by Mr. McNamara, and approved unanimously.

02:00:32
02:02:00

Note:

Video of the open meeting is available at YouTube.



Received by OFS
01/28/21

January 28, 2021

Pasquale Buffolino, Ph.D.
Nassau County Office of the Medical Examiner
Division of Forensic Services
1194 Prospect Avenue
Westbury, NY 11590

Dear Dr. Buffolino,

Congratulations! On December 28, 2020, ANAB approved the continuation of your organization's accreditation based upon the results of your recent surveillance activity. Continuation of accreditation is a formal acknowledgement that your organization continues to operate in conformance with accreditation requirements. The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is scheduled to be a Surveillance Document Review in October 2021.

Thank you for your ongoing commitment to quality and the accreditation process.

Sincerely,


Paul Dooling
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Karen Dooling, Assistant Director
ANAB Office

Received by OFS
01/28/21



CERTIFICATE OF ACCREDITATION

The ANSI National Accreditation Board

Hereby attests that

Nassau County Office of the Medical Examiner

Division of Forensic Services

1194 Prospect Avenue, Westbury, New York 11590 USA

Fulfills the requirements of

ISO/IEC 17025:2017

ANAB Forensic Testing & Calibration AR 3125:2019

FBI Quality Assurance Standards for Forensic DNA Testing Laboratories:2020

In the field of

Forensic Testing

This certificate is valid only when accompanied by a current scope of accreditation document.

The current scope of accreditation can be verified at www.anab.org.



Pamela L. Sale, Vice President, Forensics

Expiry Date: 28 February 2023

Certificate Number: FT-0243





Received by OFS
01/28/21

SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017
ANAB Forensic Testing & Calibration AR 3125:2019
FBI Quality Assurance Standards for Forensic DNA Testing Laboratories:2020

Nassau County Office of the Medical Examiner
Division of Forensic Services

1194 Prospect Avenue
Westbury, New York 11590 USA

FORENSIC TESTING

Expiry Date: 28 February 2023 Certificate Number: FT-0243

Discipline: Biology		
Component/Parameter	Item	Key Equipment/Technology
DNA Profile Determination	Short Tandem Repeat (STR) Y-Short Tandem Repeat (Y-STR)	Capillary Electrophoresis
Individual Characteristic Database	DNA Profile	National DNA Index System (NDIS)
Physical Comparison	DNA Profile	Software Program
Qualitative Determination	Body Fluid Epithelial Cell	Chemical General Microscopy Immunoassay

Discipline: Fire Debris and Explosives		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Fire Debris	Gas Chromatography Mass Spectrometry

Discipline: Friction Ridge		
Component/Parameter	Item	Key Equipment/Technology
Enhancement	Ridge Detail	Chemical Physical Software Program

Individual Characteristic Database	Ridge Detail	Next Generation Identification System (NGI)
Physical Comparison	Ridge Detail	Software Program Visual

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Thin-Layer Chromatography Visual
Quantitative Measurement	Solid	Gas Chromatography Mass Spectrometry
Weight Measurement	Botanical Liquid Solid	Balance

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
Vice President, Forensics

Received by OFS
12/28/2020



**Nassau County Office of the Medical Examiner - Division of
Forensic Services**

2020 - 17025T - Surveillance Assessment

Prepared by Lisa Burdett

Data collected on 2020-10-21

ANSI National Accreditation Board

United States

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and the scope by discipline that was assessed for each location. The assessment plan, together with this report, provides a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the forensic service provider and conformance with all applicable accreditation requirements for the scope of accreditation listed in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in on-site activities.

REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB ISO/IEC 17025:2017 Forensic Science Testing and Calibration Laboratories Accreditation Requirements (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the forensic service provider's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

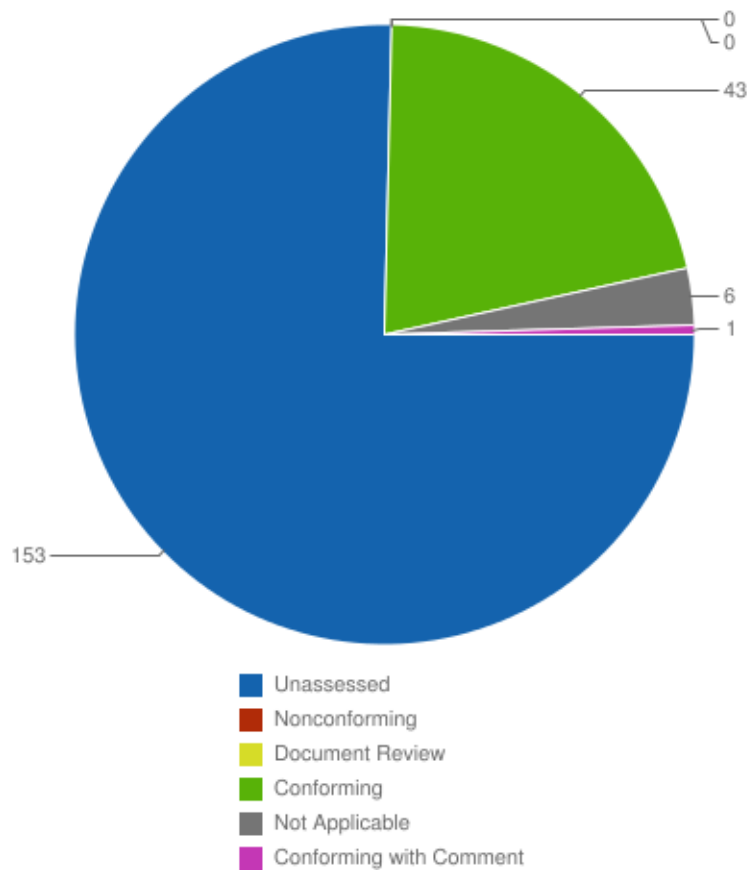
The accreditation activity also evaluates forensic science provider's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and sampling reviewed during the assessment activity, the assessment team found that the forensic service provider demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any comments (opportunities for improvement) or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Comments



Audit Comments

7.8.5 Reporting sampling - specific requirements

7.8.5.d).1 ANAB Accreditation Requirement

Conforming with Comment : 0

Requirement

If statistical sampling is used, does the report contain the confidence level and corresponding inference regarding the population?

Comments

The laboratory does have a statistical sampling plan and does use a simplified report process. The laboratory would benefit from clarifying the statement regarding statistical sampling with the addition of the sampling method.



Received by OFS
12/28/2020

December 28, 2020

Dr. Scott O'Neill, Director
New York City Police Department
Police Laboratory
150-14 Jamaica Ave.
Jamaica, NY 11432

Dear Director O'Neill,

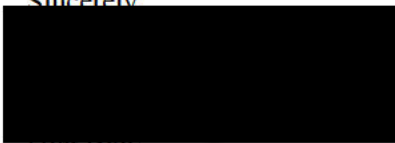
Congratulations! On December 25, 2020, ANAB approved the continuation of your organization's accreditation based upon the results of your recent surveillance activity. Continuation of accreditation is a formal acknowledgement that your organization continues to operate in conformance with accreditation requirements. The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is scheduled to be a Reassessment in November/2021.

Thank you for your ongoing commitment to quality and the accreditation process.

Sincerely,



Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Stephanie O'Shea, Quality Assurance Manager
ANAB Office



Received by OFS
02/17/21

CERTIFICATE OF ACCREDITATION

ANSI National Accreditation Board

2000 Regency Parkway, Suite 430, Cary, NC 27518

This is to certify that

New York City Police Department Police Laboratory

has been assessed by ANAB
and meets the requirements of

ISO/IEC 17025:2017

**ANAB 17025:2017 Forensic Science Testing and Calibration Laboratories
Accreditation Requirements**

while demonstrating technical competence in the field of

FORENSIC TESTING

Refer to the accompanying Scope of Accreditation for information
regarding the types of tests to which this accreditation applies

Certificate Number: FT-0251

Valid to: 03/31/2022



Pamela L. Sale
Vice President, Forensics





ANSI National Accreditation Board

SCOPE OF ACCREDITATION TO: ISO/IEC 17025:2017

ANAB 17025:2017 Forensic Science Testing and Calibration Laboratories Accreditation Requirements

New York City Police Department Police Laboratory

150-14 Jamaica Avenue
Jamaica, New York 11432

FORENSIC TESTING

Valid to: March 31, 2022

Certificate Number: FT-0251

Discipline: Document Examination		
Component/Parameter/ Characteristic	Item	Key Equipment or Technology
Authentication	Documents	Reference Collection, Infrared, Ultraviolet and Visible Spectroscopy
Physical Comparison	Documents, Fractured Physical Item, Ink, Hand Printing, Handwriting	Digital, Infrared, Ultraviolet and Visible Spectroscopy, Visual
Product (Make/Model) Determination	Copier, Ink, Paper, Printer, Typewriter	Microscopy, Typewriter Plates, Visual
Recovery	Altered, Charred, Indented Documents	Electrostatic Detection Device, Visual

Discipline: Firearms and Toolmarks		
Component/Parameter/ Characteristic	Item	Key Equipment or Technology
Determination of Functionality	Firearm, Physical Item	Dead Weights, Length Measuring Equipment, Visual
Distance Determination	Firearm, Physical Item	Chemical, Measuring Equipment, Microscopy
Individual Characteristic Database	Ammunition	National Integrated Ballistic Information Network (NIBIN)
Physical Comparison	Firearm, Ammunition	Microscopy, Visual
Product (Make/Model) Determination	Firearm, Ammunition	Microscopy, Reference Collection



Serial Number Restoration	Physical Item	Chemical, Magnetic, Visual
Simulation	Physical Item	Not Applicable
Qualitative Determination	Physical Item	Chemical, Microscopy

Discipline: Fire Debris and Explosives		
Component/Parameter/ Characteristic	Item	Key Equipment or Technology
Qualitative Determination	Fire Debris – Liquid, Solid	Gas Chromatography, Mass Spectrometry
Qualitative Determination	Explosives	Gas Chromatography, Microcrystalline, Microscopy-Polarized Light and Scanning Electron, Mass Spectrometry, Spectroscopy- Energy Dispersive, Infrared and Raman, X-Ray Powder Diffraction, X-Ray Fluorescence

Discipline: Friction Ridge		
Component/Parameter/ Characteristic	Item	Key Equipment or Technology
Enhancement	Latent, Patent, Plastic	Chemical, Physical, Software Program

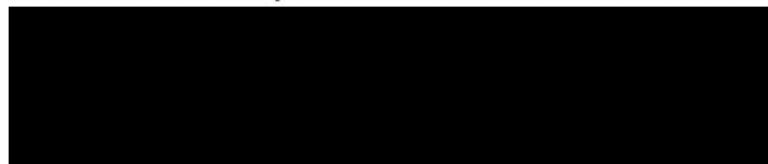
Discipline: Impressions		
Component/Parameter/ Characteristic	Item	Key Equipment or Technology
Enhancement	Footwear	Chemical, Physical, Software Program
Physical Comparison	Footwear	Digital, Visual
Product (Make/Model) Determination	Footwear	Reference Collection

Discipline: Materials (Trace)		
Component/Parameter/ Characteristic	Item	Key Equipment or Technology

Physical/Chemical Comparison	Coating, Fractured Physical Item, Fiber/Textile, General Unknown, Glass, Tape	Gas Chromatography, Microscopy – Fluorescence, Polarized Light, Scanning Electron and Stereo, Refractometer, Microspectrophotometry, Mass Spectrometry, Spectroscopy – Infrared, Energy Dispersive, Raman, Visible and Ultraviolet, X-Ray Fluorescence, X-Ray Powder Diffraction, Visual
Qualitative Determination	Blood, Coating, Fiber/Textile, General Unknown, Glass, Hair, Tape	Chemical, Gas Chromatography, Microscopy – Polarized Light, Scanning Electron and Stereo, Refractometer, Mass Spectrometry, Spectroscopy – Infrared, Energy Dispersive, Raman, Visible and Ultraviolet, X-Ray Fluorescence, X-Ray Powder Diffraction
Product (Make/Model) Determination	Paint	Reference Collection
Reconstruction	Physical Item	Visual, Microscopy

Discipline: Seized Drugs		
Component/Parameter/ Characteristic	Item	Key Equipment or Technology
Qualitative Determination	Botanical, Liquid, Solid	Chemical, Macroscopic & Microscopic Exam, Chromatography – Gas, Liquid, Thin-Layer, Infrared Spectroscopy, Mass Spectrometry
Quantitative Determination	Botanical, Liquid, Solid	Chromatography – Gas, Liquid, Mass Spectrometry
Weight Measurement	Botanical, Liquid, Solid	Balance

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. The forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
Vice President, Forensics



March 3, 2020

Ray Wickenheiser
New York State Police Crime Laboratory
1220 Washington Avenue, Bldg #30
Albany, NY 12226

Dear Director Wickenheiser,

Congratulations, ANAB has approved the continuation of your organization's accreditation based upon the results of your recent surveillance activity. Continuation of accreditation is a formal acknowledgement that your organization continues to operate in conformance with accreditation requirements.

