NEW YORK STATE | Commission on Forensic Science

June 13, 2025

Division of Criminal Justice Services
80 South Swan Street, Room 118
Albany, NY 12210

Empire State Development Corporation
655 3rd Avenue, 4th Floor Boardroom
New York, NY 10017

Videoconference Location:
445 Hamilton Avenue, Suite 1203
White Plains, NY 10601

9:00 AM – 11:52 AM

DRAFT MEETING MINUTES

Commission Members in Attendance:
Lt. Col. Nicholas Banbury
Pasquale Buffolino, Ph.D.
James Chithalen, Ph.D.[1]
Lydia de Castro
Steven Epstein, Esq.
William Fitzpatrick, Esq.
Jessica Goldthwaite, Esq.
Michael Marciano, Ph.D.
Erin Murphy, Esq.
Beverly Rauch
Rossana Rosado
Michelli Schmitz

DCJS Staff in Attendance:
Taylor Aaron
Aaron Cagwin
Dean DeFruscio
Colleen Glavin, Esq.
Janine Kava
Katherine Mayberry
Shelley Palmer
Joseph Popcun

[1] Representative of Commission Member James V. McDonald, M.D.

Brianna Robinson
Lindsey Rockwell
Matthew Schrantz, Esq.
Elizabeth Suparmanto

Other Attendees:
Jennifer Alois – NYS DCJS Latent Print Laboratory
Julia Becker – New York State Police Crime Laboratory
Jamie Belrose – New York State Police Crime Laboratory
Jill Dooley – New York State Police Crime Laboratory
John Doubrava – NYS DCJS State Identification Bureau
Nichole Hurbanek – New York State Police Crime Laboratory
Michael Jankowiak – New York State Police Crime Laboratory
Thomas Leach – New York State Police Crime Laboratory
Andrea Lester – NYS DCJS Latent Print Laboratory
Christopher McDonough – New York State Police Crime Laboratory
Kyra McKay – NYC OCME, Department of Forensic Biology
Craig O'Connor – NYC OCME, Department of Forensic Biology
Julie Pizziketti – New York State Police Crime Laboratory
Meredith Rosenberg – NYC OCME, Department of Forensic Biology
Raymond Valerio – Office of the Queens County District Attorney
Tiffany Vasquez – NYC OCME, Department of Forensic Biology
Christian Westring – Niagara County Sheriff's Office Forensic Laboratory

	Approximate Video Times
Chair Rosado opened the meeting by stating that she was attending virtually, and OFS Director Palmer would run the meeting. Ms. Palmer proceeded to take a roll call as members were in attendance in Albany, New York City, and virtually. A quorum was established with 11 voting members (Banbury, Buffolino, de Castro, Epstein, Fitzpatrick, Goldthwaite, Marciano, Murphy, Rauch, Rosado, and Schmitz); (Dr. Willey was not present).	00:00:00 – 00:01:19
Ms. Palmer then requested a motion to approve the June 13, 2025, agenda. Ms. Goldthwaite made a motion to add a discussion on Qiagen as an amendment to the agenda under New Business, seconded by Dr. Marciano. The motion to approve the agenda with the amendment was approved unanimously.	00:01:23 – 00:05:14
Ms. Palmer requested a motion to approve the minutes of the March 14, 2025, Commission meeting. The motion to approve the minutes was made by Ms. Schmitz, seconded by Mr. Epstein. The motion was approved unanimously.	00:05:15 – 00:05:40
Ms. Palmer then requested a motion to enter into 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 particular person. The motion was made by Mr. Fitzpatrick and seconded by Dr. Buffolino. The motion was approved with 9 votes (Banbury,	00:05:41 – 00:08:33

Approximate Video Times

Buffolino, de Castro, Fitzpatrick, Marciano, Murphy, Rauch, Rosado, and Schmitz), 1 opposed (Goldthwaite) and 1 abstention (Epstein). The Commission adjourned into Executive Session at 9:10 am.

The Commission reconvened the open meeting at 10:25 am. A motion was made by Mr. Fitzpatrick to send a letter to all lab Directors to ensure they are aware that any instance of dishonesty or gross misconduct must be disclosed immediately and with alacrity. This letter will first be drafted by Mr. Fitzpatrick and Mr. Epstein to then be reviewed by counsel, Matthew Schrantz, before finally being sent to each lab Director in the state and copied to all 62 elected District Attorneys. The motion was seconded by Mr. Epstein and approved unanimously. An additional motion was made by Mr. Fitzpatrick to request one final letter, drafted by counsel Matthew Schrantz, to be sent to the New York City Office of Chief Medical Examiner requesting certain records and information pertaining to the investigation of a complaint, which were previously requested but have not yet been supplied. The motion was seconded by Mr. Epstein and approved with 9 votes (Banbury, Buffolino, de Castro, Epstein, Fitzpatrick, Goldthwaite, Marciano, Murphy, and Schmitz) and 1 abstention (Rauch). Ms. Palmer stated that no additional action was taken in Executive Session.

00:09:30 – 00:18:40

00:09:36 – 00:11:49

00:11:50 – 00:18:31

Ms. Palmer updated the Commission briefly regarding changes to language on documents received from ANAB. Next, the Commission reviewed the Accreditation/Laboratory Updates. Matters regarding the following laboratories were considered: Erie County Central Police Services Forensic Laboratory, Erie County Medical Examiner's Office Forensic Toxicology Laboratory, Monroe County Crime Laboratory, Monroe County Office of the Medical Examiner Forensic Toxicology Laboratory, Nassau County Office of the Medical Examiner Division of Forensic Toxicology, New York City OCME Department of Forensic Biology, New York City OCME Department of Forensic Toxicology, New York City OCME Forensic Anthropology Unit, New York State Police Crime Laboratory, Niagara County Sheriff's Office Forensic Laboratory, Onondaga County Medical Examiner's Office Forensic Toxicology Laboratory, Suffolk County Medical Examiner Toxicology Laboratory, Westchester County Department of Labs & Research Division of Forensic Toxicology, and Yonkers Police Department Forensic Science Laboratory. Representatives from the laboratories were available in person or via Webex to respond to members' questions.

00:18:43 – 00:27:14

The Commission reviewed the final documentation from the ANAB reaccreditation assessment activity of the Yonkers Police Department Forensic Science Laboratory. Ms. Schmitz made a motion to issue full renewal of the laboratory's New York State Accreditation for a period concurrent with their ANAB accreditation. Dr. Buffolino seconded the motion. The motion was approved unanimously.

00:25:14 – 00:27:14

The next agenda item was Old Business. Ms. Palmer provided the Commission members with a verbal update on the Familial Search Program. Ms. Palmer then provided a status update on the DNA Subcommittee Working Groups. Since the May Subcommittee meeting, one representative from each subgroup met to discuss any overlap between the documents and recommendations. In addition, the Mixture Interpretation subgroup has met, and the Human Factors subgroup will be meeting in the next few weeks to continue discussions.

00:27:18 – 00:29:43

Approximate Video Times

The Commission then moved to New Business. From the amendment to the agenda, a discussion on Qiagen was had by the Commission members. Following discussion, a motion was made by Ms. Murphy to send a request to the Biology TWG and DNA Subcommittee to review all the publicly available and privately issued disclosures related to the Qiagen issue and assess which labs in New York are using the Qiagen kits and may be affected, and to report to the Commission any findings. Ms. Goldthwaite seconded the motion. The motion was approved unanimously.

