



Commission on Forensic Science

December 15, 2023

Empire State Development Corporation
633 3rd Ave, 37th Floor, New York, NY 10016

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

9:04 AM – 12:37 PM

DRAFT MEETING MINUTES

Commission Members in Attendance:

Pasquale Buffolino, Ph.D.¹
James Chithalen, Ph.D.²
Jill Dooley, Ph.D.
Steven Epstein, Esq.
William Fitzpatrick, Esq.
Jessica Goldthwaite, Esq.
Michael Marciano, Ph.D.
Hon. Angela Mazzarelli
Beverly Rauch
Rossana Rosado³
Michelli Schmitz
Ann Willey

DCJS Staff in Attendance:

Dean DeFruscio
Colleen Glavin, Esq.
Natasha Harvin-Locklear, Esq.
Katherine Mayberry
Shelley Palmer
Joseph Popcun
Lindsey Rockwell
Elizabeth Suparmanto

¹ In accordance with a resolution and related procedures regarding the use of videoconferencing under extraordinary circumstances, which were adopted by the Commission on Forensic Science on June 9, 2023 and added to its bylaws, Dr. Buffolino participated by videoconferencing from a private location due to extraordinary circumstances and, thus, shall not count toward quorum, but was able to participate and vote as there was a quorum of members at physical location(s) open to the public.

² Representative of Commission Member James V. McDonald, M.D.

³ Commissioner Rosado attended virtually after roll call (approximate video time 00:04:55).

Other Attendees:

Jennifer Alois – New York State DCJS Latent Print Laboratory
Bradley Brown – New York State Police Crime Laboratory
Nicole Capitali – New York City Police Department Police Laboratory
Neil Fenton – New York City Police Department Legal Bureau
Russell Gettig – New York State Police Crime Laboratory
Nichole Hurbanek – New York State Police Crime Laboratory
Michael Jankowiak – New York State Police Crime Laboratory
Rosalyn Joseph – New York City Police Department Latent Print Section
Timothy Kupferschmid – New York City OCME Department of Forensic Biology
Jennifer Lady – New York City Police Department Latent Print Section
Thomas Leach – New York State Police Crime Laboratory
Andrea Lester - New York State DCJS Latent Print Laboratory
Brian McGee – New York City Police Department Police Laboratory
Kyra McKay – New York City OCME Department of Forensic Biology
Craig O'Connor – New York City OCME Department of Forensic Biology
Jennifer Odien – New York City OCME Forensic Anthropology Unit
Scott O'Neill – New York City Police Department Police Laboratory
Stephanie O'Shea – New York City Police Department Police Laboratory
Meredith Rosenberg – New York City OCME Department of Forensic Biology
Mirtha Sabio – New York City OCME Department of Forensic Biology
Tiffany Vasquez – New York City OCME Department of Forensic Biology
Ray Wickenheiser – New York State Police Crime Laboratory

**Approximate
video times**

Dr. Jill Dooley opened the meeting by stating that Chair Rosado may attend virtually and that she would chair the meeting in her absence. Dr. Dooley welcomed new member, Mr. Steven Epstein, to the Commission on Forensic Science. Mr. Epstein will be the representative of the private criminal defense bar on the committee. Dr. Dooley then took a roll call as the members were in attendance in New York, Albany, and virtually. A quorum was established with 9 voting members (Dooley, Epstein, Fitzpatrick, Goldthwaite, Marciano, Mazzarelli, Rauch, Schmitz, and Willey); one member participated from a private location due to extraordinary circumstances (Buffolino⁴).

00:00:00
00:02:48

Dr. Dooley requested a motion to approve the December 15, 2023, agenda. The motion to approve the agenda was made by Ms. Schmitz, seconded by Judge Mazzarelli, and approved unanimously with 10 votes.