The provided ANAB accreditation symbol may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity will be an Off-site Surveillance in January 2021.

Thank you for your ongoing commitment to quality and the accreditation process.

Sincerely,

Melissa Kennedy
Director of Accreditation
ANSI National Accreditation Board

cc: David M. Pulikowski, Director of Quality Assurance
ANAB Office

Received by OFS
12/24/2020



CERTIFICATE OF ACCREDITATION

ANSI National Accreditation Board

2000 Regency Parkway, Suite 430, Cary, NC 27518

This is to certify that

New York State Police Crime Laboratory

has been assessed by ANAB
and meets the requirements of

ISO/IEC 17025:2017

**ANAB 17025:2017 Forensic Science Testing and Calibration Laboratories
Accreditation Requirements**

FBI Quality Assurance Standards for Forensic DNA Testing Laboratories:2011

FBI Quality Assurance Standards for DNA Databasing Laboratories:2011

while demonstrating technical competence in the field of

FORENSIC TESTING

Refer to the accompanying Scope of Accreditation for information
regarding the types of tests to which this accreditation applies

Certificate Number: FT-0025

Valid to: 06/30/2022



Pamela L. Sale
Vice President, Forensics





Received by OFS
02/16/21

SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017
ANAB Forensic Testing & Calibration AR 3125:2019
FBI Quality Assurance Standards for Forensic DNA Testing Laboratories:2020
FBI Quality Assurance Standards for DNA Databasing Laboratories:2020

New York State Police Crime Laboratory
(see locations listed below)

FORENSIC TESTING

Expiry Date: 30 June 2022

Certificate Number: FT-0025

Forensic Investigation Center
1220 Washington Avenue
Albany, New York 12226 USA

Discipline: Biology		
Component/Parameter	Item	Key Equipment/Technology
DNA Profile Determination	Short Tandem Repeat (STR) Y-Short Tandem Repeat (Y-STR)	Capillary Electrophoresis
Individual Characteristic Database	DNA Profile	National DNA Index System (NDIS)
Physical Comparison	DNA Profile	Software Program
Qualitative Determination	Body Fluid Epithelial Cell	Chemical Fluorescence Spectroscopy General Microscopy Immunoassay

Discipline: Fire Debris and Explosives		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Fire Debris	Gas Chromatography Mass Spectrometry

Discipline: Firearms and Toolmarks		
Component/Parameter	Item	Key Equipment/Technology
Distance Determination	Firearm Physical Evidence	Chemical General Microscopy Measuring Equipment
Function Evaluation	Firearm	Dead Weight Measuring Equipment Visual
Individual Characteristic Database	Ammunition	National Integrated Ballistic Information Network (NIBIN)
Physical Comparison	Ammunition	General Microscopy Software Program Visual
Product (Make/Model) Determination	Ammunition Firearm	General Microscopy Measuring Equipment Reference Collection
Serial Number Restoration	Physical Item	Chemical General Microscopy Magnetic Visual

Discipline: Friction Ridge		
Component/Parameter	Item	Key Equipment/Technology
Enhancement	Ridge Detail	Chemical Physical Software Program
Individual Characteristic Database	Ridge Detail	Next Generation Identification System (NGI)
Physical Comparison	Ridge Detail	Software Program Visual
Physical Comparison (Tenprint)	Ridge Detail	Software Program Visual

Discipline: Materials (Trace)		
Component/Parameter	Item	Key Equipment/Technology
Chemical/Physical Comparison	Adhesive Botanical Coating Fiber/Textile Fractured Item General Unknown Ink Metal Polymer Soil	Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Visible Spectroscopy Visual

Qualitative Determination	Adhesive Botanical Coating Fiber/Textile General Unknown Hair Ink Metal Polymer Soil Timber	Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Ultraviolet Spectroscopy Visible Spectroscopy Visual
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Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Raman Spectroscopy Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Liquid Chromatography Ultraviolet Spectroscopy
Volume Measurement	Liquid	Balance Volumetric Glassware
Weight Measurement	Botanical Liquid Solid	Balance

Discipline: Toxicology		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Immunoassay Liquid Chromatography Mass Spectrometry
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Mass Spectrometry
Quantitative Measurement	Ante-Mortem Biological Item Post-Mortem Biological Item	Liquid Chromatography Mass Spectrometry
Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography

Mid-Hudson Satellite Crime Laboratory
224 Breunig Road
New Windsor, New York 12553 USA

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Raman Spectroscopy Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography
Volume Measurement	Liquid	Balance Volumetric Glassware
Weight Measurement	Botanical Liquid Solid	Balance

Southern Tier Satellite Crime Laboratory
44 Park Street
Port Crane, New York 13833 USA

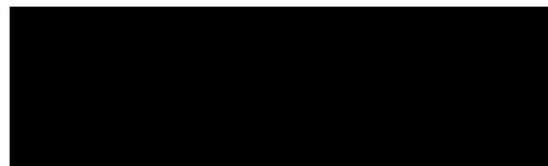
Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Raman Spectroscopy Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography

Volume Measurement	Liquid	Balance Volumetric Glassware
Weight Measurement	Botanical Liquid Solid	Balance

Western Satellite Crime Laboratory
722 Homer Street
Olean, New York 14760 USA

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Raman Spectroscopy Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography
Volume Measurement	Liquid	Balance Volumetric Glassware
Weight Measurement	Botanical Liquid Solid	Balance

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Pamela L. Sale
Vice President, Forensics

Received by OFS
12/24/2020



New York State Police - Crime Laboratory

2020 - 17025T - Surveillance Assessment

Prepared by Dave Grady

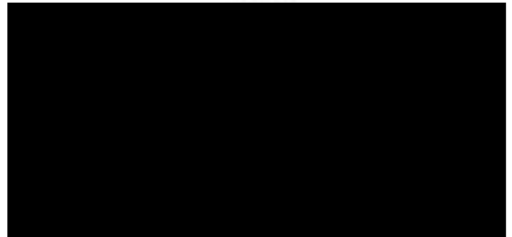
Data collected on 2020-01-13

ANSI National Accreditation Board

United States

Signature

Completed by Dave Grady on 2020-01-16



Audit Objective Evidence

4.1 Impartiality

4.1.4 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory identify risks to its impartiality on an on-going basis? Does this include those risks that arise from its activities, or from its relationships, or from the relationships of its personnel? However, such relationships do not necessarily present a laboratory with a risk to impartiality.

NOTE A relationship that threatens the impartiality of the laboratory can be based on ownership, governance, management, personnel, shared resources, finances, contracts, marketing (including branding), and payment of a sales commission or other inducement for the referral of new customers, etc.

Objective Evidence

QMM Section 4.1 Ethics and Impartiality, sub-section 4.1.4

5. Structural requirements

5.4.2 ANAB Accreditation Requirement

Conforming

Requirement

If a laboratory performs testing or calibration under the authority of a statute, regulation or other legal requirement, does the laboratory make this readily available?

ANAB NOTE A legal requirement is created, imposed and enforced by a third-party external to the laboratory.

Objective Evidence

QMM Section 5 - Structural Requirements, sub-section 5.4
NYS Executive Law Article 49-B, Section 995
NYS Compilation of Codes, Rules and Regulation Title 9, Subtitle U, Chapter VIII Part 6190
Quality Assurance Standards for DNA Databasing Laboratories
Quality Assurance Standards for Forensic DNA Testing Laboratories
NYS Executive Law Article 11.pdf
9-NYCRR-Chptr-8-Forensic-Services.pdf

6.2 Personnel

6.2.2.1 ANAB Accreditation Requirement

Conforming

Requirement

Do personnel who authorize results, opinions and/or interpretations meet the minimum educational requirements established in the country in which the laboratory operates (see Annex A)?

Objective Evidence

QMM 6.2 Personnel, sub-section 6.2.2.1
Curriculum Vitae

6.2.2.2 ANAB Accreditation Requirement

Conforming

Requirement

Does the training program for each function influencing the results of laboratory activities, to the extent necessary based on job function, include:

- a) the knowledge, skills, and abilities needed to perform work?
- b) general knowledge of forensic science?
- c) the application of ethical practices in forensic science?
- d) criminal law, civil law, and testimony?
- e) provisions for retraining?
- f) provisions for maintenance of skills and expertise? and
- g) criteria for acceptable performance?

ANAB NOTE 1 Past work experience and training may be substituted for portions of the training program to the extent that it has been demonstrated to be relevant and sufficient.

ANAB NOTE 2 ISO/IEC 17025:2017, section 7.3 may be applicable to training programs

Objective Evidence

QMM 6.2 Personnel, sub-sections 6.2.2.2; 6.2.5
Training Manuals/Programs
Employee Development Records

6.2.3.1 ANAB Accreditation Requirement

Conforming

Requirement

Are all personnel who perform testing or calibration competency tested? Testing and calibration includes the review and authorization of results and expressing an opinion or an interpretation.

Does the competency test include practical examination(s) that cover the spectrum of anticipated tasks related to the test or calibration? Are the competency test intended results achieved prior to performing the tasks on a test or calibration item?

ANAB NOTE Competency testing can be conducted for an individual task or a group of tasks covered by a module of a training program.

Objective Evidence

QMM 6.2 Personnel, sub-section 6.2.3
Competency Test Records

6.2.3.2 ANAB Accreditation Requirement

Conforming

Requirement

Do personnel who perform technical review of results or testimony meet the competency requirements as specified in 6.2.3.1 for the testing or calibration tasks being reviewed?

Objective Evidence

QMM 7.7 Ensuring the Validity of Results, sub-section 7.7.1.1
QMM, p. 67 "Review of Testimony"
Competency Test Records
Task Authorizations

6.2.5 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory have procedure(s) and retain records for:

- a) determining the competence requirements?
- b) selection of personnel?
- c) training of personnel?
- d) supervision of personnel?
- e) authorization of personnel?
- f) monitoring competence of personnel?

Objective Evidence

QMM 6.2 Personnel, section 6.2.5 (Competency Requirements and Training); Agency Webpage (Selection); 5.5 (Structural Requirements and Supervision); 6.2.6 (Authorizations); 7.7 (Monitoring)
Task Authorizations

Training Manuals/Programs (SD and Bio)
Table of Organization
Proficiency Test Records
Testimony Evaluation Forms
Observation Audits

6.2.6 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory authorize personnel to perform specific laboratory activities, including but not limited to, the following:

- a) development, modification, verification and validation of methods?
- b) analysis of results, including statements of conformity or opinions and interpretations?
- c) report, review and authorization of results?

ANAB NOTE Authorization of personnel includes all aspects of testing or calibration including, as applicable, the use of equipment.

Objective Evidence

QMM 6.2 Personnel, section 6.2.6:
Task Authorizations
Authorizations Database (for Seized Drugs and Biology)

6.5 Metrological traceability

6.5.1 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory establish and maintain metrological traceability of its measurement results by means of a documented unbroken chain of calibrations, each contributing to the measurement uncertainty, linking them to an appropriate reference?

NOTE 1 In ISO/IEC Guide 99, metrological traceability is defined as the "property of a measurement result whereby the result can be related to a reference through a documented unbroken chain of calibrations, each contributing to the measurement uncertainty".

NOTE 2 See Annex A for additional information on metrological traceability.

Objective Evidence

QMM 6.5 Calibration and Measurement Traceability, section 6.5.1
Calibration Certificates

6.5.1.1 ANAB Accreditation Requirement

Conforming

Requirement

Does the laboratory establish and maintain metrological traceability of its measurement results by utilizing products and services from suppliers of external calibration services for measuring equipment and/or reference standards, and certified reference materials that are:

- a) a National Metrology Institute that is a signatory to the BIPM - CIPM Mutual Recognition Arrangement with the calibration of measuring equipment and/or reference standard to be purchased or the certified reference material listed to be purchased in Appendix C of the BIPM key comparison database (KCDB)? or
- b) a service supplier accredited to ISO/IEC 17025 by an accrediting body that is a signatory to the ILAC Mutual Recognition Arrangement, with the calibration of measuring equipment and/or reference standard to be purchased listed in a scope of accreditation? or
- c) an accredited reference material producer that is accredited to ISO 17034, by an accrediting body that is a signatory to a mutual or multilateral recognition arrangement in an ILAC recognized regional accreditation cooperation or the ILAC Mutual Recognition Arrangement, with a scope of accreditation covering the certified reference material to be purchased?

