February 4, 2022

Division of Criminal Justice Services
Virtual Meeting¹

10:02 AM – 12:10 PM

DRAFT MEETING MINUTES

DNA Subcommittee Members in Attendance:
    Frederick Bieber, Ph.D.
    Allison Eastman, Ph.D.
    Katherine Gettings, Ph.D.
    Jenifer Smith, Ph.D
    Amanda Sozer, Ph.D.
    Bruce Weir, Ph.D.

DCJS Staff in Attendance:
    Jill Dooley
    Natasha Harvin-Locklear
    Shelley Palmer
    Joe Popcun
    Elizabeth Suparmanto

Dr. Weir opened the meeting by stating that the DNA Subcommittee is conducting its meeting virtually and invited Dr. Dooley to address the Subcommittee. Dr. Dooley gave a brief introduction of Rossana Rosado, Commissioner of DCJS and the Chair of the Commission on Forensic Science. Next, Executive Deputy Commissioner Joe Popcun addressed the Subcommittee on behalf of Commissioner Rosado. Dr. Weir then conducted a roll call for attendance as the members of the Subcommittee attended from their own locations. A quorum was established with 6 members present (Bieber, Eastman, Gettings, Smith, Sozer, and Weir; Kidd was absent).

Dr. Weir then asked for a motion to approve the agenda. A motion to approve the agenda was made by Dr. Eastman, seconded by Dr. Smith, and approved unanimously.

¹ Due to the Coronavirus (COVID-19), and pursuant to Chapter 417 of the Laws of 2021 authorizing the meetings of any state agency, department, corporation, office, authority, board, or commission, as well as any local public body, or public corporation, or a committee or subcommittee or other similar body of such entity to be held remotely by conference call or similar service.
The Chair then asked Subcommittee members for questions or comments on the minutes from the November 5, 2021, meeting of the Subcommittee. Dr. Smith made a motion to accept the minutes, Dr. Eastman seconded the motion, and the motion was approved unanimously.

Next, the Subcommittee reviewed Accreditation/Laboratory updates from the Monroe County Crime Laboratory, Nassau County Division of Forensic Services, New York City OCME Department of Forensic Biology, New York State Police Crime Laboratory, Onondaga County Center for Forensic Science, and Suffolk County Crime Laboratory. Representatives from the laboratories were available to answer questions as needed.

During Accreditation/Laboratory updates, the Subcommittee reviewed the final documentation from the ANAB reaccreditation assessment activity of the Suffolk County Crime Laboratory. The Chair called for a motion to issue a binding recommendation to the Commission on Forensic Science to renew the New York State Accreditation of the Suffolk County Crime Laboratory in the discipline of Biology for the period concurrent with its ANAB accreditation to expire December 31, 2025. Dr. Smith made the motion, Dr. Gettings seconded the motion, and the motion was approved unanimously.

The Chair then moved to Old Business. A verbal update was provided on the Partial Match program, Familial Search program, and CODIS Bulletins. Finally, the Subcommittee discussed a letter from the Legal Aid Society/Commission member Jessica Goldthwaite regarding mixture interpretation. After a lengthy discussion, the item will remain on the agenda for the next meeting and OFS will give an update regarding the status of proficiency testing and training requirements after consultation with the BIOTWG.

The Chair then moved to New Business. The Subcommittee reviewed the 2021 Annual Laboratory Summary and CODIS Security Audit memorandum. Next, the NYC OCME Department of Forensic Biology presented on the future use of Body Fluid Proteomics. The Subcommittee asked the laboratory to give an update when the validation is completed.

Next, the Subcommittee reviewed a laboratory disclosure from the New York State Police Crime Laboratory; then returned to New Business to discuss the familial search validation update related to the laboratory disclosure. Finally, the Subcommittee reviewed another laboratory disclosure from the New York State Police Crime Laboratory.

Dr. Weir 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. Dr. Gettings made the motion, which was seconded by Dr. Sozer and approved unanimously.

The Subcommittee adjourned into Executive Session with all members present. The Subcommittee discussed ongoing investigations, and no action was taken. Executive Session commenced at 12:01 PM and concluded at 12:07 PM. The Subcommittee reconvened the Open Meeting.
The Chair stated that the next meeting of the Subcommittee will take place on May 13, 2022, with the location to be determined. A motion to adjourn was made by Dr. Smith, seconded by Dr. Gettings, and approved unanimously.