00:02:50
00:03:37

Then, Dr. Dooley requested a motion to approve the minutes of the September 22, 2023, Commission meeting. The motion to approve the minutes was made by Mr. Fitzpatrick. Judge Mazzarelli seconded the motion, and it was approved with 9 votes (Buffolino, Dooley, Fitzpatrick, Goldthwaite, Marciano, Mazzarelli, Rauch, Schmitz, and Willey) and 1 abstention (Epstein).

00:03:38
00:04:42

⁴ See FN. 1 above.

Next, the Commission reviewed the Accreditation/Laboratory Updates. Commissioner Rosado joined the meeting during this agenda item. Matters regarding the following laboratories were considered: Nassau County Office of the Medical Examiner Division of Forensic Services, New York City OCME Department of Forensic Biology, New York City OCME Forensic Anthropology Unit, New York City Police Department Police Laboratory, New York State Division of Criminal Justice Services Latent Print Laboratory, Niagara County Sheriff's Office Forensic Laboratory, Onondaga County Center for Forensic Sciences Laboratory, and Suffolk County Crime Laboratory. Representatives from the laboratories were available in person or via WebEx to respond to members' questions.

*Approximate
video times*

00:4:44
00:24:38

The next agenda item was Old Business. Dr. Dooley provided the Commission members with a verbal update on the Familial Search Program, which has resumed.

00:24:46
00:26:32

The Commission then discussed matters regarding the Niagara County Sheriff's Office Forensic Laboratory. ANAB provided a response to the Commission's request for investigative documentation regarding the anonymous letter. Pam Sale, of ANAB, was available later in the meeting to answer members' questions.

00:26:37
00:28:30

Dr. Dooley reviewed laboratory disclosures from the Erie County Central Police Services Forensic Laboratory.

00:28:35
00:37:42

Dr. Dooley then went back to Old Business as Pam Sale was available virtually to answer members' questions regarding ANAB's response to their request.

00:37:44
00:41:49

Laboratory disclosures were continued and matters from the Erie County Medical Examiner's Office Forensic Toxicology Laboratory, Nassau County Office of the Medical Examiner Toxicology Laboratory, New York City OCME Department of Forensic Biology, New York City OCME Department of Forensic Toxicology, New York City Police Department Latent Print Section, New York City Police Department Police Laboratory, New York State Division of Criminal Justice Services Latent Print Laboratory, New York State Police Crime Laboratory, Suffolk County Crime Laboratory, Suffolk County Office of the Chief Medical Examiner Toxicology Laboratory, and Westchester County Department of Laboratories and Research Division of Forensic Toxicology were reviewed. Representatives from the laboratories were available in person, by phone or via WebEx to respond to members' questions.

00:41:50
02:48:40

Dr. Dooley 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 particular person. The motion was made by Mr. Fitzpatrick, seconded by Ms. Rauch. The motion was approved with 8 votes (Buffolino, Dooley, Fitzpatrick, Marciano, Mazzarelli, Rauch, Schmitz, and Willey), 1 opposed (Goldthwaite) and 1 abstention (Epstein).

02:49:01
02:50:00

The Commission adjourned into Executive Session.

The Commission reconvened the open meeting at 12:34 pm and Dr. Dooley indicated that the Commission took no formal action during Executive Session.

02:51:00
02:51:09

Dr. Dooley stated that the next meeting of the Commission will take place on March 15, 2024. Judge Mazzairelli made a motion to adjourn the meeting, seconded by Mr. Epstein and approved unanimously.

*Approximate
video times*
02:51:10
02:51:45

Note:

Video of the open meeting is available on YouTube.

From: [Hartman, Rebecca L](#)
To: [dcjs.sm.forensiclabs](#)
Cc: [Nemeth, David J](#); [Kadlec, Lisa M](#); [Salamone, Michelle E](#)
Subject: David Nemeth Retirement
Date: Friday, February 2, 2024 10:21:05 AM

ATTENTION: This email came from an external source. Do not open attachments or click on links from unknown senders or unexpected emails.