Objective Evidence

QMM 6.5 Calibration and Measurement Traceability, section 6.5.1.1
Calibration Certificates
Reference Materials Certificates/Records

6.5.1.2 ANAB Accreditation Requirement

Conforming

Requirement

In situations where a supplier that meets 6.5.1.1 is not available, were the competence, capability, and metrological traceability for the supplier and the external product or service being purchased confirmed? Was objective evidence of the confirmation available for review?

Objective Evidence

QMM 6.5 Calibration and Measurement Traceability, section 6.5.1.2

6.5.1.3 ANAB Accreditation Requirement

Not Applicable

Requirement

For the purpose of establishing traceability of a measurement, did an accredited laboratory that may calibrate its own equipment that supports an accredited parameter on the scope meet the related requirements in ISO/IEC 17025 and this document:

- a) was the calibration and any check of the calibration status carried out by appropriately trained, competency tested, and authorized personnel?
- b) was the calibration method validated or verified prior to use?
- c) were certified reference materials or measuring instruments used in the calibration method traceable with appropriate measurement uncertainties?
- d) was the calibration carried out in an appropriate environment?
- e) were technical records of the calibration established and maintained?
- f) did the laboratory have and apply a procedure for calculating the measurement uncertainty for each equipment calibration it conducts?
- and
- g) was a technical review of the technical records including any data transfers and calculations completed by an individual other than the person(s) who performed the work?

Objective Evidence

N/A - The laboratory does not perform calibrations of its own equipment.

6.5.1.4 ANAB Accreditation Requirement

Conforming

Requirement

If a certified reference material is changed in a way that alters the traceable measurement value, then is the equipment used to alter the certified reference material evaluated for applicability of measurement traceability accreditation requirements?

Objective Evidence

QMM 6.5 Calibration and Measurement Traceability, section 6.5.1.4
Drug Chemistry Cocaine Quantitation Procedure
Records of glassware equipment evaluations

7.1 Review of requests, tenders and contracts

7.1.9 ANAB Accreditation Requirement

Conforming

Requirement

Is the extent of database (e.g., DNA profiles, friction ridge, ballistics, biometrics) searches communicated to customers and updated as needed?

ANAB NOTE 1 "extent" will be specific to the database but may include aspects of the scope or range of the search (e.g., local, state, national, international), the frequency of the search or if the customer is required to make a request to elevate the scope of the search or to have a search performed.

ANAB NOTE 2 This may be communicated on a case-by-case basis, in the report, or in a general customer communication.

Objective Evidence

QMM 7.1 Review of Requests, Tenders and Contracts, section 7.1.9
CODIS Reporting Procedures
Case Reports

7.2.1 Selection and verification of methods

7.2.1.1.2 ANAB Accreditation Requirement

Conforming

Requirement

Do all test methods that involve the comparison of an unknown to a known require the evaluation of the unknown item(s) to identify characteristics suitable for comparison and, if applicable, characteristics suitable for statistical rarity calculations, prior to comparison to one or more known item(s)?

ANAB NOTE 1 Characteristics include, but are not limited to, alleles in a DNA profile, friction ridge detail in a latent print, striation detail on a bullet, features of handwriting, or criteria for evaluation of mass spectrometry fragments and ratios in a seized drug sample or a toxicology sample extract.

ANAB NOTE 2 This requirement is not focused on the process of assessing an unknown in order to identify the test item that will be the subject of further comparison. In these circumstances, it may be appropriate to perform a preliminary characterization of the known prior to the assessment of the unknown.

Objective Evidence

QMM 7.2 Method Selection and Validation, section 7.2.1.1
Biology Interpretation Procedure
Drug Chemistry Interpretation Procedure

7.2.1.5 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory verify that it can properly perform methods before introducing them by ensuring that it can achieve the required performance? Are records of the verification retained? If the method is revised by issuing body, is the verification repeated to the extent necessary?

Objective Evidence

QMM Method Selection and Validation, section 7.2.1.5
Verification Records (Biology and Seized Drugs)

7.2.2 Validation of methods

7.2.2.1 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory validate non-standard methods, laboratory-developed methods and standard methods used outside their intended scope or otherwise modified? Is the validation as extensive as is necessary to meet the needs of the given application or field of application?

NOTE 1 Validation can include procedures for sampling, handling and transportation of test or calibration items.

NOTE 2 The techniques used for method validation can be one of, or a combination of, the following:

- a) calibration or evaluation of bias and precision using reference standards or reference materials;
- b) systematic assessment of the factors influencing the result;
- c) testing method robustness through variation of controlled parameters, such as incubator temperature, volume dispensed;
- d) comparison of results achieved with other validated methods;
- e) interlaboratory comparisons;
- f) evaluation of measurement uncertainty of the results based on an understanding of the theoretical principles of the method and practical experience of the performance of the sampling or test method.

Objective Evidence

QMM Method Selection and Validation, section 7.2.2.1
Validation Records

7.2.2.1.1 ANAB Accreditation Requirement

Conforming

Requirement

Does the laboratory have a procedure for method validation that:

- a) includes the associated data analysis and interpretation?
- b) establishes the data required to report a result, opinion, or interpretation? and

c) identifies limitations of the method, reported results, opinions, and interpretations?

Objective Evidence

QMM Method Selection and Validation, 7.2.2.1.1
SOP Section 6.6 "Validation" (Biology)
SOP Section 18 "Method Validation" (Drug Chemistry)

7.2.2.2 ISO/IEC 17025:2017

Conforming

Requirement

When changes are made to a validated method, is the influence of such changes determined and where they are found to affect the original validation, is a new method validation performed?

ANAB NOTE Changes to associated data analysis and interpretation are considered changes to a validated method.

Objective Evidence

QMM Method Selection and Validation, section 7.2.2.2
SOP Section 6.6 "Validation" (Biology)
SOP Section 18 "Method Validation" (Drug Chemistry)
Validation Records

7.2.2.4 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory retain the following records of validation:

- a) the validation procedure used?
- b) specification of the requirements?
- c) determination of the performance characteristics of the method?
- d) results obtained?
- e) a statement on the validity of the method, detailing its fitness for the intended use?

Objective Evidence

QMM Method Selection and Validation, 7.2.2.4
Validation Records

7.3 Sampling

7.3.2.b).1 ANAB Accreditation Requirement

Conforming

Requirement

Is statistical sampling at a stated level of confidence used if an inference will be made to report on the whole population?

Objective Evidence

QMM Sampling, section 7.3.1
Drug Chemistry "Representative Sampling Plan"
Case Records

7.4 Handling of test or calibration items

7.4.1 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory have a procedure for the transportation, receipt, handling, protection, storage, retention, and disposal or return of test or calibration items, including all provisions necessary to protect the integrity of the test or calibration item, and to protect the interests of the laboratory and the customer? Are precautions taken to avoid deterioration, contamination, loss or damage to the item during handling, transporting, storing/waiting, and preparation for testing or calibration? Are handling instructions provided with the item followed?

Objective Evidence

QMM Appendix A, "Handling of Test Items"
Evidence Receiving Procedures
Evidence Storage Areas

7.4.1.1 ANAB Accreditation Requirement

Conforming

Requirement

For all test items received except known origin individual characteristic database samples, does the procedure:

- a) address requirements for storage, packaging, and sealing of items to:
 - 1) protect the integrity of all items? and
 - 2) require items to be re-sealed as soon as practicable?
- b) address measures to be taken to secure unattended items?
- c) require chain-of-custody for:
 - 1) all items received? and
 - 2) items that are collected or created and preserved for future testing (e.g., ESDA lifts, test-fired ammunition, latent print lifts, trace evidence, DNA extracts)?
- d) require chain-of-custody to securely and accurately identify:
 - 1) the individual(s) or location(s) receiving or transferring the item(s)? and
 - 2) the item(s) being transferred? and
 - 3) the chronological order of all transfers, minimally including the date?
- e) require communication to the customer regarding the disposition of all items received; and
- f) address communication to the customer regarding items collected or created and preserved for future testing?

ANAB NOTE 1 c) An item being tracked could contain multiple components and be tracked as one item.

ANAB NOTE 2 d).1) Documentation of internal transfers does not need to include use of personal storage locations.

Objective Evidence

QMM Appendix A, "Handling of Test Items"
Evidence Receiving Procedures
Evidence Storage Areas
Case Records

7.5 Technical records

7.5.1 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory ensure that technical records for each laboratory activity contain the results, report and sufficient information to facilitate, if possible, identification of factors affecting the measurement result and its associated measurement uncertainty and enable the repetition of the laboratory activity under conditions as close as possible to the original? Do the technical records include the date and the identity of personnel responsible for each laboratory activity and for checking data and results? Are original observations, data and calculations recorded at the time they are made and identifiable with the specific task?

ANAB NOTE Options for recording observations include, but are not limited to: written notes, photography, drawing, photocopying, or scanning.

Objective Evidence

QMM section 7.5 "Technical Records"
Case Records

7.5.1.3 ANAB Accreditation Requirement

Conforming

Requirement

Are technical records to support a report (including results, opinions, and interpretations) such that, another reviewer possessing the relevant knowledge, skills, and abilities could evaluate what was done and interpret the data?

Objective Evidence

QMM section 7.5 Technical Records, sub-section 7.5.1.3
Case Records

7.5.1.4 ANAB Accreditation Requirement

Conforming

Requirement

Are records created or maintained in a permanent manner?

ANAB NOTE For example, technical records originally captured in pencil (e.g., a rough sketch) can be maintained in a permanent manner by photocopying, scanning, or taking a photo.

Objective Evidence

QMM, section 7.5.1.4
Case Records

7.5.2 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory ensure that amendments to technical records can be tracked to previous versions or to original observations? Are both the original and amended data and files retained, including the date of alteration, an indication of the altered aspects and the personnel responsible for the alterations?

ANAB NOTE Contemporaneous revisions are not considered amendments.

Objective Evidence

QMM Section 7.5.2
Amended Records

7.6 Evaluation of measurement uncertainty

7.6.1.1 ANAB Accreditation Requirement

Conforming

Requirement

Does the method of analysis for evaluation of measurement uncertainty:

- a) require the specific measuring device or instrument used for a reported result to have been included in or evaluated against the estimation of measurement uncertainty for that method?
- b) include the process of rounding the expanded uncertainty?
- c) require the coverage probability of the expanded uncertainty to be a minimum of 95.45% (often referred to as approximately 95%)? and
- d) specify the schedule to review and/or recalculate the measurement uncertainty?

Objective Evidence

QMM Section 7.6.1.1
Drug Chemistry Uncertainty Budgets
Case Records

7.6.3.1 ANAB Accreditation Requirement

Conforming

Requirement

Was the measurement uncertainty evaluated, or estimated when applicable, for all reported quantitative results?

ANAB NOTE An item descriptor that includes a number is not considered a result. This difference should be clear to the reader of the report.

Objective Evidence

Case Records/Reports

7.6.4 ANAB Accreditation Requirement

Conforming

Requirement

Were the following records maintained for each evaluation and estimation of measurement uncertainty:

- a) statement defining the measurand?
- b) statement of how traceability is established for the measurement?
- c) the equipment (e.g., measuring device[s] or instrument[s]) used?
- d) all uncertainty components considered?
- e) all uncertainty components of significance and how they were evaluated?
- f) data used to estimate repeatability, intermediate precision, and/or reproducibility?
- g) all calculations performed? and
- h) the combined standard uncertainty, the coverage factor, the coverage probability, and the resulting expanded uncertainty?

Objective Evidence

QMM Section 7.6.4

Drug Chemistry Uncertainty Budgets

7.7 Ensuring the validity of results

7.7.1 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory have a procedure for monitoring the validity of results? Is the resulting data recorded in such a way that trends are detectable and, where practicable, statistical techniques are applied to review the results? Is the monitoring planned and reviewed and include, where appropriate, but not be limited to:

- a) use of reference materials or quality control materials?
- b) use of alternative instrumentation that has been calibrated to provide traceable results?
- c) functional check(s) of measuring and testing equipment?
- d) use of check or working standards with control charts, where applicable?
- e) intermediate checks on measuring equipment?
- f) replicate tests or calibrations using the same or different methods?
- g) retesting or recalibration of retained items?
- h) correlation of results for different characteristics of an item?
- i) review of reported results?
- j) intralaboratory comparisons?
- k) testing of blind sample(s)?

Objective Evidence

QMM, Section 7.7.1 "Ensuring the Validity of Results"

Proficiency Test Records

Records of Observation Audits

Records of Retesting

Case Records (Technical Reviews)

Testimony Evaluation Records

Records of Instrument/Equipment Performance Checks

7.7.1 ANAB Accreditation Requirement

Conforming

Requirement

g).1 When a verification of a result is carried out:

- a) was it conducted by an individual who is currently authorized to perform the testing?
- b) was a record of the verification made and did the record identify who performed the verification, when it was performed, and the result of the verification? and
- c) was the resolution of any discrepancy recorded?