00:29:43 – 00:35:26

00:34:27 – 00:35:10

The Commission then reviewed disclosures from Erie County Medical Examiner's Office Forensic Toxicology Laboratory, Monroe County Crime Laboratory, Nassau County Office of the Medical Examiner Division of Forensic Toxicology, New York City OCME Department of Forensic Biology, New York State Police Crime Laboratory, Niagara County Sheriff's Office Forensic Laboratory, Suffolk County Medical Examiner Toxicology Laboratory, Westchester County Department of Labs & Research Division of Forensic Science, and Westchester County Department of Labs & Research Division of Forensic Toxicology. Representatives from the laboratories were available in person or via Webex to respond to members' questions.

00:35:28 – 01:35:28

Ms. Palmer then stated that the next meeting of the Subcommittee will take place on September 26, 2025, with the location to be determined. A motion to adjourn was made by Mr. Epstein, seconded by Ms. Schmitz, and approved unanimously.

01:36:20 – 01:36:45

Note: Video of the meeting is available at https://www.youtube.com/user/nyspublicsafety

ANSI National Accreditation Board

June 24, 2025

John R. Clark
Monroe County Crime Laboratory
85 West Broad Street
Rochester, NY 14614

Dear Director Clark,

Congratulations! On May 16, 2025, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol (Testing) 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 a Reassessment scheduled to occur the week of April 12, 2026.

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

Sincerely,

[redacted]

Brad Putnam
Director of Accreditation
ANSI National Accreditation Board

cc: Marcia Bledsoe, Quality Assurance Coordinator
New York DCJS
ANAB Office

ANSI National Accreditation Board

SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017
Accreditation Requirements for Forensic Testing and Calibration (2023)
FBI Quality Assurance Standards for Forensic DNA Testing Laboratories:2020

Monroe County Crime Laboratory
85 West Broad Street
Rochester, New York 14614 USA

FORENSIC TESTING

ISO/IEC 17025 Accreditation Granted: 29 Augusts 2013

Certificate Number: FT-0312 Certificate Expiry Date: 31 August 2026

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	Chemical Fluorescence Spectroscopy General Microscopy Immunoassay

Discipline: Fire Debris and Explosives		
Component/Parameter	**Item**	**Key Equipment/Technology**
Qualitative Determination	Explosive	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Microcrystalline X-Ray Fluorescence Spectroscopy
Qualitative Determination	Fire Debris	Gas Chromatography Mass Spectrometry

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Discipline: Firearms and Toolmarks		
Component/Parameter	**Item**	**Key Equipment/Technology**
Distance Determination	Firearm Physical Item	Chemical General Microscopy Measuring Equipment
Function Evaluation	Air Gun Firearm Silencer	Dead Weight Measuring Equipment Visual
Individual Characteristic Database	Ammunition	National Integrated Ballistic Information Network (NIBIN)
Physical Comparison	Ammunition Tool/Toolmark	General Microscopy Measuring Equipment Visual
Qualitative Determination	Ammunition Firearm Metal Nitrate/Nitrite Tool	Chemical General Microscopy Measuring Equipment Reference Collection
Serial Number Restoration	Physical Item	Chemical General Microscopy Magnetic Visual

Discipline: Impressions		
Component/Parameter	**Item**	**Key Equipment/Technology**
Enhancement	Footwear Physical Item Tire	Chemical Software Program
Physical Comparison	Footwear Physical Item Tire	Software Program Visual
Qualitative Determination	Footwear Tire	Reference Collection

Discipline: Materials (Trace)		
Component/Parameter	**Item**	**Key Equipment/Technology**
Chemical/Physical Comparison	Coating Fiber/Textile Fractured Item General Unknown Glass Hair Tape	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Microspectrophotometry Refractometry Thin-Layer Chromatography

		Visual X-Ray Fluorescence Spectroscopy
Qualitative Determination	Coating Fiber/Textile General Unknown Glass Hair Tape	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Microspectrophotometry Reference Collection Refractometry Thin-Layer Chromatography Visual X-Ray Fluorescence Spectroscopy

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

[redacted]

Pamela L. Sale
Vice President, Forensics

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Dr Gail Cooper, Director of Forensic Toxicology
Department of Forensic Toxicology
520 First Avenue, New York NY 10016
Telephone: 212-447-2642 **Fax:** 212-447-6062
Email: gcooper@ocme.nyc.gov
Official Website: www.nyc.gov/ocme

Rossana Rosado
Chair, New York State Commission on Forensic Science
Executive Deputy Commissioner, New York State Division of Criminal Justice Services
Alfred E. Smith Building
80 South Swan St.
Albany, New York 12210

August 13, 2025

Dear Ms. Rosado,

I am writing to inform the New York State Commission on Forensic Science that Assistant Director and Quality Manager, Elba Arango has returned full-time from maternity leave and will resume her role as the main contact for any quality issues, effective, Monday August 18th, 2025.

Yours Sincerely,

[redacted]

Dr Gail Cooper BSc MSc PhD CChem FRSC FHEA
Director of Forensic Toxicology

dcjs.sm.forensiclabs

From: Odien, Jennifer (OCME) <JOdien@ocme.nyc.gov>
Sent: Friday, August 15, 2025 9:27 AM
To: dcjs.sm.forensiclabs; QualityMatters
Cc: Hamburg, Chris; Soler, Angela (OCME)
Subject: Follow-up announcement: Forensic Anthropology Director Position

Good morning,

I'm happy to announce that Dr. Soler's promotion to Director of the Forensic Anthropology is now official and her title going forward is Director of Forensic Anthropology.

Best,
Jennifer

Jennifer K. Odien, PhD, D-ABFA
Forensic Anthropologist / WTC Anthropologist
Office of Chief Medical Examiner
520 First Avenue
New York, New York, 10016
WTC Hotline: 212-447-7884
Tel:212-447-2767
Cell:347-386-3290
Email: JOdien@ocme.nyc.gov
Web: ***http://www.nyc.gov/ocme***

OCME *cares*
commitment · accountability
resilience · excellence · service

Click HERE to provide feedback for the Forensic Anthropology Unit

ANSI National Accreditation Board

August 18, 2025

Russell McLeod
New York City Police Department
Latent Print Section
One Police Plaza, Room 506
New York, New York 10038

Dear Lieutenant Doty,

Congratulations! On August 13, 2025, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Inspection. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol (Inspection) 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 a Surveillance Assessment without Witnessing scheduled for July 2026.

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

Sincerely,

[redacted]

Nita Bolz
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Jennifer Lady, Quality Assurance Manager
NY DCJS
ANAB Office

ANSI National Accreditation Board

SCOPE OF ACCREDITATION TO:
ISO/IEC 17020:2012

Accreditation Requirements for Forensic Inspection (2023)

New York City Police Department – Latent Print Section

One Police Plaza, Room 506
New York, New York 10038 USA

FORENSIC INSPECTION
Type C Inspection Body

ISO/IEC 17020 Accreditation Granted: 13 January 2020

Certificate Number: FI-0053 Certificate Expiry Date: 30 November 2027

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

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.

[redacted]

Pamela L. Sale
Vice President, Forensics

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New York City Police Department - Latent Print Section

2025 – 17020 – Y2 – Surveillance Assessment With Witnessing

Prepared by Natasha Wheatley

Data collected on 2025-07-29

ANSI National Accreditation Board

United States

Description

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 refers to the scope of the discipline(s) 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 inspection body and conformance with all applicable accreditation requirements for the scope of accreditation referenced 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 most activities.

REQUIREMENTS:

ISO/IEC 17020:2012 Conformity assessment – Requirements for the operation of various types of bodies performing inspection & ANAB Accreditation Requirements for Forensic Inspection Bodies (AR 3120) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the inspection body'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 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 subcontracting inspection services when applicable.