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Good Morning,

It is with deep personal regret that I must let you know that our Assistant Chief Toxicologist, David Nemeth, PhD, F-ABFT, is retiring today.

Dr. Nemeth has been an invaluable asset to the laboratory, and we are very sorry to see him go. However, we are most happy for him and wish him all the best as he transitions into this next, highly-deserved phase of his life. On behalf of the Monroe County Toxicology Laboratory, I wish to formally commend him for all his years of service to the laboratory. He will be sorely missed and difficult to replace.

Please let me know if there is anything further you need from us at this time. I will, of course, inform you when we find someone to fill the position.

Thank you and best regards,



Rebecca L. Hartman, PhD, F-ABFT
Chief Toxicologist
Monroe County Office of the Medical Examiner
Monroe County, NY



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From: [QualityMatters](#)
To: [Hahn, Timothy \(NASSAU\)](#); [dcjs.sm.forensiclabs](#)
Cc: [Bloom, Tamara \(NASSAU\)](#); [Kelly, Carolyn \(NASSAU\)](#); [REDACTED]
Subject: RE: Notification - Change in Lab Management
Date: Monday, February 26, 2024 9:14:54 AM
Attachments: [image001.png](#)
[image002.png](#)
[Memo - Retirement of Chief Toxicologist - Avella \(2-23-2024\).pdf](#)

ATTENTION: This email came from an external source. Do not open attachments or click on links from unknown senders or unexpected emails.

Good morning!

Thank you for the notification. Our records have been updated accordingly.

Have a great day/week!

Caprice

Caprice Fowler | ANAB
Senior Coordinator, Forensics
ANSI National Accreditation Board
D.C. | Fort Wayne

[REDACTED]
[REDACTED]
www.anab.org
qualitymatters@anab.org



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From: Hahn, Timothy [REDACTED]
Sent: Friday, February 23, 2024 10:57 AM
To: [dcjs.sm.forensiclabs](#) <dcjsforensiclabs@dcjs.ny.gov>; [QualityMatters](#) <qualitymatters@anab.org>

Cc: Bloom, Tamara [REDACTED]; Kelly, Carolyn [REDACTED]

Subject: [EXTERNAL] Notification - Change in Lab Management

The Chief Toxicologist, Dr Joseph Avella, has retired as of 2/23/24.

Please see attached memo regarding the change in management for the lab.

Thank You,



Timothy Hahn
QA/QC Coordinator, Toxicology Lab
Nassau County Medical Examiner's Office
2251 Hempstead Turnpike, Building R
East Meadow, New York 11554
[REDACTED]

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OFFICE of the MEDICAL EXAMINER

TAMARA BLOOM, M.D.
CHIEF MEDICAL EXAMINER

JOSEPH AVELLA, Ph.D.
CHIEF TOXICOLOGIST



2251 HEMPSTEAD TPKE, Bldg "R"
EAST MEADOW, NY 11554-1856
516-572-6400
FAX 516-572-5174

To: NYS DCJS – Office of Forensic Services
ANSI National Accreditation Board (ANAB)

From: Dr. Tamara Bloom, Chief Medical Examiner

Date: 2/22/2024

Subject: Retirement of Dr. Avella, Chief Toxicologist



Effective February 23, 2024, Dr. Joseph Avella has retired as the Chief Toxicologist of the Nassau County Medical Examiner's Office.

In the interim, Timothy Hahn (QA/QC Coordinator – Toxicology) has assumed the role of Acting Director of Laboratories for the Toxicology Laboratory.

Attached is the CV for Mr. Hahn.