ANAB NOTE 1 a) See requirements of 6.2.6 in ISO/IEC 17025:2017.

ANAB NOTE 2 b) Verification may be recorded for each result verified or as a summary for all results verified.

l) Is there a procedure for the technical review of technical records, including reports, and testimony? Does the procedure:

- 1. require that a technical review be performed by an individual that has been competency tested to perform the testing or calibration work that is being reviewed?
- 2. preclude an individual from technically reviewing their own work?
- 3. define the method to be used to ensure a representative sample of technical records and reports in each discipline are subjected to technical review?
- 4. define the method to be used to ensure testimony in each discipline is reviewed?
- 5. define the method to be used to conduct and record the review?
- 6. ensure that the results, opinions and interpretations are accurate, properly qualified and supported by the technical record?

7. ensure conformance with methods and applicable management system documents? and
8. describe a course of action to be taken if a discrepancy is found?

ANAB NOTE 1 An individual conducting the technical review need not be an employee of the forensic service provider, currently proficiency tested or currently performing the work.

ANAB NOTE 2 An individual who performs a verification can also perform a technical review.

ANAB NOTE 3 The frequency may vary for different disciplines.

Objective Evidence

QMM Section 7.7 Ensuring the Validity of Results, sections 7.7.1.g)1; 7.7.1.l
QMM, page 65 "Technical Resolution Process"
Drug Chemistry SOP 26.7 "Technical Review of Drug Chemistry Casework"
DNA SOP D9.1 "Technical Review"
Competency Test Records
Task Authorizations
Case Records

7.7.3 ISO/IEC 17025:2017

Conforming

Requirement

Is data from monitoring activities analyzed, used to control and, if applicable, improve the laboratory's activities? If the results of the analysis of data from monitoring activities are found to be outside pre-defined criteria, is appropriate action taken to prevent incorrect results from being reported?

Objective Evidence

QMM Section 7.7.3
Proficiency Test Records
Records of Retesting
Observation Audits
Testimony Evaluation Records

7.7.6 ANAB Accreditation Requirement

Conforming

Requirement

Is there a plan that will:
a) demonstrate conformance with the requirements stated in clause 7.7.2.1.b) and 7.7.4? and
b) ensure inclusion of a representative sample of the components/parameters and equipment/technologies within each discipline listed on the scope of accreditation?

Objective Evidence

QMM Section 7.7.6
Proficiency Test Plans

7.7.8 ANAB Accreditation Requirement

Conforming

Requirement

Were the following records maintained for all intralaboratory comparisons, interlaboratory comparisons, proficiency tests and observation-based monitoring:
a) discipline(s) monitored?
b) design of the monitoring activity?
c) expected results?
d) location, when more than one location is associated with a single accreditation certificate?
e) records submitted to a proficiency test provider, when applicable?
f) appropriate technical records?
g) evaluation of results and action taken for unexpected results? and
h) feedback on individual performance provided to the participant?

ANAB NOTE f) See requirements of 7.5 in ISO/IEC 17025:2017 and this document.

Objective Evidence

7.8.1 General

7.8.1.2 ISO/IEC 17025:2017

Conforming

Requirement

Are results provided accurately, clearly, unambiguously and objectively, usually in a report (e.g. a test report or a calibration certificate or report of sampling), and include all the information agreed with the customer and necessary for the interpretation of the results and all information required by the method used? Are all issued reports retained as technical records?

NOTE 1 For the purposes of this document, test reports and calibration certificates are sometimes referred to as test certificates and calibration reports, respectively.

NOTE 2 Reports can be issued as hard copies or by electronic means, provided that the requirements of this document are met.

Objective Evidence

QMM Section 7.8.1.2
 Case Reports

7.8.1.2.2 ANAB Accreditation Requirement

Conforming

Requirement

Is there a procedure for reporting of results that:

- a) identifies what will be reported for all items received, including items on which no work was performed, items collected or created and preserved for future testing, and for partial work performed?
- b) requires qualifying the significance of associations in the report whether by a statistic or a qualitative statement?
- c) requires communicating the reason(s) in the report when the reported results are inconclusive? and
- d) requires reporting of the initial database entry (e.g., DNA profiles, friction ridge, ballistics, biometrics)?

ANAB NOTE b) Associations for multiple results may be qualified by a single statistic or qualitative statement if the statistics are identical or, where applicable, meet or exceed a defined minimum threshold.

Objective Evidence

QMM Section 7.8 Reporting the Results, page 79
 DNA Technical Manual, sections D7.7 (report conclusions) and D7.9 (inconclusive results)
 Drug Chemistry SOP 23 "Report Writing"

7.8.2 Common requirements for reports (test, calibration or sampling)

7.8.2.1 ISO/IEC 17025:2017

Conforming

Requirement

Does each report include at least the following information, unless the laboratory has valid reasons for not doing so, thereby minimizing any possibility of misunderstanding or misuse:

- a) a title (e.g. "Test Report", "Calibration Certificate" or "Report of Sampling")?
- b) the name and address of the laboratory?
- c) the location of performance of the laboratory activities, including when performed at a customer facility or at sites away from the laboratory's permanent facilities, or in associated temporary or mobile facilities?
- d) unique identification that all its components are recognized as a portion of a complete report and a clear identification of the end?
- e) the name and contact information of the customer?
- f) identification of the method used?
- g) a description, unambiguous identification, and, when necessary, the condition of the item?
- h) the date of receipt of the test or calibration item(s), and the date of sampling, where this is critical to the validity and application of the results?
- i) the date(s) of performance of the laboratory activity?
- j) the date of issue of the report?
- k) reference to the sampling plan and sampling method used by the laboratory or other bodies where these are relevant to the validity or application of the results?
- l) a statement to the effect that the results relate only to the items tested, calibrated or sampled?

- m) the results with, where appropriate, the units of measurement?
- n) additions to, deviations, or exclusions from the method?
- o) identification of the person(s) authorizing the report?
- p) clear identification when results are from external providers?

NOTE Including a statement specifying that the report shall not be reproduced except in full without approval of the laboratory can provide assurance that parts of a report are not taken out of context.

ANAB NOTE 2 A legal requirement that dictates the information to be included in a report is a valid reason to not include one or more listed report elements.

ANAB NOTE 3 i) Date(s) may be reflected as a range of dates or the date of each test or calibration.

ANAB NOTE 4 o) Authorization of the report does not have to be performed by the same person(s) who authorized the results. (see ISO/IEC 17025:2017 7.8.1.1).

Objective Evidence

QMM Section 7.8.2.1
Case Reports
Customer Agreement for Simplified Reports on Agency Website

7.8.3 Specific requirements for test reports

7.8.3.1 ISO/IEC 17025:2017

Conforming

Requirement

In addition to the requirements listed in 7.8.2, do the test reports, where necessary for the interpretation of the test results, include the following:

- a) information on specific test conditions, such as environmental conditions?
- b) where relevant, a statement of conformity with requirements or specifications (see 7.8.6)?
- c) where applicable, the measurement uncertainty presented in the same unit as that of the measurand or in a term relative to the measurand (e.g. percent) when:
 - it is relevant to the validity or application of the test results?
 - a customer's instruction so requires? or
 - the measurement uncertainty affects conformity to a specification limit?
- d) where appropriate, opinions and interpretations (see 7.8.7)?
- e) additional information that may be required by specific methods, authorities, customers or groups of customers?

Objective Evidence

QMM Section 7.8.3.1
Case Reports

7.8.3.1.c).1 ANAB Accreditation Requirement

Conforming

Requirement

Was/Did the measurement uncertainty:

- a) included in the report or an annex to the report when it impacts the evaluation of a specification limit stated by a regulatory body, a statute, case law, or other legal requirement?
- b) include the measured quantity value, y , along with the associated expanded uncertainty, U , and the coverage probability?
- c) in the format of $y \pm U$?
- d) limited to at most two significant digits, unless there is a documented rationale for reporting additional significant digits? and
- e) reported to the same level of significance (i.e., same number of decimal places or digits) as the measurement result?

ANAB NOTE 1 a) A legal requirement is created, imposed, and enforced by a third-party external to the laboratory agency.

ANAB NOTE 2 c) For asymmetrical uncertainties, it may be inappropriate to quote a single result for the uncertainty and presentations other than $y \pm U$ may be needed.

ANAB NOTE 3 e) Reducing or simplifying a fraction is not a change in level of significance.

Objective Evidence

QMM Section 7.8 Reporting the Results, page 81
Case Reports

7.8.5 Reporting sampling - specific requirements

7.8.5 ISO/IEC 17025:2017

Conforming

Requirement

Where the laboratory is responsible for the sampling activity, in addition to the requirements listed in 7.8.2, do reports include the following, where necessary for the interpretation of results:

- a) the date of sampling?
- b) unique identification of the item or material sampled (including the name of the manufacturer, the model or type of designation and serial numbers, as appropriate)?
- c) the location of sampling, including any diagrams, sketches or photographs?
- d) a reference to the sampling plan and sampling method?
- e) details of any environmental conditions during sampling that affect the interpretation of the results?
- f) information required to evaluate measurement uncertainty for subsequent testing or calibration?

Objective Evidence

QMM Section 7.8.5 Reporting the Results
Drug Chemistry SOP 23 "Report Writing"
Case Reports

7.8.5.d).1 ANAB Accreditation Requirement

Conforming

Requirement

If statistical sampling is used, does the report contain the confidence level and corresponding inference regarding the population?

Objective Evidence

QMM Section 7.8 Reporting the Results, page 81
Drug Chemistry Technical Manual, section 23 (Report Writing)
Case Reports

7.9 Complaints

7.9.1 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory have a documented process to receive, evaluate and make decisions on complaints?

Objective Evidence

QMM Section 7.9 "Complaints"

7.10 Nonconforming work

7.10.2 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory retain records of nonconforming work and actions as specified in 7.10.1, bullets b) to f)?

Objective Evidence

QMM Section 7.10 Control of Nonconforming Work, sub-section 7.10.2
Nonconforming Work Identification Reports (for period 2018 - 2019)

7.10.3 ISO/IEC 17025:2017

Conforming

Requirement

Where the evaluation indicates that the nonconforming work could recur, or that there is doubt about the conformity of the laboratory's

operations with its own management system, does the laboratory implement corrective action?

Objective Evidence

QMM Section 7.10 Control of Nonconforming Work, page 91
Nonconforming Work Identification Reports (2018 - 2019)
Corrective Action Tracking Reports (2018 - 2019)

8.5 Actions to address risks and opportunities (Option A)

8.5.2 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory plan:

- a) actions to address these risks and opportunities?
- b) how to:
 - integrate and implement these actions into its management system?
 - evaluate the effectiveness of these actions?

NOTE Although this document specifies that the laboratory plans actions to address risks, there is no requirement for formal methods for risk management or a documented risk management process. Laboratories can decide whether or not to develop a more extensive risk management methodology than is required by this document, e.g. through the application of other guidance or standards.

Objective Evidence

QMM Section 8.5 Risks and Opportunities
Records of Identified Risks

8.7 Corrective actions (Option A)

8.7.1.g) ANAB Accreditation Requirement

Conforming

Requirement

g) Does the process for corrective action establish a reasonable timeframe for completion for each corrective action?

Objective Evidence

QMM Section 8.7 Corrective Actions, sub-section 8.7.1
Corrective Action Records

8.7.3 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory retain records as evidence of:

- a) the nature of the nonconformities, cause(s) and any subsequent actions taken?
- b) the results of any corrective action?

Objective Evidence

QMM Section 8.7.3
Records of Corrective Actions (2017 to present)

8.8 Internal audits (Option A)

8.8.2 ISO/IEC 17025:2017

Conforming

Requirement

Does the laboratory:

- a) plan, establish, implement and maintain an audit programme including the frequency, methods, responsibilities, planning requirements and reporting, which shall take into consideration the importance of the laboratory activities concerned, changes affecting the laboratory,

- and the results of previous audits?
- b) define the audit criteria and scope for each audit?
- c) ensure that the results of the audits are reported to relevant management?
- d) implement appropriate correction and corrective actions without undue delay?
- e) retain records as evidence of the implementation of the audit programme and the audit results?

NOTE ISO 19011 provides guidance for internal audits.

Objective Evidence

QMM Section 8.8 Internal Audits, page 114
 2018 Internal Audit
 2019 Internal Audit

8.8.2.b).1 ANAB Accreditation Requirement

Conforming

Requirement

b).1 Do internal audits include direct observation of a sample of accredited services within each discipline?