Process requirements related to the handling of inspection items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items collected 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 records and are reported correctly, accurately, clearly. Requirements for a documented process for handling complaints and appeals.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Required procedures for corrective action and preventive actions. Requirements for an internal audit program and management reviews.

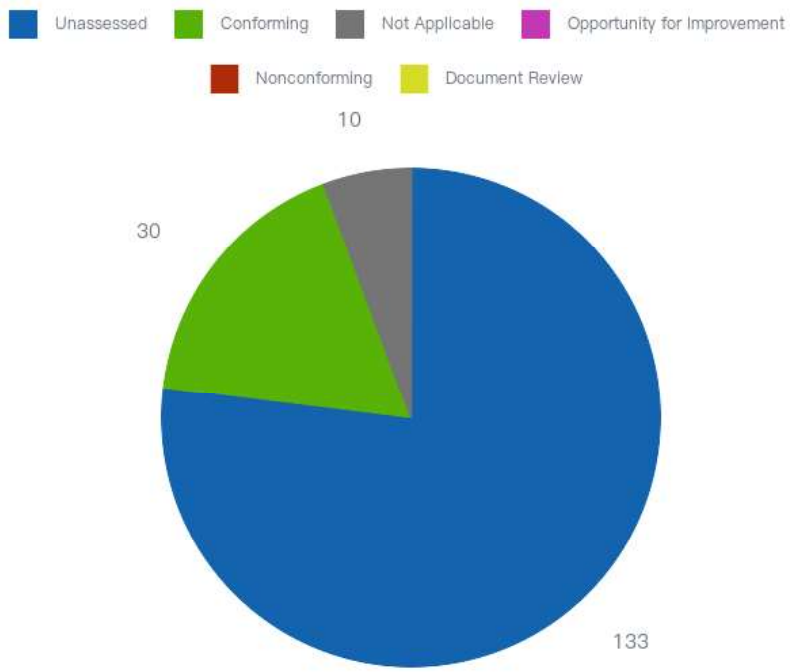
The accreditation activity also evaluates the inspection body's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the inspection body demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any 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

dcjs.sm.forensiclabs

From: QualityMatters <qualitymatters@anab.org>
Sent: Monday, June 16, 2025 2:15 PM
To: LADY, JENNIFER
Cc: dcjs.sm.forensiclabs; MCLEOD, RUSSELL
Subject: RE: Appointment of Interim Director, NYPD Latent Print Section (FI-0053)

Thank you Jennifer. We have updated our records.

Have a great week!
Monèt

From: LADY, JENNIFER <JENNIFER.LADY@nypd.org>
Sent: Monday, June 16, 2025 8:33 AM
To: QualityMatters <qualitymatters@anab.org>
Cc: dcjs.sm.forensiclabs <dcjsforensiclabs@dcjs.ny.gov>; MCLEOD, RUSSELL <RUSSELL.MCLEOD@nypd.org>
Subject: [EXTERNAL] Appointment of Interim Director, NYPD Latent Print Section (FI-0053)

Good Morning,

This email is to inform you that Lt. Christopher Doty retired on 6/13/2025. Sgt. Russell McLeod will be serving as Interim Director of the NYPD Latent Print Section until a permanent Director is appointed.

Thank you,

Jennifer Lady
Quality Assurance Manager
NYPD, Latent Print Section
jennifer.lady@nypd.org
Office: 646.610.4220
Cell: 347.236.6264

ANSI National Accreditation Board

July 10, 2025

Lydia De Castro
Westchester County Department of Laboratories & Research
Division of Forensic Science
10 Dana Road
Vallhalla, New York 10595

Dear Director De Castro,

Congratulations! On July 09, 2025, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol (Testing) 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 a Surveillance Assessment with Witnessing scheduled for the week of June 21, 2026.

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

Sincerely,

[redacted]

Jami St Clair
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Jennifer Reilly, Quality Manager
ANAB Office

ANAB
ANSI National Accreditation Board

SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017

Accreditation Requirements for Forensic Testing and Calibration (2023)
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

ISO/IEC 17025 Accreditation Granted: 30 September 2006

Certificate Number: FT-0155 Certificate Expiry Date: 31 October 2028

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	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	Image Multimedia Recording Video	Software Program
Authentication	Image Multimedia Recording Video	Software Program

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

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	Physical Item	Chemical General Microscopy Measuring Equipment
Qualitative Determination	Metal Nitrate/Nitrite	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 Physical Item Tire	General Microscopy Software Program Visual
Qualitative Determination	Footwear Physical Item Tire	Reference Collection

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

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

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Pamela L. Sale
Vice President, Forensics

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Westchester County Department of Laboratories & Research Division of Forensic Science

2025 -17025 - Y1 Surveillance Assessment Without Witnessing

Prepared by Elissa Mayo

Data collected on 2025-06-01

ANSI National Accreditation Board

United States

Description

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 refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced 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 most activities.

REQUIREMENTS:

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

General requirements related to the laboratory'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.

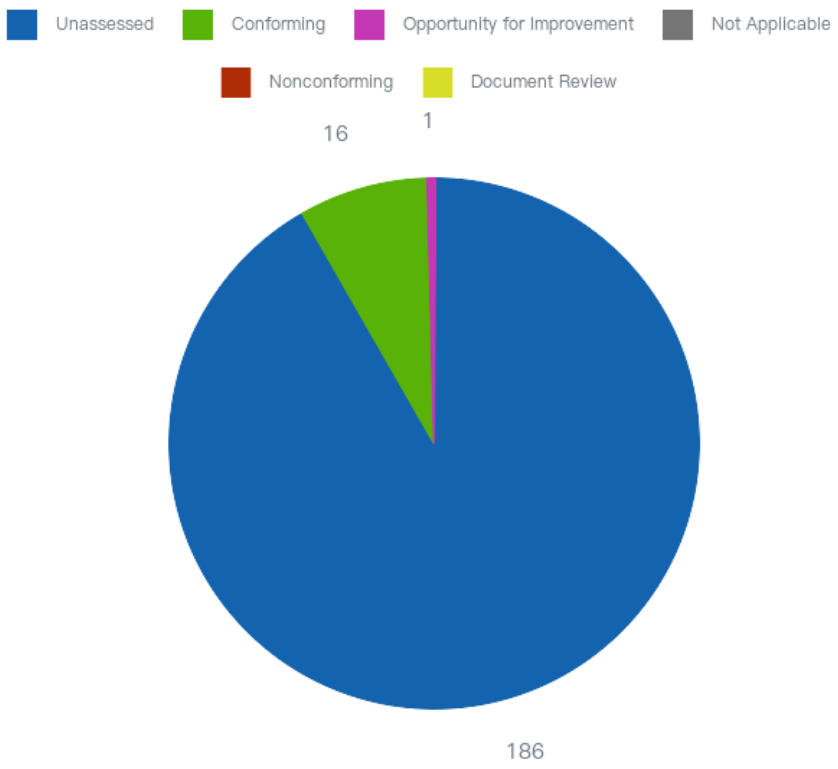
The accreditation activity also evaluates the laboratory’s conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any 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

7.8.8 Amendments to reports

7.8.8.1 ISO/IEC 17025:2017

Opportunity for Improvement : 0

Requirement

When an issued report needs to be changed, amended or re-issued, is any change of information clearly identified and, where appropriate, is the reason for the change included in the report?