[Redacted Signature]

Dr. Tamara Bloom, M.D.
Chief Medical Examiner

Date: 02/22/24

cc: CKelly (Deputy ME – Labs)
THahn (Acting Director – Tox)
TFox (Deputy CE – Public Safety)



DNA Subcommittee



February 15, 2024

MICHAEL COBLE, PH.D.
CHAIR
Center of Human Identification

FREDERICK BIEBER, PH.D.
Harvard Medical School

KATHLEEN CORRADO, PH.D.
Syracuse University

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

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

JENIFER SMITH, PH.D.
PRINCIPAL, BIOFORENSIC CONSULTING LLC

AMANDA C. SOZER, PH.D.
SNA International

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 February 9, 2024, DNA Subcommittee (Subcommittee) meeting, members reviewed the final ANSI National Accreditation Board (ANAB) Assessment Report for the New York City Office of Chief Medical Examiner, Department of Forensic Biology.

The Subcommittee voted and approved to issue a binding recommendation to the Commission on Forensic Science to renew the New York State Accreditation of the New York City Office of Chief Medical Examiner, Department of Forensic Biology in the discipline of Biology for the period concurrent with their ANAB accreditation. This accreditation is valid until February 28, 2028.

Very truly yours,



Michael Coble, Ph.D.
Chair, DNA Subcommittee

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



January 31, 2024

Timothy D. Kupferschmid
New York City Office of Chief Medical Examiner
Department of Forensic Biology
421 East 26th Street
New York, NY 10016

Dear Director Kupferschmid,

Congratulations! On January 31, 2024, 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 Team Leader. 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:

- | | |
|----------------|------------------------------|
| • October 2024 | Surveillance Document Review |
| • October 2025 | Surveillance Assessment |
| • October 2026 | Surveillance Document Review |
| • October 2027 | Reassessment |

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

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

Sincerely,



Jill Spriggs
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Meredith Rosenberg, Laboratory Deputy Director
Kyra McKay, Laboratory Assistant Director/Quality Manager
ANAB Office



CERTIFICATE OF ACCREDITATION

The ANSI National Accreditation Board

Hereby attests that

New York City Office of Chief Medical Examiner
Department of Forensic Biology
421 East 26th Street, New York, New York 10016 USA

Fulfills the requirements of

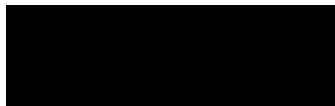
ISO/IEC 17025:2017

Accreditation Requirements for Forensic Testing and Calibration (2023)
FBI Quality Assurance Standards for Forensic DNA Testing Laboratories:2020

In the field of

Forensic Testing

This certificate is valid only when accompanied by a current scope of accreditation document.
The current scope of accreditation can be verified at www.anab.org.



Pamela L. Sale, Vice President, Forensics

Expiry Date: 28 February 2028
Certificate Number: FT-0238





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**

**New York City Office of Chief Medical Examiner
Department of Forensic Biology
421 East 26th Street
New York, New York 10016 USA**

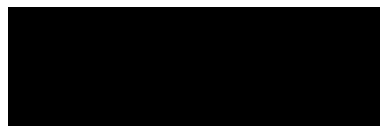
FORENSIC TESTING

Expiry Date: 28 February 2028

Certificate Number: FT-0238

Discipline: Biology		
Component/Parameter	Item	Key Equipment/Technology
DNA Profile Determination	Mitochondrial Short Tandem Repeat (STR) Y-Short Tandem Repeat (Y-STR)	Capillary Electrophoresis Massively Parallel Sequencing
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 Liquid Chromatography Mass Spectrometry

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



**New York City Office of the Chief Medical Examiner - Department
of Forensic Biology**

2023 - 17025T - Reassessment

Prepared by Pamela Mikulcik

Data collected on 2023-10-23

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.