Objective Evidence

QMM Section 8.8.2
 Records of Observation Audits

8.9 Management reviews (Option A)

8.9.3 ISO/IEC 17025:2017

Conforming

Requirement

Do the outputs from the management review record all decisions and actions related to at least:

- a) the effectiveness of the management system and its processes?
- b) improvement of the laboratory activities related to the fulfilment of the requirements of this document?
- c) provision of required resources?
- d) any need for change?

Objective Evidence

QMM Section 8.9 Management Review
 2018 Management Review



Received by OFS
02/11/21

February 11, 2021

Ray Wickenheiser
New York State Police Crime Laboratory
1220 Washington Avenue, Bldg #30
Albany, NY 12226

Dear Director Wickenheiser,

Congratulations! On February 4, 2021, ANAB approved the continuation of your organization's accreditation based upon the results of your recent surveillance activity. Continuation of accreditation is a formal acknowledgement that your organization continues to operate in conformance with accreditation requirements.


Also, on February 4, 2021, ANAB granted an extension of scope in the Field of Forensic Testing in the Toxicology discipline at the Albany location. This decision was based upon the documentation provided in the assessment report and in accordance with the recommendation of the Lead Assessor. ANAB is satisfied that your organization has met or exceeded the accreditation requirements and requirements of your own documented management system for this extension of scope.

The report was provided to you during the assessment activity. An electronic version of updated accreditation documents is included with this letter.

The provided ANAB accreditation symbol may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is scheduled to be a Reassessment in January 2022.

Sincerely,


Melissa Kennedy
Director of Accreditation
ANSI National Accreditation Board

cc: David Pulikowski, Director of Quality Assurance
ANAB Office



CERTIFICATE OF ACCREDITATION

The ANSI National Accreditation Board

Hereby attests that

New York State Police Crime Laboratory
1220 Washington Avenue, Bldg #30, Albany, New York 12226 USA

Fulfills the requirements of

ISO/IEC 17025:2017

ANAB Forensic Testing & Calibration AR 3125:2019

FBI Quality Assurance Standards for Forensic DNA Testing Laboratories:2011

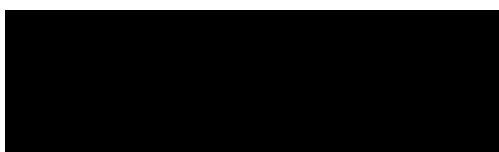
FBI Quality Assurance Standards for DNA Databasing Laboratories:2011

In the field of

Forensic Testing

This certificate is valid only when accompanied by a current scope of accreditation document.

The current scope of accreditation can be verified at www.anab.org.



Pamela L. Sale, Vice President, Forensics

Expiry Date: 30 June 2022
Certificate Number: FT-0025





Received by OFS
02/11/21

SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017
ANAB Forensic Testing & Calibration AR 3125:2019
FBI Quality Assurance Standards for Forensic DNA Testing Laboratories:2020
FBI Quality Assurance Standards for DNA Databasing Laboratories:2020

New York State Police Crime Laboratory
(see locations listed below)

FORENSIC TESTING

Expiry Date: 30 June 2022

Certificate Number: FT-0025

Forensic Investigation Center
1220 Washington Avenue
Albany, New York 12226 USA

Discipline: Biology		
Component/Parameter	Item	Key Equipment/Technology
DNA Profile Determination	Short Tandem Repeat (STR) Y-Short Tandem Repeat (Y-STR)	Capillary Electrophoresis
Individual Characteristic Database	DNA Profile	National DNA Index System (NDIS)
Physical Comparison	DNA Profile	Software Program
Qualitative Determination	Body Fluid Epithelial Cell	Capillary Electrophoresis Chemical Fluorescence Spectroscopy General Microscopy Immunoassay

Discipline: Fire Debris and Explosives		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Fire Debris	Gas Chromatography Mass Spectrometry

Discipline: Firearms and Toolmarks		
Component/Parameter	Item	Key Equipment/Technology
Distance Determination	Firearm Physical Evidence	Chemical General Microscopy Measuring Equipment
Function Evaluation	Firearm	Dead Weight Measuring Equipment Visual
Individual Characteristic Database	Ammunition	National Integrated Ballistic Information Network (NIBIN)
Physical Comparison	Ammunition	General Microscopy Software Program Visual
Product (Make/Model) Determination	Ammunition Firearm	General Microscopy Measuring Equipment Reference Collection
Serial Number Restoration	Physical Item	Chemical General Microscopy Magnetic Visual

Discipline: Friction Ridge		
Component/Parameter	Item	Key Equipment/Technology
Enhancement	Ridge Detail	Chemical Physical Software Program
Individual Characteristic Database	Ridge Detail	Next Generation Identification System (NGI)
Physical Comparison	Ridge Detail	Software Program Visual
Physical Comparison (Tenprint)	Ridge Detail	Software Program Visual

Discipline: Materials (Trace)		
Component/Parameter	Item	Key Equipment/Technology
Chemical/Physical Comparison	Adhesive Botanical Coating Fiber/Textile Fractured Item General Unknown Ink Metal Polymer Soil	Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Visible Spectroscopy Visual

Qualitative Determination	Adhesive Botanical Coating Fiber/Textile General Unknown Hair Ink Metal Polymer Soil Timber	Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Ultraviolet Spectroscopy Visible Spectroscopy Visual
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Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Raman Spectroscopy Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Liquid Chromatography Ultraviolet Spectroscopy
Volume Measurement	Liquid	Balance Volumetric Glassware
Weight Measurement	Botanical Liquid Solid	Balance

Discipline: Toxicology		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Immunoassay Liquid Chromatography Mass Spectrometry
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Mass Spectrometry
Quantitative Measurement	Ante-Mortem Biological Item	Liquid Chromatography Mass Spectrometry
Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography

Mid-Hudson Satellite Crime Laboratory
224 Breunig Road
New Windsor, New York 12553 USA

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Raman Spectroscopy Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Ultraviolet Spectroscopy
Volume Measurement	Liquid	Balance Volumetric Glassware
Weight Measurement	Botanical Liquid Solid	Balance

Southern Tier Satellite Crime Laboratory
44 Park Street
Port Crane, New York 13833 USA

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Raman Spectroscopy Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Ultraviolet Spectroscopy
Volume Measurement	Liquid	Balance Volumetric Glassware

Weight Measurement	Botanical Liquid Solid	Balance
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Western Satellite Crime Laboratory
722 Homer Street
Olean, New York 14760 USA

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Raman Spectroscopy Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Ultraviolet Spectroscopy
Volume Measurement	Liquid	Balance Volumetric Glassware
Weight Measurement	Botanical Liquid Solid	Balance

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
Vice President, Forensics

Received by OFS
01/19/21



New York State Police - Crime Laboratory

2021 - 17025T - Scope Extension Assessment

Prepared by Pamela Mikulcik

Data collected on 2021-01-14

ANSI National Accreditation Board

United States

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (e.g., reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and the scope by discipline that was assessed for each location. The assessment plan, together with this report, provides a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the forensic service provider and conformance with all applicable accreditation requirements for the scope of accreditation listed in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in on-site activities.

REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB ISO/IEC 17025:2017 Forensic Science Testing and Calibration Laboratories Accreditation Requirements (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the forensic service provider's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

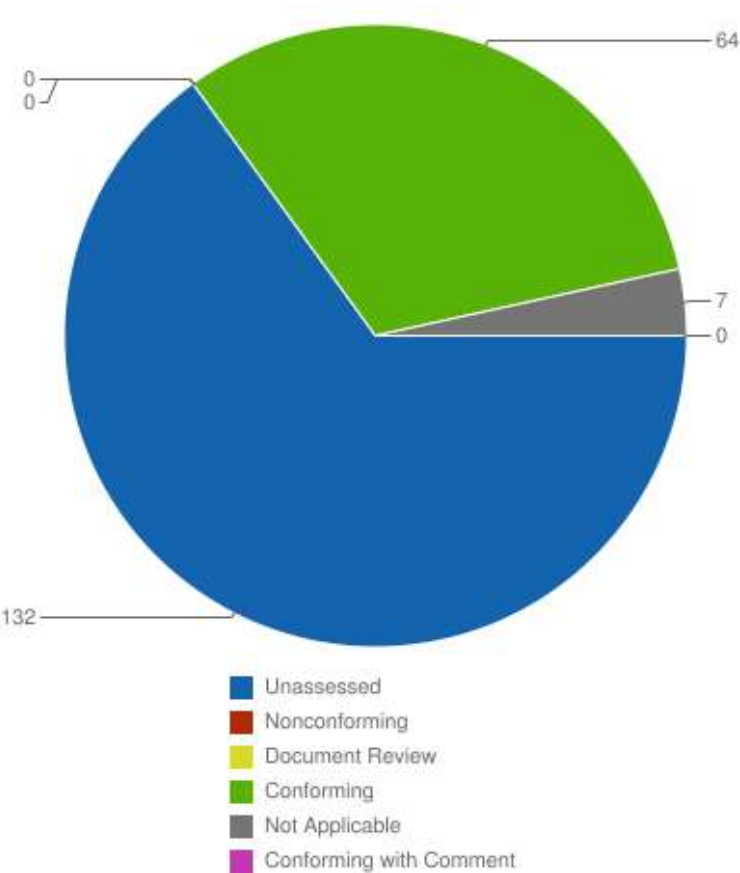
The accreditation activity also evaluates forensic science provider's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and sampling reviewed during the assessment activity, the assessment team found that the forensic service provider demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any comments (opportunities for improvement) or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Comments



Audit Comments

Received by OFS
02/19/21



Niagara County Sheriff's Office - Forensic Laboratory

2021 - 17025T - Surveillance Document Review

Prepared by Tondala Bausano

Data collected on 2021-02-01

ANSI National Accreditation Board

United States

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and the scope by discipline that was assessed for each location. The assessment plan, together with this report, provides a complete picture of the accreditation activity.

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Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

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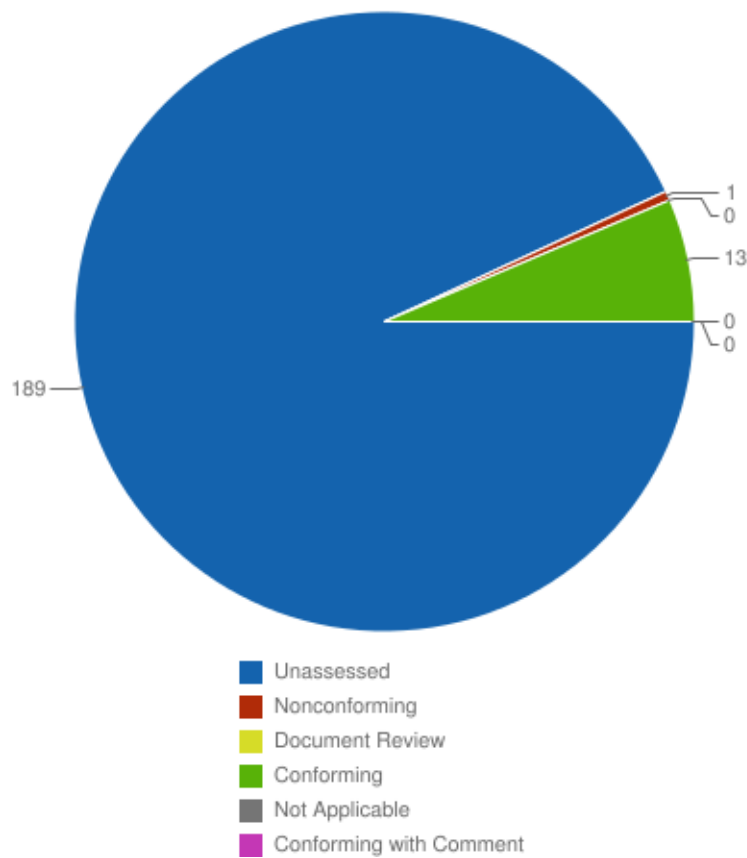
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Any comments (opportunities for improvement) or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Comments



Audit Comments

8.8 Internal audits (Option A)

8.8.2.b).1 ANAB Accreditation Requirement

Nonconforming

Requirement

b).1 Do internal audits include direct observation of a sample of accredited services within each discipline?

Comments

Quality Manual pgs. 72-73; See final Internal Audit report and related documents for 2020

Add Nonconformity Resolution Workflow

The Laboratory's 2020 internal audits did not include a direct observation of a sample of accredited services within their Fire Debris, Impression Evidence, and Materials (Trace) disciplines.

