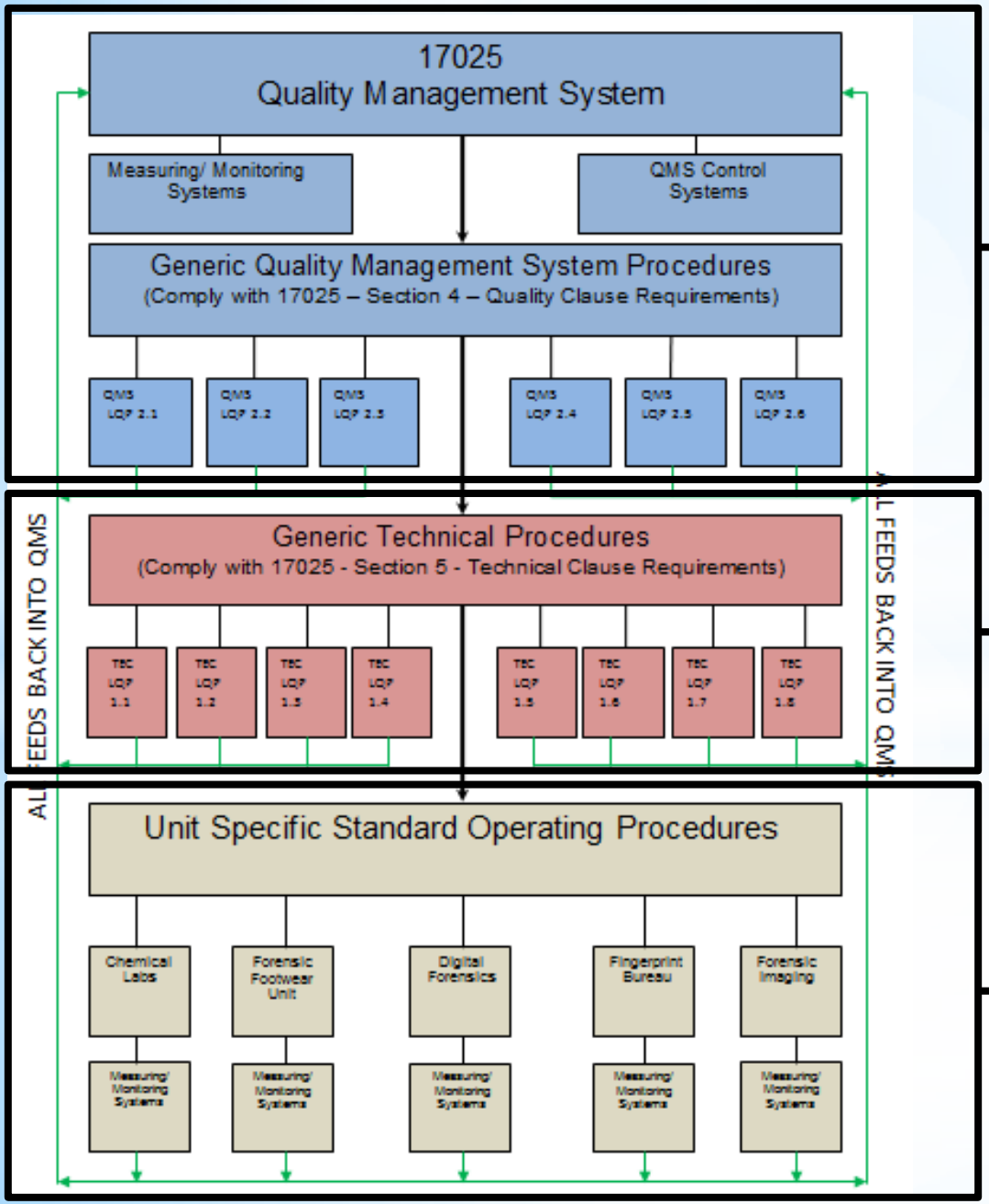
The Route to ISO 17025 Accreditation for Digital Forensics

Tuesday 18th October

Kinesense User Group Forum

The reality of UKAS ISO 17025 accreditation
'learning our lessons'

Sean G Doyle (Head of Forensic Imaging)



Quality Management Procedures for all Scientific Services – Service Level Agreements/Document Control/Management Reviews

Standard Local Quality Procedures across all areas within Scientific Services; Lab/Footwear/FI – Environment/Purchase Supplier LQPs

Technical Procedures specific to the unit - SOPs

SSU Forensic Imaging - Our process path

Initial UKAS 2 day assessment; Oct 2015 (one year from my arrival date, almost 2 years after work began)

The assessment

Admin

- UKAS Quality Assessor and Technical Assessor *Vs*. SSU lead team
- All documentation – Quality Management, Local Quality and Technical Procedures;

  Service Level Agreement - Review
  Submission Guides – Review
  Training Documentation
  Validation Documentation
  SOPs and Guidance Documents



Additional Unit Manager and Technical Manager discussion/questions

- Process understanding and ownership of the TMs

Interaction with technical staff - Technical Procedures

- SOP adherence
- *Technical competence of the procedures*
- *Process notes and decision making*
- *Questions, questions, questions*