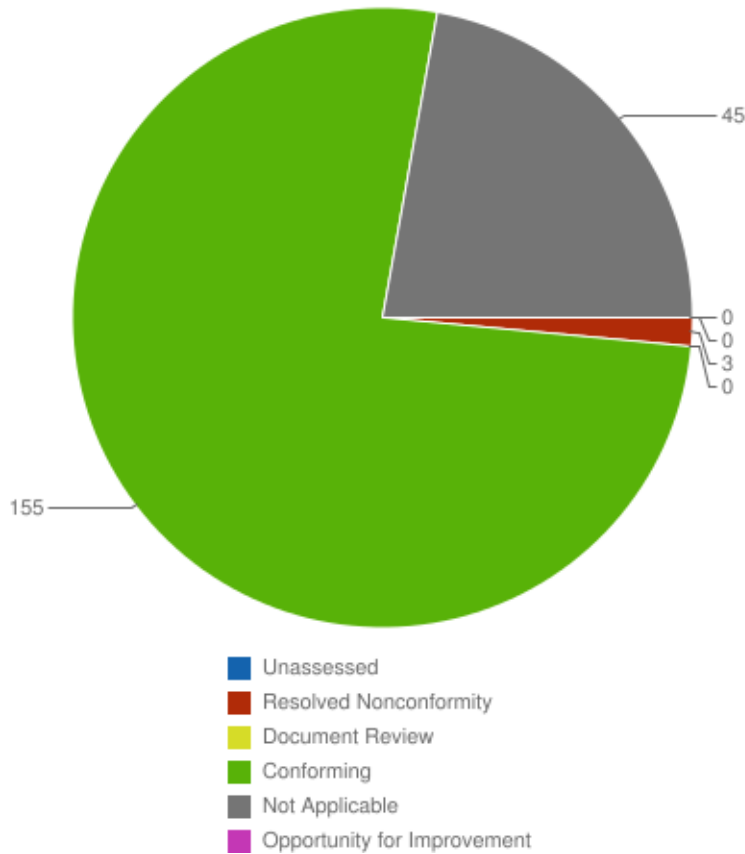
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

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

6.2 Personnel

6.2.6 ISO/IEC 17025:2017

Resolved Nonconformity

Requirement

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

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

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

Nonconformity Resolution Workflow

This nonconformity pertains to only letter a of this standard.

While Management appoints designated individuals to perform development, modification, verification, and validation of methods, a formal authorization process is not employed.

Corrective Action Closure Note: The root cause was determined to be that the laboratory did not understand that those who perform validations need to be authorized in writing. The lab determined there was no risk to casework due to the fact that all validation work was performed under the guidance and direct supervision of a competent Criminalist IV and competent Manager. They immediately wrote an authorization letter for all Laboratory Technicians and Interpreting Analysts. Additionally, they created a draft authorization for future Interns, which includes a space to list their relevant qualifications for performing the validation work. This nonconformity is resolved.

7.8.1 General

7.8.1.2 ISO/IEC 17025:2017

Resolved Nonconformity

Requirement

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

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

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

Nonconformity Resolution Workflow

Technical reports do not contain clear language that indicates when the method of probabilistic genotyping is, or is not used on indistinguishable mixtures.

Corrective Action Closure Note: The root cause was determined to be that the laboratory did not consider Probabilistic Genotyping as a method because it does not fit the QAS definition of one. The lab determined there was no risk to casework and that it was not necessary to re-issue past reports. Report templates were updated to make it clear when STRMix is being used and staff were informed of the changes. This nonconformity is resolved.

8.7 Corrective actions (Option A)

8.7.1 ISO/IEC 17025:2017

Resolved Nonconformity

Requirement

When a nonconformity occurs, does the laboratory:

- a) react to the nonconformity and, as applicable:
 - take action to control and correct it?
 - address the consequences?
- b) evaluate the need for action to eliminate the cause(s) of the nonconformity, in order that it does not recur or occur elsewhere, by:
 - reviewing and analysing the nonconformity?
 - determining the causes of the nonconformity?
 - determining if similar nonconformities exist, or could potentially occur?
- c) implement any action needed?
- d) review the effectiveness of any corrective action taken?
- e) update risks and opportunities determined during planning, if necessary?
- f) make changes to the management system, if necessary?