Comments

The laboratory procedure for amended reports specifies that amendments are clearly identified (highlighted) and where appropriate, the reason for the change is included in the report. When corrections are made to information (e.g. corrected case number) that does not change the conclusion of the report, the reason for the change is not required. The laboratory may benefit from requiring all amended reports to state the reason for the change to ensure the highlighted information is clearly understood by the reader to be the change made to the report.

NEW YORK STATE | DNA Subcommittee

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August 12, 2025

Rossana Rosado
Chair, Commission on Forensic Science
Division of Criminal Justice Services
80 South Swan Street
Albany, New York 12210

Dear Commissioner Rosado:

At the Commission's request, the DNA Subcommittee has reviewed (NIST IR 8351 (December 2024)), entitled *DNA Mixture Interpretation: A NIST Scientific Foundation Review.* Doctors Coble, Kidd, and Smith conducted an in-depth evaluation of the report, which consist of six chapters, four of which include Key Takeaway Statements (KTAS). Their findings were presented to the full Subcommittee for discussion at the August 1, 2025, meeting.[1]

General Observations

The report offers a largely historic overview of well-known challenges in DNA mixture interpretation, challenges the forensic DNA community has actively addressed over the past three decades, beginning with RFLP profiling. In our experience, New York State public DNA laboratories have incorporated appropriate safeguards and practices to account for these challenges in their current operations.

While the Subcommittee finds the majority of the report uncontroversial, several KTAS merit a more specific response, particularly as they relate to New York State's public DNA laboratories, which fall under our oversight.

Specific KTAS Responses

KTAS 2.7 emphasizes that probabilistic genotyping (PG) must be supported by validation data using complex mixtures similar to those found in casework. The Subcommittee confirms that New York State public laboratories using PG have conducted extensive validations encompassing multiple mixture scenarios. More Importantly, reports

[1] DNA Subcommittee Member Katherine Gettings, Ph.D., is employed as a Research Biologist at the National Institute of Standards and Technology (NIST). Accordingly, Dr. Gettings did not participate in the preparation of this report and abstained on the August 1, 2025, vote sending the report to the Commission on Forensic Science.

from these labs clearly state the propositions used to inform Likelihood ratio (LR) assignments - a best practice that we endorse.

KTAS 4.2 notes that scientific literature often lacks sufficient detail for independent review. While we agree in principle, we find this concern irrelevant to forensic validation practices. Laboratories are required under the FBI's National DNA Standards to validate methods internally using their own data and following SWGDAM guidance. These internal validations, not external publications, form the foundation of laboratory protocols and quality assurance measures.

KTAS 4.3 suggests that publicly available validation data often lacks sufficient metadata to assess reliability. We emphasize that internal validations are not typically published, nor is there a national requirement for such publication. Internal validations serve implementation, not peer-reviewed dissemination, and are reviewed during audits and in the case of New York State public laboratories, by this Subcommittee.

KTAS 4.4 calls for improved proficiency testing, particularly with complex mixtures; this issue is not new. In practice, New York State public laboratories already ensure proficiency through rigorous analyst training, continuous technical and administrative review, and focused continuing education. As accredited proficiency tests vendors provide more challenging complex mixture proficiency tests, we encourage the Biology TWG to assess and participate, as appropriate, in these tests.

KTAS 4.6 argues that validation data should reflect the complexity of casework samples. While ideal in theory, it is impractical to anticipate all possible case complexities. A more appropriate goal is to ensure robust calibration of PG software and diagnostic interpretation based on validation studies.

KTAS 4.7 recommends standardizing data formats to support sharing and independent assessments. The Subcommittee finds that internal validation data are regularly shared between forensic laboratories without issue. No national standard mandates external review of such studies, and current peer collaboration and audit mechanisms remain sufficient.

KTAS 5.4 correctly states that likelihood ratios (LRs) do not indicate how or when DNA was transferred. However, the Subcommittee finds that the assumptions underlying LR assignments - particularly sub-source propositions - are already clearly stated in reports from New York State public laboratories using PG.

The KTAS also references DNA Transfer, Persistence, Prevalence, and Recovery (TPPR) and calls for more robust data in this area. The Subcommittee stresses that DNA transfer is inherently stochastic and non-reproducible. Rather than offering definitive conclusions on TPPR, analysts should transparently describe how this uncertainty is incorporated into their propositions.

Omission of Recent Research

Dr. Kidd noted that the report omits several recent peer-reviewed studies on highly polymorphic microhaplotypes that were published before the report's release. These findings challenge KTAS 6.3, which states that microhaplotypes tend to be less polymorphic than STRs. Contrary to this claim several studies have demonstrated microhaplotypes with Ae > 5.0. These include:

- Zhu, et.al. Forensic Sci Int. Genet 2023 Forensic Sci Int Genet. 2023 Jul;65:102874. doi: 10.1016/j.fsigen.2023.102874. Epub 2023 Apr 14.
- Yu WS et al. Forensic Sci Int Genet. 2022 Jul;59:102720. doi: 10.1016/j.fsigen.2022.102720. Epub 2022 May 15
- Oldoni et. al., Forensic Sci Int Genet. 2020 Nov; 49:102367. doi: 10.1016/j.fsigen.2020.102367. Epub 2020 Aug 11
- Bennett et al., Int J Legal Med. 2019 May;133(3):719-729. doi: 10.1007/s00414-019-02010-7. Epub 2019 Feb 13.

Conclusion

The DNA Subcommittee acknowledges the value of NIST's efforts to assess the scientific foundations of DNA mixture interpretation. However, we find that many concerns raised in the report are either already addressed in current laboratory practice or reflect broader academic issues not directly relevant to forensic validation, implementation, and casework. New York State public DNA laboratories have demonstrated compliance with the DNA National Standards, SWGDAM guidance concerning mixture interpretation, robust internal validation studies, and a commitment to ongoing quality assurance as verified by our oversight.

Respectfully submitted.

Very Truly Yours,

[redacted]

Chair, DNA Subcommittee

NEW YORK STATE | DNA Subcommittee

MICHAEL COBLE, PH.D.
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August 12, 2025

Rossana Rosado
Chair, Commission on Forensic Science
Division of Criminal Justice Services
80 South Swan Street
Albany, New York 12210

Dear Commissioner Rosado:

During the December 13, 2024, Commission on Forensic Science (Commission) meeting, the Commission members requested that the DNA Subcommittee provide a written report on their review of the *NIST Forensic DNA Interpretation and Human Factors: Improving Practice Through a Systems Approach (NIST Human Factors)* report published in May 2024.

On February 28, 2025, after discussing this request, the DNA Subcommittee passed a unanimous motion to create a working group comprised of certain DNA Subcommittee members to address the issue and draft a preliminary report for the DNA Subcommittee to review and approve. The working group was led by DNA Subcommittee members Dr. Kathleen Corrado and Dr. Amanda Sozer. The members worked independently and collectively, as their schedules permitted, to review the 414-page report and create a draft response for the DNA Subcommittee to review. The DNA Subcommittee met on August 1, 2025, and reviewed and approved this response[1]. This letter (along with the attachment) serves as the written response to the Commission's request for a written report on the DNA Subcommittee's review of the NIST Human Factors report.

According to the report, NIST's expert working group was charged with:

- Examining human factors as they relate to policies, procedures, and practices within the field of forensic DNA interpretation[2].

[1] DNA Subcommittee Member Katherine Gettings, Ph.D., is employed as a Research Biologist at the National Institute of Standards and Technology (NIST). Accordingly, Dr. Gettings did not participate in the preparation of this report and abstained on the August 1, 2025, vote sending the report to the Commission on Forensic Science.