Due Date & Responsible Party : Tondala Bausano until 2021-04-20 (Add Nonconformity Resolution Workflow not completed)



DNA Subcommittee

Received by OFS
02/17/21

BRUCE S. WEIR, PH.D.
CHAIR
University of Washington

FREDERICK BIEBER, PH.D.
Harvard Medical School

ALLISON EASTMAN, PH.D.
Forensic DNA Consulting, LLC

KATHERINE GETTINGS, PH.D.
National Institute of Standards and Technology

KENNETH KIDD, PH.D.
Yale University School of Medicine

JENIFER SMITH, PH.D.
D.C. Department of Forensic Sciences

AMANDA C. SOZER, PH.D.
SNA International

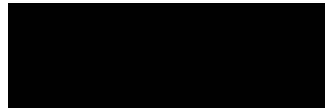
February 17, 2021

Michael C. Green, Esq.
Chair, Commission on Forensic Science
Division of Criminal Justice Services
80 South Swan Street
Albany, New York 12210

Dear Commissioner Green:

At the February 5, 2021 DNA Subcommittee meeting, members reviewed the final ANSI National Accreditation Board (ANAB) Assessment Report for the Westchester County Department of Laboratories and Research Division of Forensic Sciences. The Subcommittee voted and approved to issue a binding recommendation to the Commission on Forensic Science to renew the New York State Accreditation of the Westchester County Department of Laboratories and Research Division of Forensic Science in the discipline of Biology for the period concurrent with their ANAB accreditation. This accreditation is valid until February 28, 2025.

Very truly yours,



Bruce Weir, Ph.D.
Chair, DNA Subcommittee

cc: Members of the Commission on Forensic Science
Jill Dooley, Ph.D., Director, OFS
Natasha Harvin-Locklear, Esq., Special Counsel



Received by OFS
01/12/21

January 12, 2021

Lydia de Castro, Director
Westchester County Department of Laboratories & Research
Division of Forensic Science
10 Dana Rd.
Valhalla, NY 10595

Dear Director de Castro,

Congratulations! On December 17, 2020, ANAB renewed your organization's accreditation in the Field of Forensic Testing. This decision was based upon the documentation provided in the assessment report and in accordance with the recommendation of the Lead Assessor. ANAB is satisfied that your organization has met or exceeded the accreditation requirements and requirements of your own documented management system.

Accredited forensic service providers are expected to maintain the standards which were required to achieve accreditation and conform to [ANAB Terms and Conditions for Accreditation](#). The principal means used to monitor ongoing conformance include surveillance activities, proficiency testing reports submitted by approved test providers, and disclosure of significant events and nonconformities. The results of these monitoring activities will be considered when confirming the continuation of accreditation between assessments.

The planned surveillance activity and reassessment schedule is listed below:

- | | |
|--------------|------------------------------|
| • April 2021 | Surveillance Document Review |
| • April 2022 | Surveillance Assessment |
| • April 2023 | Surveillance Document Review |
| • April 2024 | Reassessment |

The provided ANAB accreditation symbol may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The report and an electronic version of accreditation documents are included with this letter.

Achieving accreditation is the result of an extensive commitment of resources and much preparation by the management and personnel of the entire organization. I commend the efforts of all who were involved in this achievement. On behalf of ANAB, I extend my sincere congratulations to you. If you have any questions or if ANAB might assist you in any way, please feel free to get in touch with us at qualitymatters@anab.org.

Sincerely,



Melissa Kennedy
Director of Accreditation
ANSI National Accreditation Board

cc: Jennifer Reilly
ANAB Office

Received by OFS
01/12/21



CERTIFICATE OF ACCREDITATION

The ANSI National Accreditation Board

Hereby attests that

**Westchester County Department of
Laboratories & Research
Division of Forensic Science
10 Dana Road, Valhalla, New York 10595 USA**

Fulfills the requirements of

ISO/IEC 17025:2017

ANAB Forensic Testing & Calibration AR 3125:2019

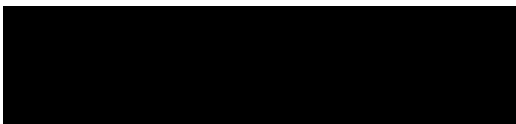
FBI Quality Assurance Standards for Forensic DNA Testing Laboratories:2020

In the field of

Forensic Testing

This certificate is valid only when accompanied by a current scope of accreditation document.

The current scope of accreditation can be verified at www.anab.org.



Expiry Date: 28 February 2025
Certificate Number: FT-0155





**Westchester County Department of Laboratories & Research
Division of Forensic Science**

2020 - 17025T - Reassessment

Prepared by Amanda Julian

Data collected on 2020-10-06

ANSI National Accreditation Board

United States

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (e.g., reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and the scope by discipline that was assessed for each location. The assessment plan, together with this report, provides a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the forensic service provider and conformance with all applicable accreditation requirements for the scope of accreditation listed in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in on-site activities.

REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB ISO/IEC 17025:2017 Forensic Science Testing and Calibration Laboratories Accreditation Requirements (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the forensic service provider's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

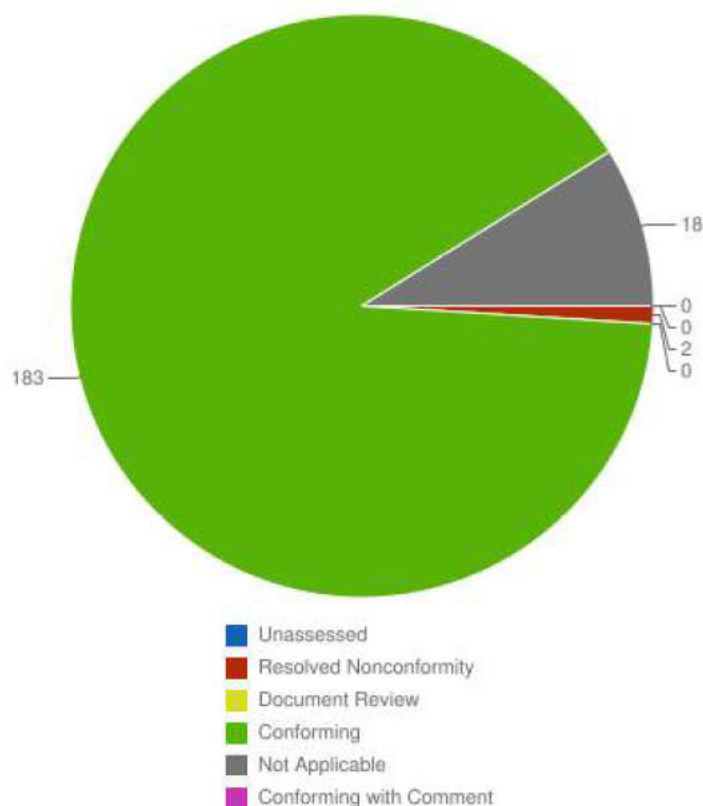
The accreditation activity also evaluates forensic science provider's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and sampling reviewed during the assessment activity, the assessment team found that the forensic service provider demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any comments (opportunities for improvement) or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Objective Evidence



Audit Objective Evidence

7.7 Ensuring the validity of results

7.7.2.1 ANAB Accreditation Requirement

Resolved Nonconformity

Requirement

Does the process for monitoring performance by comparison with results of other forensic service providers at a minimum:

- ensure successful completion of at least one proficiency test for each discipline prior to accreditation being granted in that discipline? and
- ensure each location on the scope of accreditation successfully completes, per calendar year, at least one proficiency test for each discipline in which accredited services are provided, with authorized release of the test results to ANAB from the test provider?

NOTE 1 Accreditation occurs in the discipline of Toxicology in both Calibration and Testing. The above requirements apply to the Testing scope of accreditation and Calibration scope of accreditation separately.

NOTE 2 For proficiency tests taken at the end of one calendar year, evaluation of successful completion can occur in the subsequent calendar year.

Nonconformity Resolution Workflow

No proficiency test for the Scene Investigation discipline was taken where test results were authorized for release to ANAB from a test provider in 2019.

Completion note: The laboratory was unaware of the change in requirement for scene investigation; however, they determined that an adjustment to their accreditation scope would address the issue. The appropriate documentation was filed with ANAB and reviewed. The nonconformity is resolved.

Requirement

To satisfy the proficiency test requirements in clauses 7.7.2.1.a) and b), did the forensic service provider:

- a) where available and appropriate for the work conducted, use a proficiency test provider that is accredited to ISO/IEC 17043 by an accreditation body that is a signatory to the APAC MRA or IAAC MLA and has the applicable proficiency test(s) on its scope of accreditation? or
- b) where not available or not appropriate for the work conducted, gain approval from ANAB for alternative means by which the laboratory's performance can be assessed? and
- c) submit results to the proficiency test provider, if applicable, on or before the agreed upon due date?

Nonconformity Resolution Workflow

The proficiency test provider used in the Digital and Video/Imaging Technology and Analysis discipline is not accredited to ISO/IEC 17043 nor was approval sought from ANAB for alternative means to assess the laboratory's performance.

Completion note: The laboratory determined that due to an oversight the proper form was never submitted to ANAB; however, there was no effect on casework. The completed form and subsequent approval were reviewed. The nonconformity is resolved.



SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017
ANAB Forensic Testing & Calibration AR 3125:2019
FBI Quality Assurance Standards for Forensic DNA Testing Laboratories:2020

Westchester County Department of Laboratories & Research
Division of Forensic Science

10 Dana Road
Valhalla, New York 10595 USA

FORENSIC TESTING

Expiry Date: 28 February 2025 Certificate Number: FT-0155

Discipline: Biology		
Component/Parameter	Item	Key Equipment/Technology
Field Sampling	Physical Item	Not Applicable
DNA Profile Determination	Short Tandem Repeat (STR) Y-Short Tandem Repeat (Y-STR)	Capillary Electrophoresis
Individual Characteristic Database	DNA Profile	National DNA Index System (NDIS)
Physical Comparison	DNA Profile	Software Program
Qualitative Determination	Body Fluid Epithelial Cell	Chemical General Microscopy Immunoassay

Discipline: Digital and Video/Imaging Technology and Analysis		
Component/Parameter	Item	Key Equipment/Technology
Field Sampling	Physical Item	Not Applicable
Acquisition/Extraction	Digital Data Image Multimedia Recording Video	Software Program
Authentication	Digital Data Image Multimedia Recording Video	Software Program

Content Analysis	Digital Data Image Multimedia Recording Video	Software Program Visual
Enhancement	Image Multimedia Recording Video	Software Program
Physical Comparison	Digital Data Image Multimedia Recording Video	Software Program Visual
Reconstruction	Inspection/Test Result Other Information Physical Item	Model Software Program
Transcoding	Digital Data Image Multimedia Recording Video	Software Program

Discipline: Fire Debris and Explosives		
Component/Parameter	Item	Key Equipment/Technology
Field Sampling	Physical Item	Not Applicable
Qualitative Determination	Fire Debris	Gas Chromatography Mass Spectrometry

Discipline: Firearms and Toolmarks		
Component/Parameter	Item	Key Equipment/Technology
Field Sampling	Physical Item	Not Applicable
Distance Determination	Firearm Physical Item	Chemical General Microscopy Measuring Equipment
Qualitative Determination	Metal Nitrate	Chemical General Microscopy

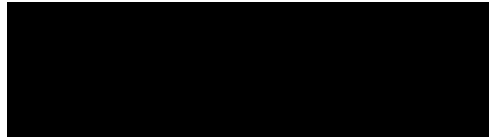
Discipline: Impressions		
Component/Parameter	Item	Key Equipment/Technology
Field Sampling	Physical Item	Not Applicable
Enhancement	Footwear Physical Item Tire	Chemical Physical Software Program

Physical Comparison	Footwear Fractured Item Physical Item Tire	Software Program Visual
Product (Make/Model) Determination	Footwear Physical Item Tire	Reference Collection
Qualitative Determination	Blood	Chemical

Discipline: Materials (Trace)		
Component/Parameter	Item	Key Equipment/Technology
Field Sampling	Physical Item	Not Applicable
Chemical/ Physical Comparison	Adhesive Coating Fiber/Textile Fractured Item General Unknown Polymer Tape	Chemical Energy Dispersive Spectroscopy Fluorescence Spectroscopy Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Microspectrophotometry Scanning Electron Microscopy Visual
Product (Make/Model) Determination	Paint	Reference Collection
Qualitative Determination	Adhesive Coating Fiber/Textile Fractured Item General Unknown Glass Gunshot Residue Hair Polymer Tape	Chemical Energy Dispersive Spectroscopy Fluorescence Spectroscopy Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Microspectrophotometry Scanning Electron Microscopy Visual

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Field Sampling	Physical Item	Not Applicable
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Mass Spectrometry Microcrystalline Thin-Layer Chromatography Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Mass Spectrometry
Weight Measurement	Botanical Liquid Solid	Balance

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
Vice President, Forensics



DNA Subcommittee

Received by OFS
02/17/21

BRUCE S. WEIR, PH.D.
CHAIR
University of Washington

FREDERICK BIEBER, PH.D.
Harvard Medical School

ALLISON EASTMAN, PH.D.
Forensic DNA Consulting, LLC

KATHERINE GETTINGS, PH.D.
National Institute of Standards and Technology

KENNETH KIDD, PH.D.
Yale University School of Medicine

JENIFER SMITH, PH.D.
D.C. Department of Forensic Sciences

AMANDA C. SOZER, PH.D.
SNA International

February 17, 2021

Michael C. Green, Esq.
Chair, Commission on Forensic Science
Division of Criminal Justice Services
80 South Swan Street
Albany, New York 12210

Dear Commissioner Green:

At the February 5, 2021 DNA Subcommittee meeting, members reviewed the formal response from STRMix Software developer, ESR, and the New York State laboratories utilizing this software. Additionally, Dr. John Buckleton, of ESR, spoke to the Subcommittee regarding the issue.