*Note: Video of the meeting is available at https://www.youtube.com/user/nyspublicsafety*
May 4, 2022

Michelli Schmitz
Erie County Central Police Services
Forensic Laboratory
45 Elm Street
Buffalo, NY 14203

Dear Director Schmitz,

Congratulations! On May 4, 2022 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 2023                  Surveillance Document Review
- April 2024                  Surveillance Assessment
- April 2025                  Surveillance Document Review
- April 2026                  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 was provided to you during the assessment activity. An electronic version of accreditation documents is 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,

Janet M. Girten
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Maria Orsino, Acting Quality Assurance Coordinator
ANAB Office
CERTIFICATE OF ACCREDITATION

The ANSI National Accreditation Board
Hereby attests that

Erie County Central Police Services
Forensic Laboratory
45 Elm Street, Buffalo, New York 14203 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: 31 August 2026
Certificate Number: FT-0037

Received by OFS
5/4/2022
**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

**Erie County Central Police Services**  
**Forensic Laboratory**  
45 Elm Street  
Buffalo, New York 14203 USA

**FORENSIC TESTING**

Expiry Date: 31 August 2026  
Certificate Number: FT-0037

### Discipline: Biology

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<tr>
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<th>Item</th>
<th>Key Equipment/Technology</th>
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<td>DNA Profile Determination</td>
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<td>Capillary Electrophoresis</td>
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<td>Y-Short Tandem Repeat (Y-STR)</td>
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<td>Individual Characteristic Database</td>
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<td>Physical Comparison</td>
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<td>Software Program</td>
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<td>Epithelial Cell</td>
<td>Fluorescence Spectroscopy</td>
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<td>Feces</td>
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### Discipline: Fire Debris and Explosives

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<tr>
<td>Qualitative Determination</td>
<td>Fire Debris</td>
<td>Gas Chromatography Mass Spectrometry</td>
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### Discipline: Firearms and Toolmarks

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<td>Individual Characteristic Database</td>
<td>Ammunition</td>
<td>National Integrated Ballistic Information Network (NIBIN)</td>
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<td>Qualitative Determination</td>
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### Discipline: Impressions

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<td>Tire</td>
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<td>Physical Comparison</td>
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### Discipline: Materials (Trace)

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<tr>
<td>Chemical/Physical Comparison</td>
<td>Coating Fractured Item General Unknown Ink Polymer Tape</td>
<td>Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Microspectrophotometry Thin Layer Chromatography Visual</td>
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<tr>
<td>Qualitative Determination</td>
<td>Coating General Unknown Polymer Tape</td>
<td>Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Microspectrophotometry Visual</td>
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<tr>
<td>Discipline: Seized Drugs</td>
<td>Component/Parameter</td>
<td>Item</td>
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<td>Volume Measurement</td>
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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
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 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 3126) 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

7.2.2 Validation of methods

7.2.2.1 ISO/IEC 17025:2017

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.

Comments

The lab would benefit from updating their validation studies
Dear Maria,

This is to acknowledge receipt of your DNA Quality Assurance Standards (QAS) Audit Report for the Erie County Central Police Services Forensic Laboratory in Buffalo, New York dated April 4 to 6, 2022, for the 2022 external audit. The audit documentation was received on May 5, 2022.

Upon completion of this review, the committee's copies of the audit document and any electronic audit submissions will be destroyed by the FBI.

For tracking purposes, the audit has been assigned number 2022044. Please refer to this number if you have any inquiries concerning this particular audit document.

Thank you for your assistance in this matter. If you have any questions, please contact QAS@FBI.GOV.

Sincerely,

Lisa L. Grossweiler
NDIS Custodian
CODIS Unit
Laboratory Division

1 – Kerri Sage (information only)
April 15, 2022

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

Dear Director Wickenheiser,

Congratulations! On April 14, 2022, 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. The report and an electronic version of accreditation documents are included with this letter.