[2] DNA Interpretation is defined in the report as the process of evaluating DNA data for ascertaining genotypes. Aspects of the interpretive process can include making assumptions or inferences about the number of contributors; distinguishing between alleles and artifacts; assessing possible degradation, inhibition, and stochastic effects; and determining whether the data are suitable for comparison.

- Developing practices based on scientifically sound research to reduce the likelihood and consequence of errors in forensic DNA interpretation.

The NIST Human Factors report goes well beyond concepts associated with DNA interpretation, as it also addresses the production, evaluation, documentation, and communication of DNA comparison results. Due to its length, we kept our focus on the recommendations and referred to the text when necessary to try to understand the context of a recommendation.

Attached to this letter is a list of the 44 recommendations and our response on how they apply to the accredited forensic DNA laboratories in New York State. As you will see, many of the recommendations in this report are already addressed by existing standards and there are some recommendations that we do not agree with. When appropriate, we provided suggestions where laboratories could potentially improve their current operations.

While the Commission and DNA Subcommittee both strive to ensure that the DNA laboratories are providing accurate and reliable results, we also need to keep in mind that implementing recommendations and new policies and procedures often requires additional resources, and each laboratory will need to determine what suggestions are feasible given their current available resources.

We hope you find this response helpful.

Very Truly Yours,

Michael Coble, Ph.D.
Chair, DNA Subcommittee

	Report Recommendation	DNA Subcommittee's Response
3.1	To promote balance and transparency in DNA analysis, forensic science service providers should apply the "principles of interpretation" and should understand the "hierarchy of propositions."	While laboratories have likely already incorporated these concepts into their training (e.g., this is covered in STRmix™ training). We suggest that laboratories include these two concepts in their DNA analyst training, if not covered in other training that analysts receive[3].
3.2	DNA analysts should maintain a detailed record of the reasoning, justification, and sequence of decisions not dictated by the forensic science service provider's protocols (i.e., discretionary decisions).	The discretionary decisions mentioned in the report are typically governed by laboratory policy. For example, this includes choices regarding whether to assume a known contributor or when to modify the parameters on a genetic analyzer. If laboratory policy does not dictate these decisions, we agree they should be documented in the case file notes. We suggest that laboratories assess whether their policies and procedures allow for discretionary decisions during the annual review of their methods. If such decisions are permitted, the policy should specify the necessary documentation for each decision, including its rationale.
3.3	Forensic science service providers should assess their processes to identify potential sources of bias in the interpretation and comparison of DNA evidence. Forensic science service providers should implement written policies and procedures to mitigate these sources of bias.	While not specifically identified as "bias", this recommendation is addressed by existing standards, including International Organization for Standardization/ International Electrotechnical Commission (ISO/IEC) 17025 standards 4.1.4, 4.1.5, and 8.9.m, as well as ANSI National Accreditation Board (ANAB) 3125 standard 7.2.1.1.1. Additionally, it is addressed in American National Standards Institute (ANSI)/ AAFS Academy Standards Board (ASB) 040 Standard for training DNA Analysts (standard 4.3) and ANSI/ASB 154 Standard for Training on Testimony for Forensic Biology (standard 4.2.3.d). We suggest that laboratories evaluate the impact and feasibility, including the required resources

[3] While it is not clear how the "principles of interpretation" and "hierarchy of propositions" promote " balance and transparency in DNA analysis, we believe a fundamental understanding of these concepts would be helpful for those that do not have a strong background in forensic education/training.

	Report Recommendation	DNA Subcommittee's Response
		necessary for adopting ANSI/ASB 040 and ANSI/ASB 154 in their entirety. If deemed feasible, we suggest that laboratories work to adopt these best practice standards[4].
3.4	Forensic science service providers should evaluate and understand the impact that procedural decisions have on DNA results and their interpretation. With this knowledge, DNA analysts should be able to understand the effect certain treatments will have on downstream decisions and outcomes within the DNA analysis workflow.	Different procedures may yield different results. Laboratories base their decisions regarding procedures on their validation studies. After reading the text and the recommendation, it is unclear what point the report is trying to make with this recommendation; therefore, we cannot currently support the recommendation.
3.5	Forensic science service providers should validate and apply analysis settings and laboratory processes that generate and characterize as much informative data as possible with the available instrumentation and technology.	Validation is covered in the ISO/IEC 17025 and FBI Quality Assurance Standards (QAS). It is up to each laboratory to determine the analysis and analytical threshold settings that they implement based on their validation data. Specific analysis and threshold settings are assessed as part of the model maker input during STRmix™ validation.
3.6	To reduce the variability in how DNA analysts determine profile suitability, forensic science service providers should validate, set, implement, and routinely reassess suitability boundaries.	Validation is covered in ISO/IEC 17025 and the QAS standards. Also, ANSI/ASB 020 Standard for Validation Studies of DNA Mixtures, and Development and Verification of a Laboratory's Mixture Interpretation Protocol and ANSI/ASB 123 Standard for Routine Internal Evaluation of a Laboratory's DNA Interpretation and Comparison Protocol provide guidance on how laboratories can develop and reassess suitability boundaries. We suggest that laboratories evaluate the impact and feasibility, including the required resources necessary for adopting ANSI/ASB 020 and ANSI/ASB 123[5]. If deemed feasible, we suggest that laboratories work to adopt these best practice standards.
3.7	Forensic science service providers should validate and apply interpretation methods that take into	All forensic laboratories in New York State are using probabilistic genotyping (PG) software. Moving forward, laboratories should be

[4] ANSI/ASB 040: https://www.aafs.org/sites/default/files/media/documents/Std_040_e1.pdf and ANSI/ASB 154: https://www.aafs.org/sites/default/files/media/documents/154_Std_e1_0.pdf

[5] ANSI/ASB 020: https://www.aafs.org/sites/default/files/media/documents/020_Std_e1.pdf and ANSI/ASB 123: https://www.aafs.org/sites/default/files/media/documents/123_Std_e1.pdf

	Report Recommendation	DNA Subcommittee's Response
	account all data necessary to help address the propositions. Currently, for the interpretation of DNA comparisons, continuous probabilistic genotyping is the only interpretation technique that meets this criterion.	provided with the resources to purchase and validate modifications of continuous PG when they are available and deemed necessary/appropriate.
3.8	Forensic science service providers' standard operating procedures should provide criteria for assessing and documenting when a probabilistic genotyping interpretation should be rejected.	This recommendation is already covered by existing standards ANAB 3125 standards 7.5.1.5 and 7.8.1.2.2 and QAS standards 9.6 and 9.6.5. These topics are also covered in ANSI/ASB 040 Standard for Forensic DNA Interpretation and Comparison Protocols standards 4.2, 4.2.5, 4.2.6, and 4.3.1.2. We suggest that laboratories look at the impact and feasibility, including the required resources, necessary for adopting ANSI/ASB 040. If deemed feasible, we suggest that laboratories work to adopt this best practice standard.
3.9	DNA analysts should not modify an original interpretation decision based on the Person of Interest's profile, except in very limited circumstances. Forensic science service providers should have clear protocols describing the circumstances under which a reevaluation is allowable, and documentation must alert the end-user that these changes occurred post-comparison.	This recommendation is already covered by existing standards, including ISO/IEC 17025 standards 7.5.1.5 and 7.5.2 and ANAB 3125 standards 7.5.1.5 and 7.5.2. These topics are also covered in ANSI/ASB 040 Standard for Forensic DNA Interpretation and Comparison Protocols standards 4.3 and 4.4.2. We suggest that laboratories look at the impact and feasibility, including the required resources, necessary for adopting ANSI/ASB 040. As outlined in other responses, if deemed feasible, we suggest that laboratories work to adopt this best practice standard.
4.1	Forensic science service providers should use likelihood ratios to evaluate DNA results.	We disagree with this recommendation as written, as it is inconsistent with current standards. While we believe using continuous PG methods and Likelihood Ratios (LR) are the preferred method moving forward, there may be some labs still using Random Match Probability (RMP) or Combined Probability of Exclusion (CPE) for certain types of cases or for cases with legacy data.
4.2	To avoid conveying an unsupported level of precision, forensic science service providers should express likelihood ratios as an order of magnitude or to one significant figure.	We disagree with this recommendation as written. We agree in principle that significant figures should be used correctly, but we do not support choosing an apparently arbitrary significant figure.