As I was unable to attend and participate in the discussion, the Subcommittee made a motion to table the matter until its May 7, 2021 meeting, where ESR, and the laboratories utilizing the STRMix software, will give final presentations and provide the Subcommittee with copies of laboratory reports. Additionally, the Subcommittee determined that STRMix is acceptable for use and there are no issues with the laboratories' continued use of the software.

Very truly yours,

Bruce Weir, Ph.D.
Chair, DNA Subcommittee

cc: Members of the Commission on Forensic Science
Jill Dooley, Ph.D., Director, OFS
Natasha Harvin-Locklear, Esq., Special Counsel



DNA Subcommittee

Received by OFS
02/17/21

February 17, 2021

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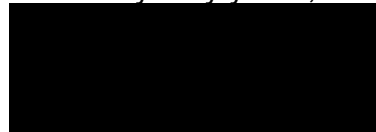
Michael C. Green, Esq.
Chair, Commission on Forensic Science
Division of Criminal Justice Services
80 South Swan Street
Albany, New York 12210

Dear Commissioner Green:

At the November 6, 2020 and February 5, 2021 DNA Subcommittee meetings, the Subcommittee reviewed the New York State Police Laboratory Familial Search Expansion Validation for the GlobalFiler Thresholds.

The Subcommittee voted to issue a binding recommendation to accept the validation thresholds as proposed by the New York State Police.

Very truly yours,



Chair, DNA Subcommittee

cc: Members of the Commission on Forensic Science
Jill Dooley, Ph.D., Director, OFS
Natasha Harvin-Locklear, Esq., Special Counsel



DNA Subcommittee

Received by OFS
02/17/21

February 17, 2021

BRUCE S. WEIR, Ph.D.
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D.C. Department of Forensic Sciences

AMANDA C. SOZER, Ph.D.
SNA International

Michael C. Green, Esq.
Chair, Commission on Forensic Science
Division of Criminal Justice Services
80 South Swan Street
Albany, New York 12210

Dear Commissioner Green:

At the February 5, 2021 DNA Subcommittee meeting, the Subcommittee reviewed and voted to issue a binding recommendation to accept the validation of massively parallel sequencing of mitochondrial DNA using Promega PowerSeq and Illumina MiSeq as proposed by the New York City Office of the Chief Medical Examiner (OCME), Department of Forensic Biology.

Very truly yours,

A solid black rectangular box redacting the signature of Bruce Weir.

Bruce Weir, Ph.D.
Chair, DNA Subcommittee

cc: Members of the Commission on Forensic Science
Jill Dooley, Ph.D., Director, OFS
Natasha Harvin-Locklear, Esq., Special Counsel

commissioner of the New York State Department of Health (NYSDOH), the commissioner of the New York City Department of Health and Mental Hygiene (NYCDOHMH), applicable local registrars or persons so authorized by such commissioner or local registrar. The proposed regulations would also require LDSSs and VAs to provide identifying information regarding the adult adopted person and the adopted person's birth parents, as available, to an adult adoptee or other specified persons where the original long form birth certificate was unavailable from NYSDOH, NYCDOHMH, local registrar or person so authorized by the NYSDOH, NYCDOHMH or local registrar. The proposed regulations are necessary to maintain enlightened adoption practices.

3. Professional Services

These proposed regulations would not create the need for additional professional services.

4. Compliance Costs

The cost to implement these changes would be negligible.

5. Economic and Technological Feasibility

The proposed regulations would not have an adverse economic impact on LDSSs or VAs and would not require the hiring of additional staff.

6. Minimizing Adverse Impact

It is not anticipated that the proposed regulations would result in an adverse impact on local government agencies or small businesses.

7. Small Business and Local Government Participation

Comments on Chapter 491 of the Laws of 2019 were made by adoption advocacy groups, LDSSs and VAs largely in support of Chapter 491 which is being implemented by the proposed regulations. Concerns were raised with Chapter 491 about the implementation of a disclosure process, the impact of access to birth certificate information on a birth parent's decision to go forward with an adoption plan and the possible traumatic impact on the adult adoptee and birth parent.

8. For Rules that Either Establish or Modify a Violation or Penalties

The proposed regulations would not establish or modify a violation or penalty.

Rural Area Flexibility Analysis

1. Types and estimated numbers of rural areas

The proposed regulations will affect the 44 local departments of social service (LDSSs) and approximately 21 voluntary authorized adoption agencies (VAs) that are in rural areas.

2. Reporting, recordkeeping and other compliance requirements; and professional services

The proposed regulations would implement Chapter 491 of the Laws of 2019 by requiring LDSSs and VAs operating adoption programs to inform biological parents and prospective adoptive parents of the right of an adopted person 18 years of age or older or, the direct line descendants of the deceased adult adopted person, or the lawful representative of such adopted person or the lawful representative of such deceased adopted person's direct line descendants, to apply for and receive the adopted person's original long form birth certificate from the commissioner of the New York State Department of Health (NYSDOH), the commissioner of the New York City Department of Health and Mental Hygiene (NYCDOHMH), applicable local registrars or persons so authorized by such commissioner or local registrar. The proposed regulations would also require LDSSs and VAs to provide identifying information regarding the adult adopted person and the adopted person's birth parents, as available, to an adult adoptee or other specified persons where the original birth certificate was unavailable from NYSDOH, NYCDOHMH, local registrar or person so authorized by either the NYSDOH, NYCDOHMH or local registrar.

3. Costs

The cost to implement these regulations would be negligible.

4. Minimizing adverse impact

It is not anticipated that the proposed regulations will result in an adverse impact on LDSSs, VAs or small businesses that are in rural areas.

5. Rural area participation

Comments on Chapter 491 of the Laws of 2019 were made by adoption advocacy groups, LDSSs and VAs largely in support of Chapter 491 which is being implemented by the proposed regulations. Concerns were raised with Chapter 491 about the implementation of a disclosure process, the impact of access to birth certificate information on a birth parent's decision to go forward with an adoption plan and the possible traumatic impact of disclosure on the adult adoptee and birth parent.

Job Impact Statement

The proposed amendments to regulation will not have a negative impact on jobs or employment opportunities in either public or private child welfare agencies. A full job impact statement has not been prepared for the proposed regulations as it is assumed that the proposed regulations will not result in the loss of any jobs.

Division of Criminal Justice Services

PROPOSED RULE MAKING NO HEARING(S) SCHEDULED

Familial Search Policy and Unidentified Human Remains

I.D. No. CJS-03-21-00005-P

PURSUANT TO THE PROVISIONS OF THE State Administrative Procedure Act, NOTICE is hereby given of the following proposed rule:

Proposed Action: Amendment of section 6192.3(g), (h), (i), (j) and (k) of Title 9 NYCRR.

Statutory authority: Executive Law, sections 837(13), 995-b(9) and (13)

Subject: Familial Search Policy and Unidentified Human Remains.

Purpose: Add unidentified human remains to familial searching for identification where the remains are those of a victim of a crime.

Text of proposed rule: 1. Section 6192.3(g)(1)(iii) of Title 9 of the New York Codes, Rules and Regulations is amended to read as follows:

(iii) the Expected Match Ratio (EMR) and/or the Expected Kinship Ratio (EKR) for the four major ethnic groups in the FBI allele frequency databases (or equivalent likelihood ratio approved by the State DNA Subcommittee) was calculated [by it] and at least one of the four database values for EMR or EKR is greater than or equal to 1.0 and all the others are greater than or equal to 0.1 (or an equivalent pre-determined statistical measure approved by the DNA Subcommittee). If available and appropriate, additional DNA analysis (e.g., Y-STR, mitochondrial) should be performed;

2. Subdivision (h) of section 6192.3 of Title 9 of the New York Codes, Rules and Regulations is amended to read as follows:

(h) When there is not a match or a partial match to a sample in the DNA databank, a familial search may be performed. To perform a familial search, the following case and sample requirements must be met:

3. Section 6192.3(h)(1) of Title 9 of the New York Codes, Rules and Regulations is amended to read as follows:

(1) The forensic DNA profile or unidentified human remains DNA profile must be associated with:

4. Section 6192.3(h)(3) of Title 9 of the New York Codes, Rules and Regulations is amended to read as follows:

(3) The forensic DNA profile must:

(i) be a single source, or a fully deduced profile originating from a mixture;

(ii) appear to have a direct connection with the putative perpetrator of the crime;

(iii) reside in SDIS; and

(iv) have been searched against DNA profiles contained in the [DNA databank's offender index] *State DNA Databank*.

5. A new paragraph 6192.3(h)(4) of Title 9 of the New York Codes, Rules and Regulations is added to read as follows:

(4) *The unidentified human remains DNA profile must:*

(i) be a single source profile;

(ii) have been developed from a deceased individual whose identity is unknown and whose death is suspected to involve the commission of a crime enumerated in paragraph (h) (1) of this section;

(iii) reside in SDIS; and,

(iv) have been searched against DNA profiles contained in the *State DNA Databank*.

6. Subdivision (i) of section 6192.3 of Title 9 of the New York Codes, Rules and Regulations is amended to read as follows:

(i) Any request for a familial DNA search must be made jointly by the appropriate investigating agency and the appropriate prosecutor (hereinafter "the requestors") through an application to the division in the form and manner specified by the division.

(1) Upon receipt of an application:

(i) The division will confirm that the [requestors have certified that] *familial search requests meets* the case requirements in paragraph [(1) of subdivision (h) of this Part have been satisfied] *(h)(1) of this section*; and

(ii) The state CODIS administrator will confirm that the sample requirements in [subparagraphs (i) and (ii) of paragraph (3) of subdivision (h) of this Part] *paragraphs (h)(3)(i) and (ii) or (h)(4)(i) and (ii) of this section* have been verified by the forensic laboratory that generated the forensic DNA profile or unidentified human remains DNA profile; and,

(iii) The state CODIS administrator will confirm that the sample requirements in [subparagraphs (iii) and (iv) of paragraph (3) of subdivision (h) of this Part] paragraphs (h)(3)(iii) and (iv) or (h)(4)(iii) and (iv) of this section have been met.

(2) The commissioner shall review all completed applications.

(i) If, upon review and evaluation of such application, the commissioner determines that any of the case and/or any of the sample requirements are not satisfied, the division shall notify the requestors, in writing, that a familial search cannot be performed and identify the requirements not satisfied.

(ii) If, upon review and evaluation of such application, the commissioner determines that all of the case and sample requirements have been satisfied, [the law enforcement agency, the district attorney, the director of the new york state police crime laboratory or his or her designee, and the commissioner of the division or his or her designee, must execute a memorandum of understanding among themselves detailing the role of each organization] the requestors will be notified in writing that their familial search request has been approved and entered into the queue for search processing.

7. Subdivision (j) of section 6192.3 of Title 9 of the New York Codes, Rules and Regulations is amended to read as follows:

(j) Upon receipt of [the memorandum of understanding described in subparagraph (ii) of paragraph (2) of subdivision (i) of this Part] an approved familial search application from the division, the New York State Police crime laboratory will:

(1) use validated software, which has been approved by the DNA subcommittee and the commission, to perform a familial search of the DNA databank and generate a candidate list;

(2) evaluate the candidate list based on established kinship threshold value(s) approved by the DNA subcommittee and commission;

(3) perform Y-STR testing on the candidate sample(s) if the forensic DNA profile or unidentified human remains DNA profile is from a male individual and sufficient forensic DNA sample exists for Y-STR testing; and,

(4) if appropriate, ensure additional testing is performed on the candidate sample, provided there is sufficient forensic DNA sample or unidentified human remains DNA profile available for testing.