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- January 2026       Reassessment

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Sincerely,

Janet M. Girten  
Senior Manager of Accreditation  
ANSI National Accreditation Board

cc:  David M. 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:2020
FBI Quality Assurance Standards for DNA Databasing Laboratories:2020

In the field of

Forensic Testing

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

Pamela L. Sale, Vice President, Forensics

Expiry Date: 31 May 2026
Certificate Number: FT-0025
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: 31 May 2026 Certificate Number: FT-0025

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

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<th>Component/Parameter</th>
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<td>DNA Profile</td>
<td>Software Program</td>
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<td>Qualitative Determination</td>
<td>Body Fluid</td>
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<td>Fluorescence Spectroscopy</td>
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<td>General Microscopy</td>
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<td>Immunoassay</td>
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<td>Mass Spectrometry</td>
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### Discipline: Friction Ridge

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### Discipline: Materials (Trace)

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### Discipline: Seized Drugs

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<tbody>
<tr>
<td>Qualitative Determination</td>
<td>Botanical Liquid Solid</td>
<td>Chemical Gas Chromatography General Microscopy Infrared Spectroscopy</td>
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### Disciplines:

**Toxicology**

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<tr>
<td>Qualitative Determination</td>
<td>Ante-Mortem Biological Item, Post-Mortem Biological Item</td>
<td>Gas Chromatography, Immunoassay, Liquid Chromatography, Mass Spectrometry</td>
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<tr>
<td>Qualitative Determination (Volatiles)</td>
<td>Ante-Mortem Biological Item, Post-Mortem Biological Item</td>
<td>Gas Chromatography, Mass Spectrometry</td>
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<tr>
<td>Quantitative Measurement</td>
<td>Ante-Mortem Biological Item, Post-Mortem Biological Item</td>
<td>Liquid Chromatography, Mass Spectrometry</td>
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<td>Quantitative Measurement (Volatiles)</td>
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**Seized Drugs**

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

**Discipline: Seized Drugs**

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<td>Volume Measurement</td>
<td>Liquid</td>
<td>Balance, Volumetric Glassware</td>
</tr>
<tr>
<td>Weight Measurement</td>
<td>Botanical</td>
<td>Balance</td>
</tr>
<tr>
<td></td>
<td>Liquid</td>
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<tr>
<td></td>
<td>Solid</td>
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</tr>
</tbody>
</table>

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

**Discipline: Seized Drugs**

<table>
<thead>
<tr>
<th>Component/Parameter</th>
<th>Item</th>
<th>Key Equipment/Technology</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Liquid</td>
<td></td>
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<tr>
<td></td>
<td>Solid</td>
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</tbody>
</table>
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.

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Volume Measurement</td>
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<td>Gas Chromatography Liquid Chromatography Ultraviolet Spectroscopy</td>
</tr>
<tr>
<td>Weight Measurement</td>
<td>Botanical Liquid Solid</td>
<td>Balance Volumetric Glassware</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Balance</td>
</tr>
</tbody>
</table>

Pamela L. Sale
Vice President, Forensics
New York State Police - Crime Laboratory

Data collected on 2022-01-24

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 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 ANAB 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

7.8.1 General

7.8.1.2 ISO/IEC 17025:2017

Resolved Nonconformity

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<tr>
<th>Requirement</th>
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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.

Nonconformity Resolution Workflow

In DNA, the laboratory does not report all results in a manner that is clear and unambiguous. Specifically, when the laboratory reports the presence of a minor profile as part of a mixture it does not specify whether the minor profile is suitable for comparison.

Corrective Action Closure Note: An evaluation of the nonconformity to determine the extent and cause were conducted. Root cause determined the laboratory attempted to streamline DNA report’s conclusions, remove technical jargon, improve readability and customer comprehension. This resulted in DNA reports containing mixtures conclusion not identifying whether or not the minor portion of the profile was suitable for comparison. Biological Science Casework staff were notified on 1/31/2022, and advised that pending DNA reports with the affected conclusion(s) should not be reviewed or approved. The effect was determined to be mixture cases containing minor DNA profiles reported from October 21, 2021 to January 28, 2022. Corrective action implemented- Casework Section procedures D7.9 DNA Report Conclusions and D6.4.1 Guidelines for Interpretation of Y-STR DNA Profiles (YFiler® Plus) were updated to include language addressing...
A Web-Ex meeting was held for all Bioscience Casework staff on 2/3/2022 that reviewed the revised conclusion wording specifying whether the minor component to a mixture profile was suitable for comparison. Customer notification was placed on the website where reports are obtained - https://troopers.ny.gov/laboratory-test-report-information. Updated procedures reviewed - DNA Section D7.9-DNA report Conclusions, version 12, effective 02/03/2022 and DNA Section D6.4.1- Guidelines for Interpretation of Y-STR Profiles (VFiler Plus) version 9, effective 02/03/2022. Amended reports will be issued when identified and requested by the customer. Five recently completed test reports addressing minor contributors to a mixture suitability for comparison were reviewed. This nonconformity has been resolved.