Nonconformity Resolution Workflow

This nonconformity pertains to only letter d of this standard.

Quality incidents, that are identified as nonconforming work by the laboratory, undergo root cause analysis, corrective action, and studies

regarding their impact on casework. However, because they are not officially deemed as corrective actions by the laboratory, the effectiveness of the remediation is not reviewed.

Corrective Action Closure Note: The root cause was determined to be that the laboratory did not consider quality incidents that could recur as needing to be elevated to a corrective action due to the fact that they are not required to be reported to the New York Board for Forensic oversight. The laboratory determined that there was no impact to casework. The laboratory's Control of Non-conforming Work procedure was updated to include a monitoring assessment phase in addition to the nonconforming workflow template being updated to include a table for the monitoring process. This nonconformity is resolved.



December 18, 2023

Dr. Bradley Adams
New York City Office of Chief Medical Examiner
Forensic Anthropology Unit
520 1st Avenue
New York, NY 10016

Dear Dr. Adams,

Congratulations! On December 11, 2023, ANAB approved the continuation of your organization's accreditation based upon the results of your recent surveillance activity. Continuation of accreditation is a formal acknowledgement that your organization continues to operate in conformance with accreditation requirements. The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol ([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 scheduled to be a Surveillance Assessment in November 2024.

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

Sincerely,

Chris Hamburg
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Dr. Jennifer Odien, Laboratory Quality Manager
ANAB Office



CERTIFICATE OF ACCREDITATION

The ANSI National Accreditation Board

Hereby attests that

**New York City Office of Chief Medical Examiner
Forensic Anthropology Unit
520 1st Avenue, New York, New York 10016 USA**

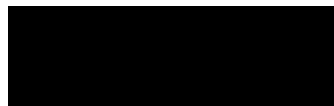
Fulfills the requirements of

**ISO/IEC 17020:2012
Accreditation Requirements for Forensic Inspection (2023)**

In the field of

Forensic Inspection

This certificate is valid only when accompanied by a current scope of accreditation document.
The current scope of accreditation can be verified at www.anab.org.



Pamela L. Sale, Vice President, Forensics

Expiry Date: 30 April 2027
Certificate Number: FI-0014





ANSI National Accreditation Board

**SCOPE OF ACCREDITATION TO:
ISO/IEC 17020:2012
Accreditation Requirements for Forensic Inspection (2023)**

**New York City Office of Chief Medical Examiner
Forensic Anthropology Unit
520 1st Avenue, New York, New York 10016 USA**

FORENSIC INSPECTION
Type C Inspection Body

Expiry Date: 30 April 2027

Certificate Number: FI-0014

Discipline: Anthropology		
Component/Parameter	Item	Key Equipment/Technology
Field Sampling	Human Remains Physical Item	Not Applicable
Biological Profile	Human Remains	Software Program Visual
Commingled Remains	Human Remains	Visual
Medicolegal Significance	Human Remains	Not Applicable
Minimum Number of Individuals (MNI)	Human Remains	Not Applicable
Pathology/Trauma Analysis	Human Remains	General Microscopy Radiography Visual
Physical Comparison	Fractured Item	Visual
Postmortem Interval/Taphonomy	Human Remains	Visual
Qualitative Determination	Human Remains	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.



Pamela L. Sale
Vice President, Forensics



ANSI National Accreditation Board



February 13, 2024

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

Dear Director Wickenheiser,

Congratulations! On February 13, 2024, ANAB approved the continuation of your organization's accreditation based upon the results of your recent surveillance activity. Continuation of accreditation is a formal acknowledgement that your organization continues to operate in conformance with accreditation requirements. The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol ([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 Document Review scheduled for January 2025.