	Report Recommendation	DNA Subcommittee's Response
4.3	To avoid presenting likelihood ratios that are larger than can be supported by currently available research and to assist in the comprehension of analyses that result in very large likelihood ratios (or very small Random Match Probabilities) with respect to unrelated individuals, forensic science service providers should implement a reporting cap of 1 billion (or 1 in 1 billion), or an alternative value that can be justified by research.[6]	We disagree with this recommendation. It is not clear why the authors of the report chose one billion as the cap, other than that they believe this number is easy for the jury to understand. This issue has been debated in the field for a long time, and there is no consensus on it. The authors of the Human Factors document indicate that four of the authors did not support this recommendation.
4.4	To make likelihood ratio values less than 1 (e.g., 0.00001 or 1/100,000) easier to comprehend, forensic science service providers can reverse the propositions, which will invert the LR (e.g., 100,000). If doing so, analysts must clearly report that they have reversed the propositions for this purpose. The original likelihood ratio must be available in the case file.	Laboratories typically reverse the propositions if the reported LR is less than one. Propositions should be clearly stated and comprehensible. We do not support the recommendation of adding an additional statement that the proposition is reversed, as this additional statement could confuse the reader of the report. We suggest that Biology Technical Working Group (BioTWG) discuss if they feel it is necessary to include such a statement in their report when they update the statewide reporting standards.
4.5	DNA analysts should state the likelihood ratio value rather than using qualitative terms that end-users can misunderstand, such as "match," "included," "consistent with," and "cannot be excluded." It is acceptable to use the term "excluded" if the DNA analyst is transparent about how they reached that opinion and outlines the limitations of such an opinion.	We disagree with this recommendation as written. We believe the statistical value should be reported, however, while some of these terms may not be necessary, there does not appear to be a consensus that these terms should be dropped completely as they are still listed in the Scientific Working Group on DNA Analysis Methods (SWGDAM) guidelines, the QAS standards, and ANSI/ASB 040.
5.1	To help reduce the risk of tunnel vision and confirmation bias in an investigation, forensic science service providers should report the limitations of DNA database searches to law enforcement investigators, including that associations can occur with individuals who are not the source of the DNA.	We do not support this recommendation. Combined DNA Index System (CODIS)/Division of Criminal Justice Services (DCJS) notification letters include the language "possible investigative lead". There is also a concern that the suggested language would confuse the end user possibly causing them to not follow up on CODIS hits.

[6] Some members of the Human Factors Report dissented on this recommendation

	Report Recommendation	DNA Subcommittee's Response
5.2	To reduce the potential for being misunderstood, DNA reports should contain clear, concise, and unbiased language. Terms such as major contributor and sperm fraction may be misinterpreted as indicating the nature of the biological material and how or by whom the DNA was deposited. If the report contains any such terms, it should include the limitations of those terms.	There is merit in that some of these terms could be misleading. We suggest that BioTWG discuss the use of these terms and consider different terminology. We suggest that the approved terminology and definitions should be added to the standardized report wording referenced on laboratory reports and housed on the DCJS website.
5.3	Forensic science service providers should include caveats and limitations in reports containing an evaluation of results considering the source of the DNA. These should make clear that: • If any conditioning information used in the calculation changes, a new evaluation is needed. • The evaluation of the DNA comparison cannot conclusively identify an individual as the source of the DNA. • The report does not provide any information about how or when the DNA was deposited.	We disagree with point 2 as written. We suggest that the BioTWG consider adding points 1 and 3 either to their laboratory reports or to the standardized report wording document referenced in laboratory reports and hosted on the DCJS website.
5.4	Forensic science service providers should offer training to criminal justice partners on the caveats and limitations of DNA testing so that results are properly incorporated along with other information in the case.	Laboratories are already providing this type of training to their stakeholders. We suggest the BioTWG share each laboratory's training documents for standardization and capture best training practices.
6.1	When legally permissible and possible, the testifying DNA analyst and the legal professionals involved in the case should confer prior to the trial to gain a shared understanding of the report, propositions, correct language for describing the value of the results, and what the results mean and do not mean.	While we agree with this recommendation in principle, laboratories cannot make an attorney meet with them prior to trial. In addition, there are some instances where it may not be necessary to meet.
6.2	When explaining the nature of DNA analysis during testimony, the DNA expert should address common misconceptions and state the limitations of the analysis. At a minimum, the DNA expert should address the following main points:	We agree in principle with points 1, 2, and 4 but not the recommendation as written. Many of these points are asked and answered during direct or cross examination, it is not feasible for analysts to convey this information without the proper questions

	Report Recommendation	DNA Subcommittee's Response
	• The DNA results are only part of the overall case. • Errors can occur in any human process, including DNA analysis. • The evaluation of the DNA comparison cannot conclusively identify an individual as the source of the DNA. • DNA analysts cannot provide any information on how or when DNA was deposited in a particular case, based on a report considering only the source of the DNA.	being asked. It would make more sense to provide this information to legal counsel bodies to suggest that they ask these questions.
6.3	DNA experts should not perform new evaluations of the DNA results on the witness stand because these evaluations have not been reviewed, reported, or disclosed to all parties.	Typically, analysts do not perform new evaluations on the witness stand. We suggest that laboratories ensure their analysts are trained in how to handle this issue if it comes up in trial.
7.1	DNA analysts should not opine about the possibility or probability of direct or indirect transfer having occurred in a case.[7]	At this time, we do not support this recommendation, as this topic is currently unresolved. Until collaborative efforts to review the foundations and principles of evaluating biological results when considering alleged activities have been resolved, this recommendation should not be considered.
7.2	The evaluation of DNA results given "how" and "when" questions is distinct from the evaluation of DNA results given "who" questions. In order to develop policies and practices on how DNA analysts should respond appropriately to questions about how and when DNA was deposited in a particular case, forensic science service providers should consult professional guidance and experts who understand issues related to transfer and persistence. These policies and practices should require DNA analysts to be appropriately trained to respond to such questions.[8]	At this time, we do not support this recommendation, as this topic is currently unresolved. Until collaborative efforts to review the foundations and principles of evaluating biological results when considering alleged activities have been resolved, this recommendation should not be considered.
7.3	The federal government should fund collaborative efforts to review the foundations and principles of	A recommendation to the forensic science community is larger than the State of NY and outside the scope of the laboratories in NY.