Full assessment of Admin staff housekeeping – SSU QM/Local Quality Procedures

- Environment, accommodation and Equipment
- *Purchases and Supplier Evaluation*
- *Document Control Procedure*
- *Proficiency Testing*



- SOP adherence - Exhibit Handling
- *Competence of the procedures*
- *Questions, questions, questions*

Review and results

- UKAS/Head of Unit/FI Manager/QM/TM - The bad news……

40 plus improvement actions across 3 key areas;

Validation

- Identify critical areas of success in terms of reliability, repeatability and quality of output
- End to end process testing, with recorded results
- Determine tolerances, i.e. levels of certainty (dropped frames ><5% - actions)
- Professional Judgement when appropriate but must be backed by - **Training**

Training

- Standard training packages and a framework for recording all training
- Agreed competency sign-off letters for qualified staff
- Professional Judgement (validation) training and testing to ensure - **competency** (i.e. CCTV player selection model)

Competency

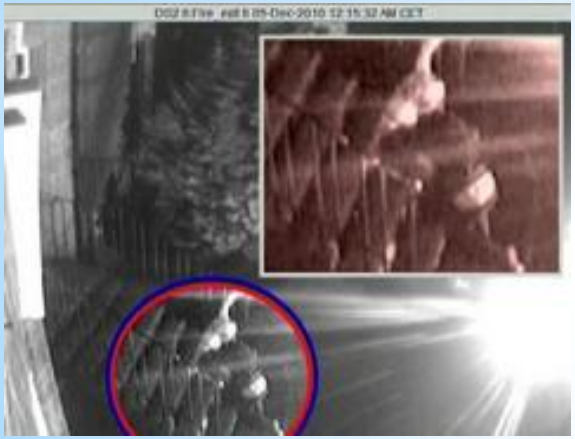
- Accurate records - dates/signatures
- Competency checks/Method Witness Assessments/Horizontal audits
- On-going competency activity program - Vertical Audits/Dip sampling/NCR actions
- Bedding-in period – **'Staff need time to understand the process'**



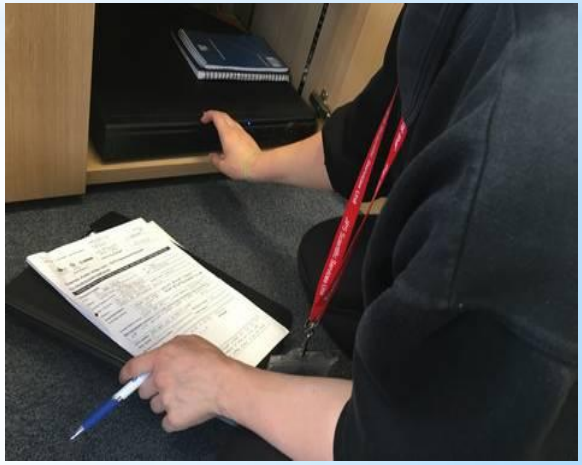


Staff awareness of ISO 17025

The understanding and buy-in of the team is…



ESSENTIAL!



Round two: UKAS insist on return visit 3 months from initial date.
Deadline Feb. 16

- 3 months of hard work addressing all the above areas and sending actions through the QM to UKAS

Return visit was very much like the initial visit, however, it was a UKAS technical assessment only;

- Admin
- TM discussion/questions
- Interaction with technical staff
- Greater assessment of actual casework/process notes again
- Technical Manager discussion/questions
- Review and results

A dozen improvement actions still to address (could have been less had they reviewed the documents submitted before arrival….!)



Round three: One month to address minor actions and return paperwork through the QM for UKAS review. No need for an actual site visit……

'Completed and granted accreditation for the unit as of 1 Apr. 16'

No rest…..





Extension to Scope

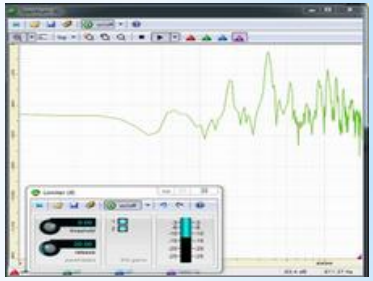
- Image Enhancement - ~~Conversion/Editing~~/Enhancement (x1 new SOP/Guidance Document)
- Audio Enhancement - Conversion/Editing/Enhancement (x2 new SOPs/Guidance Documents)



Unit assessment deadline - Feb 17.
Submission AC4/documentation deadline - Nov 16.

Progress Points

- Process Map of both EtS areas agreed - **29 Jul.16**
- SOPs complete/ Validation Plan (new or additional agreed) - **31 Aug. 16**
- Full LQP/QM review - **31 Aug.16**
- Validation/verification assessment complete - **28 Sep. 16**
- Training Package - **28 Sep. 16**
- Competency assessments - **Oct. 16 to Feb. 17**



Regular review points between FI Manager, TM and QM to support the progress plan.

Additionally

- Validation of Kinesense software against our own test criteria in progress
- Accreditation requirement for local units not yet identified?
- CCTV accreditation scope not yet finalised by the Forensic Regulator and Lead Force (Staffordshire)?

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'Questions'

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