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

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

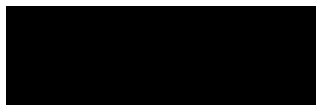
ISO/IEC 17025:2017

Accreditation Requirements for Forensic Testing and Calibration:2023
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

This certificate is valid only when accompanied by a current scope of accreditation document.
The current scope of accreditation can be verified at www.anab.org.



Pamela L. Sale, Vice President, Forensics

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





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
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

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

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



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

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

Discipline: Materials (Trace)		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Hair	General Microscopy

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy

		Liquid Chromatography Mass Spectrometry Raman Spectroscopy Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Liquid Chromatography Ultraviolet Spectroscopy
Volume Measurement	Liquid	Balance Volumetric Glassware
Weight Measurement	Botanical Liquid Solid	Balance

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

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

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

Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Liquid Chromatography Ultraviolet Spectroscopy
Volume Measurement	Liquid	Balance Volumetric Glassware
Weight Measurement	Botanical Liquid Solid	Balance

Southern Tier Satellite Crime Laboratory

44 Park Street
Port Crane, New York 13833 USA

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

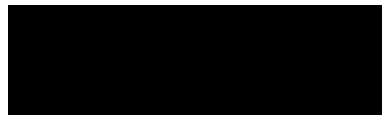
Western Satellite Crime Laboratory

722 Homer Street
Olean, New York 14760 USA

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography

		Mass Spectrometry Raman Spectroscopy Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Liquid Chromatography Ultraviolet Spectroscopy
Volume Measurement	Liquid	Balance Volumetric Glassware
Weight Measurement	Botanical Liquid Solid	Balance

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



Pamela L. Sale
 Vice President, Forensics



New York State Police - Crime Laboratory
2024 - 17025T - Surveillance Assessment
Prepared by Alexandria Bradley

Data collected on 2024-01-22

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.

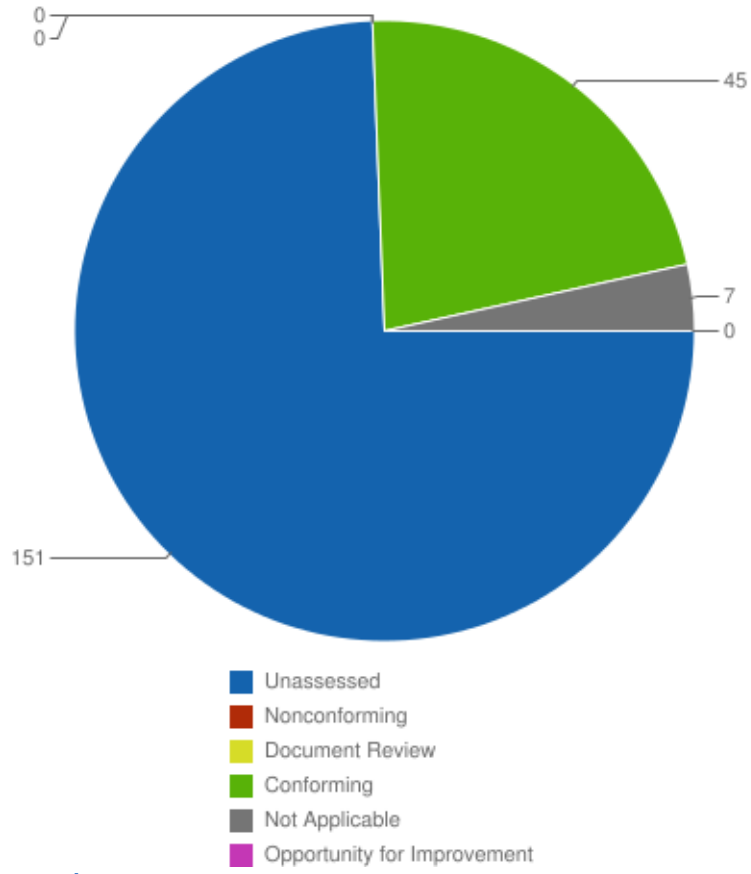
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

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