[7] Some members of the Human Factors Report dissented on this recommendation
[8] Some members of the Human Factors Report dissented on this recommendation

	Report Recommendation	DNA Subcommittee's Response
	evaluating biological results when considering alleged activities. Based on the findings, additional fiscal support should be available to educate and guide DNA and legal communities on the review, research, selection, and validation of appropriate methods to account for DNA transfer, persistence, prevalence, and recovery when assessing biological results.	
8.1	Teams of at least two individuals from different organizations or with different types or levels of experience in forensic biology should conduct external assessments of forensic DNA laboratories.	We agree in principle that external assessments should try to have the most applicable, comprehensive, and unbiased assessment team possible; however, we disagree with the recommendation as written. For example, if different experience types are not applicable to what is being audited, it may not add value. Additionally, the requirement as written exceeds the QAS requirements. Additional unnecessary auditors could lead to additional costs with no added value, especially for small laboratories.
8.2	To increase transparency, collaboration, and communication, the forensic DNA community should support and expand development of each of the following: • An open-access internal validation data repository that allows forensic science service providers to share validation methods, findings, and data. This repository could be curated by a federal nonregulatory agency that has capabilities in measurement science, statistics, DNA analysis, and data management. • Procedures for the ethical collection of DNA samples by forensic science service providers for research and validation studies and subsequent collection and use of these samples within the open-access validation data repository. • An ethically collected, standardized subset of samples that can aid in facilitating validation work	A recommendation to the forensic science community is larger than the State of NY and outside the scope of the laboratories in NY.

	Report Recommendation	DNA Subcommittee's Response
	and be uploaded to the open-access internal validation data repository.	
8.3	When possible and legally permissible, forensic science service providers should promote the development, maintenance, and use of elimination databases containing DNA profiles from forensic science service provider personnel and other personnel (e.g., crime scene technicians, law enforcement investigators, and emergency responders) who may come into contact with evidence or samples that are collected for DNA testing. Forensic science service providers should search unknown profiles against this elimination database before reporting or uploading to other forensic or reference sample databases.[9]	We believe most laboratories have an in-house elimination database and we support this recommendation. We suggest laboratories consult ANSI/ASB BPR171 *Best Practice Recommendations for the Management and Use of Quality Assurance DNA Elimination Databases in Forensic DNA Analysis*[10] for best practices regarding use of elimination databases. We acknowledge that obtaining samples from outside of the Forensic Science Service Provider (FSSP) organization can be difficult and not always possible. We also acknowledge that the analysis of these samples and keeping them current requires resources. We suggest the DCJS Office of Forensic Services investigate a funding stream for laboratories to implement and maintain elimination databases.
8.4	To maximize the potential to detect errors and omissions, forensic science service providers should ensure that technical review processes include steps to mitigate review bias, direct attention to important decisions for review, consider fatigue, consider difficult case reviews, and identify appropriate methods to resolve and document disagreements.	We support this recommendation. This is already addressed in ISO/IEC 17025 standards 4.1.4 and 8.5.1 and ANAB 3125 standards 7.7.1.g.1.c and 7.7.1.l.8.
8.5	To regularly monitor performance, forensic science service providers should assess both system and individual performance through internal or external testing regimes that reflect the range of complexity encountered and the procedures used in casework.	Performance monitoring is a requirement in ISO/IEC 17025, ANAB 3125, and the QAS standards. We suggest that laboratories participate in performance monitoring that includes the analysis of complex mixtures either through external proficiency testing or by adopting ANSI/ASB 123, if deemed feasible.
8.6	Forensic science service providers should provide analysts with training exercises at intervals related to task complexity. These exercises should comprise a variety of difficult, error-prone, and uninterpretable samples, in which analysts receive feedback in a	We suggest that laboratories evaluate the impact and feasibility, including required resources necessary for adopting ANSI/ASB 123 Standard for Routine Internal Evaluation of a

[9] Some members of the Human Factors Report dissented on this recommendation
[10] https://www.aafs.org/sites/default/files/media/documents/171_BPR_e1.pdf

	Report Recommendation	DNA Subcommittee's Response
	nonpunitive training environment to further develop and maintain their expertise.	Laboratory's DNA Interpretation and Comparison Protocol. If deemed feasible, we suggest laboratories work to adopt this best practice standard.
8.7	To improve consistency and reduce the potential for subjective or biased assessments, forensic science service providers should use a risk-based approach with documented guidance in the investigation and resolution of nonconformities. At minimum, a matrix or defined categories should be used to assess the risk of the nonconformity occurring or recurring and its impact on casework.	ISO/IEC 17025 addresses this. Laboratories in NY are already using forms and matrices with defined categories to complete root cause analysis.
9.1	In addition to technical competency, forensic science service providers should require DNA analysts and DNA Technical Leaders to demonstrate understanding of the following subject areas, as appropriate to their role: • Human factors in forensic DNA analysis and interpretation • Root-cause analysis • Professional responsibility under applicable Codes of Conduct • Constitutional, statutory, and other disclosure obligations • How to maintain independence and avoid errors during testimony • How to communicate forensic statistical concepts and scientific limitations to factfinders	We support this recommendation. The majority of these topics are addressed in ANAB 3125 standard 6.2.2.2 and/or *ANSI/ASB 022 Standard for Forensic DNA Analysis Training Programs*. We suggest that laboratories evaluate the impact and feasibility, including required resources necessary for adopting ANSI/ASB 022. If deemed feasible, we recommend laboratories work to adopt this best practice standard.
9.2	To reduce variability in education and training practices and increase quality and consistency of forensic DNA testing and interpretation, a federal nonregulatory agency or nonprofit organization should develop a National Forensic DNA Training Consortium with the mission to provide standardized and high-quality education and training for technical	A recommendation to the forensic science community is larger than the State of NY and outside the scope of the laboratories in NY.

	Report Recommendation	DNA Subcommittee's Response
	(e.g., DNA analysts, DNA Technical Leaders) and quality assurance personnel. This National Forensic DNA Training Consortium should offer the training needed for new forensic science service provider personnel as well as continuing education opportunities. Both offerings should include assessment components, written and practical as appropriate.	
10.1	In addition to the necessary technical qualifications, the DNA Technical Leader should have the knowledge, skills, and abilities to serve in a leadership capacity within the forensic science service provider. Parent organizations and forensic science service providers should continually support and dedicate resources (e.g., funding, time) to DNA Administrative Supervisors and DNA Technical Leaders to participate in managerial and leadership programs that further develop their leadership knowledge, skills, and abilities.	We support the intent of this recommendation; however, implementation may depend on each laboratory's resources.
10.2	Forensic science service provider management should clearly define the roles, responsibilities, and authorities of DNA Administrative Supervisor and DNA Technical Leader positions. Management should dedicate leadership resources to each role and communicate the definition of these roles to all individuals who are employed by, or work closely with, the forensic science service provider to help clarify reporting structures and enable the individuals to fulfill their responsibilities. Ideally, because of the difference in responsibilities between DNA Administrative Supervisors and DNA Technical Leaders, different individuals should hold these positions.	We do not support this recommendation as written. Roles and responsibilities are covered in QAS standard 5.1.1 and ISO/IEC 17025 standard 6.2.4. Whether the supervisor and technical leader position should be held by the same or different people is dependent on the size and resources of each individual laboratory.

	Report Recommendation	DNA Subcommittee's Response
10.3	Parent organization leadership and criminal justice partners who regularly interact with the forensic science service provider should understand laboratory best practices in order to accurately represent the scientific evidence and capabilities of the laboratory, reduce the risk of the parent organizations or criminal justice partners exerting undue influence on DNA analysts, and appropriately allocate funding and resources for forensic science service provider operations. To inform this understanding, forensic science service providers should offer regular training to parent organization leadership and criminal justice partners on the following topics: • Quality systems • Accreditation • Undue influence • Scientific limitations • Laboratory reports • Laboratory operations • Laboratory leadership • Laboratory independence • Principles of interpretation • Changes to laboratory practices • Cognitive bias and contextual information management procedures	We support this recommendation. Laboratories typically offer this training to their stakeholders; however, laboratories cannot enforce that these entities attend the training.
10.4	DNA Administrative Supervisors and DNA Technical Leaders manage complex scientific and business operations. To continually improve the organization's performance, these leaders should actively engage in essential business practices of operational management, including strategic planning, process improvements, human resource management, succession planning, quality management, and criminal justice partnerships.	We believe this recommendation overlaps with recommendation 10.1. We support the intent of this recommendation; however, implementation may depend on each laboratory's resources and management structure.