8. Subdivision (k) of section 6192.3 of Title 9 of the New York Codes, Rules and Regulations is amended to read as follows:

(k) In order for the results of [the] a familial DNA search to be released, the following conditions must be met:

9. Paragraphs (1) and (2) of subdivision (k) of section 6192.3 of Title 9 of the New York Codes, Rules and Regulations are repealed and two new paragraphs (1) and (2) are added to read as follows:

(1) If the candidate profile(s) exceed the established kinship threshold value(s), and are not excluded by additional testing performed, the name(s) of the offender(s) in the DNA databank will be released to the requestors. The familial DNA search results shall be provided in writing and shall include the following statements:

(i) The information provided is for investigatory law enforcement purposes only;

(ii) The forensic DNA profile or unidentified human remains DNA profile could not have come from the named offender in the DNA databank;

(iii) The information provided is not a definitive statement of a familial (i.e., biological) relationship; and,

(iv) The information provided shall be treated only as an investigative lead.

(2) The requestors must satisfactorily complete, and demonstrate an understanding of, a mandatory, in-person, or at the discretion of the commissioner, video conference training. At a minimum, the training shall address:

(i) how a familial search is conducted, including the limitations of the method;

(ii) guidance on how to best evaluate leads from a familial search in order to protect unknown family relationships (donor parents/adoptions, previously unknown relatives);

(iii) the confidentiality requirements associated with the DNA Databank records, and any samples, analysis or other related documents (see Executive Law sections 995-c; 995-d; 995-f);

(iv) the requirement to withdraw a request if a suspect or the human remains are identified through other means before the familial search is completed; and,

(v) the requirement to provide follow-up information to the division regarding the case at intervals determined by the division.

10. Paragraphs (3) and (4) of subdivision (k) of section 6192.3 of Title 9 of the New York Codes, Rules and Regulations are amended to read as follows:

(3) If no candidate profile(s) on the candidate list exceed the established kinship threshold value(s), no name will be released and the requestors will be notified as such, in writing[, that no potential relatives were identified through a familial search].

(4) The forensic DNA [sample] profile or unidentified human remains DNA profile can be researched against the DNA databank upon renewal of the request. In the absence of exigent circumstances, such requests may be made every six months from the notification that there were no candidates identified.

Text of proposed rule and any required statements and analyses may be obtained from: Natasha Harvin-Locklear, Esq., New York State Division of Criminal Justice Services, 80 S. Swan St., Albany, NY 12210, (518) 457-8413, email: dcjslegalrulemaking@dcjs.ny.gov

Data, views or arguments may be submitted to: Same as above.

Public comment will be received until: 60 days after publication of this notice.

Regulatory Impact Statement

1. Statutory authority: Executive Law §§ 837(13), 995-b(9), (13).

Pursuant to Executive Law § 995-b(9), the Commission on Forensic Science (Commission), in consultation with the DNA Subcommittee, must promulgate a policy for the establishment and operation of a DNA Databank.

The DNA Subcommittee is a subcommittee of the Commission and is composed of scientists with expertise in the fields of molecular biology; population genetics; forensic science; and, laboratory standards and quality assurance. Pursuant to Executive Law § 995-b(13), the DNA Subcommittee has been granted authority, through binding recommendations to the Commission, regarding matters relating to the establishment and operation of the DNA Databank.

The Commission is established pursuant to Executive Law § 995-a. Although it is technically an independent entity, the Commission has no staff or budget and relies on the Division of Criminal Justice Services (Division) for the staff, administrative assistance, and other resources necessary to carry out its powers and duties. Executive Law § 837(13) authorizes the Division to adopt, amend or rescind regulations “as may be necessary or convenient to the performance of the functions, powers and duties of the [D]ivision.”

The DNA Databank became operational in 1996. Since its inception, the policy for the establishment and operation of the DNA Databank required pursuant to Executive Law § 995-b(9) has been promulgated by the Division in 9 NYCRR Part 6192. The proposed rule amends 9 NYCRR Part 6192 to codify a familial search policy.

2. Legislative objectives: The Legislature authorized the Commission to promulgate a policy for the establishment and operation of a DNA Databank, and authorized the Division to establish the Databank. Thus, the Legislature clearly intended that the Commission and Division establish and maintain effective procedures governing the DNA Databank.

3. Needs and benefits: DNA profiles generated from evidence associated with criminal investigations are routinely searched against DNA databanks. Currently, the regulations permit familial searching, which is a targeted evaluation of the convicted offenders in the State DNA Databank. This search generates a list of candidates based on kinship statistics to indicate potential biologically related individuals. Familial searching greatly increases the pool of potential suspects, thereby increasing the number of crimes solved.

While familial searching applies to forensic DNA profiles, it cannot be done with unidentified human remains. In the case of the latter, where there is evidence that the remains are those of a victim of a crime, the law presently does not allow the searching of a profile generated from the remains against the State DNA Databank. The proposed amendments add unidentified human remains to the familial search policy; however, they must meet certain case and sample requirements. The unidentified human remains DNA profile must:

(i) be a single source profile;

(ii) have been developed from a deceased individual whose identity is unknown and whose death is suspected to involve the commission of an enumerated crime;

(iii) reside in the State DNA Index Systems or SDIS; and,

(iv) have been searched against DNA profiles contained in the State DNA Databank.

The proposed regulations also streamline the familial search process by removing the memorandum of understanding step and inserting the agreement into the application.

4. Costs:

a. There are no costs to regulated parties for the implementation of, and continuing compliance with, the rule.

b. There are no costs to the agency, or state or local governments for the implementation and continuation of the rule.

c. The cost analysis is based on the fact that the proposal does not impose any mandates on local governments. It merely provides a tool for identification.

5. Local government mandates: There are no mandates.

6. Paperwork: Any request for a familial DNA search must be made

jointly by the appropriate investigating agency and the appropriate prosecutor through an application to the Division.

If, upon review and evaluation of such application, the Commissioner of the Division determines that any of the case and/or any of the sample requirements are not satisfied, the requestors will be notified, in writing, that a familial search cannot be performed. If all of the case and sample requirements have been satisfied, the requestors will be notified in writing that their familial search request has been approved and entered into the queue for search processing.

If the candidate profile(s) exceed the established kinship threshold value(s), and are not excluded by additional testing performed, the name(s) of the offender(s) in the DNA Databank will be released to the requestors. The search results will be provided in writing. If no candidate profile(s) on the candidate list exceed the established kinship threshold value(s), no name will be released and the requestors will be notified as such, in writing.

7. Duplication: No other legal requirements duplicate, overlap, or conflict with the rule.

8. Alternatives: At its June 5, 2020 meeting, the Commission reviewed and discussed the draft familial search policy, regulations and implementation plan as they were proposed by the DNA Subcommittee at its May 1, 2020 meeting. The Commission voted to send the policy, regulations and implementation plan, along with the Commission's revisions, back to the DNA Subcommittee for consideration.

On August 14, 2020, the DNA Subcommittee reviewed and discussed the proposed revisions to the familial search policy, implementation plan, and corresponding regulations, then made binding a recommendation to the Commission to adopt the amendments. The Commission formally adopted the amendments on September 16, 2020.

As the administrative arm of the Commission, the Division intends to carry out its duty to maintain effective procedures governing the DNA Databank by adopting and promulgating the proposed regulations.

9. Federal standards: There are no federal standards.

10. Compliance schedule: Regulated parties are expected to be able to comply with the rule immediately upon Notice of Adoption.

Regulatory Flexibility Analysis

DNA profiles generated from evidence associated with criminal investigations are routinely searched against DNA databanks. Currently, the regulations permit familial searching, which is a targeted evaluation of the convicted offenders in the State DNA Databank. This search generates a list of candidates based on kinship statistics to indicate potential biologically related individuals. Familial searching greatly increases the pool of potential suspects, thereby increasing the number of crimes solved.

While familial searching applies to forensic DNA profiles, it cannot be done with unidentified human remains. In the case of the latter, where there is evidence that the remains are those of a victim of a crime, the law presently does not allow the searching of a profile generated from the remains against the State DNA Databank. The proposed amendments add unidentified human remains to the familial search policy; however, they must meet certain case and sample requirements.

The proposed rule does not apply to small businesses nor does it impose mandates on local governments. It merely provides a tool for identification. As such, it is apparent that the rule will not impose any adverse economic effect, or reporting, recordkeeping or other compliance requirements on small businesses or local governments.

Rural Area Flexibility Analysis

DNA profiles generated from evidence associated with criminal investigations are routinely searched against DNA databanks. Currently, the regulations permit familial searching, which is a targeted evaluation of the convicted offenders in the State DNA Databank. This search generates a list of candidates based on kinship statistics to indicate potential biologically related individuals. Familial searching greatly increases the pool of potential suspects, thereby increasing the number of crimes solved.

While familial searching applies to forensic DNA profiles, it cannot be done with unidentified human remains. In the case of the latter, where there is evidence that the remains are those of a victim of a crime, the law presently does not allow the searching of a profile generated from the remains against the State DNA Databank. The proposed amendments add unidentified human remains to the familial search policy; however, they must meet certain case and sample requirements.

The proposal does not impose mandates on local governments. It merely provides a tool for identification. As such, it is apparent that the rule will not impose any adverse effect on rural areas, or reporting, recordkeeping or other compliance requirements on public or private entities in rural areas.

Job Impact Statement

DNA profiles generated from evidence associated with criminal investigations are routinely searched against DNA databanks. Currently, the regulations permit familial searching, which is a targeted evaluation of

the convicted offenders in the State DNA Databank. This search generates a list of candidates based on kinship statistics to indicate potential biologically related individuals. Familial searching greatly increases the pool of potential suspects, thereby increasing the number of crimes solved.

While familial searching applies to forensic DNA profiles, it cannot be done with unidentified human remains. In the case of the latter, where there is evidence that the remains are those of a victim of a crime, the law presently does not allow the searching of a profile generated from the remains against the State DNA Databank. The proposed amendments add unidentified human remains to the familial search policy; however, they must meet certain case and sample requirements.

The proposal does not impose mandates on local governments. It merely provides a tool for identification. As such, it is apparent from the nature and purpose of the rule that it will not have a substantially adverse effect on jobs and employment opportunities.

Department of Environmental Conservation

NOTICE OF ADOPTION

Sulfur-In Fuel Limitations

I.D. No. ENV-05-20-00002-A

Filing No. 2

Filing Date: 2021-01-05

Effective Date: 30 days after filing

PURSUANT TO THE PROVISIONS OF THE State Administrative Procedure Act, NOTICE is hereby given of the following action:

Action taken: Amendment of Subpart 225-1 of Title 6 NYCRR.

Statutory authority: Environmental Conservation Law, sections 1-0101, 3-0301, 19-0103, 19-0105, 19-0301, 19-0303, 19-0305, 19-0325, 19-0907, 71-2103 and 71-2105

Subject: Sulfur-in Fuel Limitations.

Purpose: Limit sulfur in liquid and solid fuels throughout NYS.

Substance of final rule: The Department of Environmental Conservation (Department) is proposing to revise 6 NYCRR Subpart 225-1, "Fuel Composition and Use - Sulfur Limitations". Subpart 225-1 imposes limits on the sulfur content of distillate oil, residual oil, and coal fired in stationary sources. The revisions to Subpart 225-1 will add process sources and incinerators as stationary emission sources to which these revisions will apply throughout New York State. The revisions will also lower the sulfur-in-fuel limit for waste oil and correct minor typographical errors. The revisions will remove 6 NYCRR subdivision 225-1.3(e) which cites section 117 of article 5 of the Energy Law. This provision states that the Governor may pre-empt the requirements of 6 NYCRR Subpart 225-1 if an energy or fuel supply emergency is declared. Finally, the revisions will remove paragraph 225-1.4(c)(2) which has been deemed contradictory and less stringent than the sulfur-in-fuel requirements of the table in subdivision 225-1.2(b) of this Subpart.

Final rule as compared with last published rule: Nonsubstantive changes were made in sections 225-1.2(a), (b), (c), (d), (e), 225-1.3(a), 225-1.5(a), (b)(1), (2) and (3).

Text of rule and any required statements and analyses may be obtained from: Mike Jennings, NYSDEC, Division of Air Resources, 625 Broadway, Albany, NY 12233-3254, (518) 402-8403, email: air.regs@dec.ny.gov

Additional matter required by statute: Pursuant to Article 8 of the State Environmental Quality Review Act, a Short Environmental Assessment Form, a Negative Declaration and a Coastal Assessment Form have been prepared and are on file.

Summary of Revised Regulatory Impact Statement **INTRODUCTION**

The New York State Department of Environmental Conservation (Department) is adopting revisions to 6 New York Codes, Rules and Regulations (NYCRR) Subpart 225-1, "Fuel Composition and Use - Sulfur Limitations" (Subpart 225-1). Subpart 225-1 imposes limits on the sulfur content of distillate oil, residual oil, and coal fired in stationary sources. The Department is adopting these revisions to both implement a statutory requirement and meet our obligations to reduce air pollution. The revisions to Subpart 225-1 will be a component of the State Implementation Plan (SIP) for New York State (NYS) directed at attainment of the