### 7.8.1.2.2 ANAB Accreditation Requirement

#### 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.

#### Nonconformity Resolution Workflow

In Friction Ridge Identification reports from the Statewide Automated Biometric Identification System (SABIS) the significance of associations do not contain a qualitative statement.

#### Corrective Action Closure Note

An evaluation of the nonconformity to determine the extent and cause were conducted. Root cause determined a misunderstanding of the requirement regarding qualifying the significance of an association. The effect was determined to be reports issued between 03/03/2020 and 01/27/2022 reporting an identification from an automated search did not contain a qualitative statement indicating the strength of the association. Corrective action implemented: On January 27, 2022 the section was notified that no Automated Search Reports declaring tentative identification were to be issued until procedural updates. The following procedures were updated requiring the significance of association to be reported on Automated Search Reports- Latent Print Technical Test Method Version 14 - Section 4D: Miscellaneous procedures- Friction Ridge Impression Examination, effective January 27, 2022 and Latent Prints Technical Test Method Appendices, version 14 effective January 27, 2022. Staff were notified of procedure changes. On February 12, 2022, customers were notified that the significance of association were not included on reports involving automated searches between 03/03/2020 and 01/27/2022. Amended reports will be issued upon request. Five recently completed Automated Search Reports qualifying the significance of associations were reviewed. This nonconformity has been resolved.
March 31, 2022

Thomas Leach
New York State Police
Forensic Investigation Center
1220 Washington Avenue, Building 30
Albany, NY 12226

Dear Thomas:

This is to acknowledge receipt of your DNA Quality Assurance Standards (QAS) Audit Report for the New York State Police (Database) in Albany, New York, dated January 24 to 27, 2022, for the 2022 external audit. The audit documentation was received on March 30, 2022.

Upon completion of this review, the committee's copies of the audit document and any electronic audit submissions will be destroyed by the FBI.

For tracking purposes, the audit has been assigned number 2022028. Please refer to this number if you have any inquiries concerning this particular audit document.

Thank you for your assistance in this matter. If you have any questions, please contact QAS@FBI.GOV.

Sincerely,

Lisa L. Grossweiler
NDIS Custodian
CODIS Unit
Laboratory Division

Received by OFS
4/1/22

1 – Kerri Sage (information only)
Russell Gettig  
New York State Police  
Forensic Investigation Center  
1220 Washington Avenue, Building 30  
Albany, NY 12226

Dear Russell:

This is to acknowledge receipt of your DNA Quality Assurance Standards (QAS) Audit Report for the New York State Police (Forensic) in Albany, New York, dated January 24 to 28, 2022, for the 2022 external audit. The audit documentation was received on March 30, 2022.

Upon completion of this review, the committee's copies of the audit document and any electronic audit submissions will be destroyed by the FBI.

For tracking purposes, the audit has been assigned number 2022029. Please refer to this number if you have any inquiries concerning this particular audit document.

Thank you for your assistance in this matter. If you have any questions, please contact QAS@FBI.GOV.

Sincerely,

Lisa L. Grossweiler  
NDIS Custodian  
CODIS Unit  
Laboratory Division
May 9, 2022

Jill Dooley
Director, Office of Forensic Services
New York State Division of Criminal Justice Services
80 South Swan Street
Albany, New York 12210

RE: Change in Top Management

Dr. Dooley,

Please be advised that on May 12, 2022, Major Michael A. Jankowiak will replace Major Brian T. Colwell as Assistant Laboratory Director following Major Colwell’s retirement.

Sincerely,

[Redacted]

Dr. Ray A. Wickenheiser
Good morning,

Please see the attached QAS audit report for Onondaga County CFS Labs. Should you have any questions, please do not hesitate to let me know. Thanks.

Ranee Ho, MS, MBA, ABC-MB, CFM-II
Director of Laboratories
Onondaga County Center for Forensic Sciences
100 Elizabeth Blackwell Street
Syracuse, NY 13210

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