	Report Recommendation	DNA Subcommittee's Response
10.5	Forensic science service provider management and parent organizations should support, facilitate, and provide ongoing opportunities for their personnel to improve mental health and wellness, including addressing vicarious trauma, stress, and burnout. Management should: • Understand how these issues harm forensic science service provider personnel. • Understand their and the organization's role in contributing to and mitigating workplace stress and burnout. • Encourage DNA analysts to engage in employee wellness opportunities.	We support this recommendation in principle and encourage laboratories to provide an environment that supports mental health and wellness.
11.1	Forensic science service provider management, alongside DNA analysts and support personnel, should explore techniques to mitigate noise levels. These techniques could include the use of temporary quiet workspaces, dedicated collaboration spaces, or designated quiet times.	We support this recommendation in principle and encourage laboratories to provide a work environment that minimizes distractions and interruptions.
11.2	Forensic science service provider management should afford DNA analysts and support personnel the opportunity to reserve time and space for task-appropriate functions such as a conference room for case reviews or dedicated calendar times to limit task interruptions in the workplace.	This recommendation is similar to recommendation 11.1. We support this recommendation in principle and encourage laboratories to provide a work environment that minimizes distractions and interruptions.
11.3	To optimize user performance and satisfaction, forensic science service provider management and laboratory designers should seek input from DNA analysts to evaluate the usability and accessibility of physical work environment configurations and technologies before they are designed and implemented	We support this recommendation in principle and encourage laboratories to seek feedback from employees during design development.
11.4	To prevent and detect handling errors when multiple DNA analysts participate in the processing of samples, forensic science service providers should	We support this recommendation in principle; however, it is not clear why it is listed in section 11. Similar aspects are covered in other recommendations, for example 8.5 and 8.6.

	Report Recommendation	DNA Subcommittee's Response
	have communication and coordination strategies that require transparency, continual training, and proficiency.	
12.1	To support a positive research culture, forensic science service providers should ensure that DNA analysts have access to, and are supported to engage with, current and emerging scholarship and technologies. This may be achieved by providing opportunities and resources for analysts to be involved in journal clubs, attend scientific presentations or conferences, work collaboratively with academic and industry partners, lead or participate in workgroups or training, or participate in validation or research projects supported by the forensic science service provider.	We support this recommendation in principle. Continuing education requirements are covered in QAS standard 16.1. Ultimately the determination of work assignments outside of casework responsibilities is best identified by laboratory management.
12.2	All individuals and entities involved in forensic DNA analysis research should participate in Open Science practices and take steps to promote the transparency and accessibility of that research.	This recommendation appears to be primarily relevant to the research conducted in academic institutions and industry and not applicable to individual crime laboratories.

NEW YORK STATE | Commission on Forensic Science

June 30, 2025

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Dear Dr. Coble and Biology TWG Co-Chairs O'Connor and Williamson,

At the June 13, 2025, meeting of the Commission on Forensic Science (Commission), a recent disclosure from Qiagen regarding EZ1 and EZ2 extraction kits producing lower than expected DNA yields was discussed. The Commission voted to request the Biology Technical Working Group (TWG) and DNA Subcommittee review all of the publicly available and privately issued disclosures related to the Qiagen issue. The Biology TWG is tasked with assessing affected New York State laboratories, the status of their reviews, and the steps being taken to address any findings. The Biology TWG is being asked to provide a status update to the DNA Subcommittee prior to its August 1, 2025, meeting.

Further, the Commission asked that if any issues are identified, the Subcommittee work with affected labs to determine what may need to be done to remmediate the issues. The Commission will further discuss the impact on New York State labs at its September 26, 2025, meeting.

Sincerely,

Rossana Rosado
Chair, New York State Commission on Forensic Science

August 18, 2025

New York State Forensic Laboratory Directors

Dear Sir/Madam:

Thank you for the work you do which plays a critical part in our shared goal of seeking justice through the gathering and presentation of reliable scientific evidence while ensuring fairness to the accused. This can only occur when prompt disclosures by prosecutors of information favorable to the defense are made consistent with our state and federal constitutions. The Commission on Forensic Science (Commission) offers this practice advisory to support your role as Laboratory Directors in providing information to prosecutors in a timely fashion. Should you need legal advice regarding any of the issues discussed in this practice advisory, please consult your respective counsels.

The Commission writes to provide an important practice advisory and reminder of your ethical disclosure responsibilities as critical members of New York's criminal legal system. As you are aware, the New York State Legislature made significant changes to the discovery rules in criminal cases in 2019. This discovery reform dramatically changed what and when certain information must be disclosed to the defense in criminal cases. Pursuant to constitutional and state laws, prosecutors are required to disclose to defense counsel acts of dishonesty by analysts in your laboratory, regardless of whether the analyst testifies in relation to the incident. Prosecutors are also required to disclose evidence that tends to negate the guilt of an accused person; lessens the culpability of an accused person; supports a potential defense to a charged offense; undermines the identity of an accused as a perpetrator; or provides a basis for a motion to suppress evidence. Prosecutors can only carry out this critical legal duty if Laboratory Directors inform them promptly and accurately.

Even before the recent amendments to New York's discovery laws, prosecutors had an obligation to share with defense counsel exculpatory information and potentially damaging information affecting the credibility of a witness in an arrested case. These *Brady* and *Giglio* obligations cover a myriad of topics including but not limited to filing a false report, planting evidence, falsifying or tampering with existing evidence, and coercion of a witness. This disclosure obligation extends to the conduct of Laboratory employees and Laboratory Directors.

The timing of the disclosure obligation must be as soon as possible; time is of the essence for disclosure. It is also not limited to when an arrest is made or when the analyst may appear in Court. Prosecutors make decisions about how to charge and manage cases, including plea negotiations and at trial, throughout the life of a case. Similarly, defense lawyers may be in negotiations with prosecutors and advising the client about possible dispositions in the case from the moment they commence representation of the accused. It is thus critical that such decisions include awareness of information that calls into question the strength or accuracy of forensic test results. Depending on the nature of the disclosure, it may also affect the analyst's past or future cases and past or future testimony. The criminal legal system is designed not only to seek justice in the future but to ensure that justice has been applied in the past.

In terms of whom to notify, the Commission suggests starting with the prosecutors having jurisdiction over the cases the analyst has worked on, which may encompass multiple counties. You should follow with notifications to ANAB and the Commission, consistent with accreditation requirements and Article 49-b of the Executive Law. Finally, while you are unlikely to know the specific attorney representing a defendant, you should notify the relevant criminal defense organization, such as the New York State Association of Criminal Defense Lawyers, public defender offices, Legal Aid, or the assigned counsel program director.

It is impossible to list every example of the type of misconduct or error that needs to be reported. When in doubt, disclose.

Thank you for the important work you do and your time and attention to this critical issue.

Sincerely,

[redacted]

cc: New York State District Attorneys
Forensic Science Commission members
DNA Subcommittee members
New York State Association of Criminal Defense Lawyers
New York State Defenders Association