

 <p align="center"><b>Corrective Action Request</b>  Pitt County Sheriff's Office Forensics Services Unit  <i>Issued by the Quality Manager</i></p>	Effective Date: <b>2018/04/01</b>	Ver: <b>3</b>
	Page #: <b>1 of 3</b>	

## Corrective Action Request

**CAR#:** 19-006

To initiate a CAR, complete section I and return to the Quality Manager.

### Section I.

Originator: Wallace Moore

Date: 11/20/2019

*State the nature of problem (or nonconformity or potential problem)*

During the 2019 Internal Audit , review of Case File 2019-04404 revealed that items (2) and (3) had been left out of the (FAR) Forensic analysis report in the results section. Developed item(5) from the original item(3) was put in the results section and full explanation found in Process Notes in case file not on report.

7.8.2.1 states each report shall include at least the following information, unless the laboratory has valid reason for

not doing so, thereby minimizing any possibility of misunderstanding or misuse:

d)Unique identification of all its components are recognizes as a portion of the complete reportand a clear identification of the end; (m) the results with, where appropriate, the units of measurement;

### Section II.

The Quality Manager will assign a unique CAR# (upper right of this form) and record it in the CAR/NCR log. The Quality Manager will designate a person responsible to investigate the root cause of the problem and identify an appropriate response date. The Quality Manager will sign and date this section.

Person responsible for investigating problem: Robert Armstrong

Response required by: 12/05/2019 [1 week from date of issue if easily corrected]  
[1 month from date of issue if more involved]

Quality Manager: Wallace L Moore

Date: 11/21/2019

### Section III.

The person responsible for investigating the problem will complete section III. This will (1) identify what caused the problem, and (2) detail a plan of action. This person will then sign-off, date, and re-submit this form to the Quality Manager.

*Root cause?*

The root cause of this issue was an oversight by the analyst.

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**Plan of Action:**

Review previous cases from July until present to ensure no further errors have occurred.

Sign-off: Robert Armstrong *RA*

Date: 11/22/2019

**Section IV.**

If Plan of Action pertains to the Quality System, the Quality Manager will approve the plan and take action. If Plan of Action pertains to operations, the plan is forwarded to the Technical Leader for approval. The Technical Leader will approve the plan or decide on an alternative arrangement. If necessary, the Technical Leader will identify a person to take action on the above plan.

**Comments/Suggestions:**

Person responsible for action: Robert Armstrong *RA*

Target completion date: 12/05/2019 [1 week from section III date if easily corrected]  
 [1 month from section III date if more involved]

Technical Leader / Quality Manager: Robert Armstrong *RA*


Date: 11/25/2019

**Section V.**

The person responsible for action will complete section V. This person will then sign-off, date, and re-submit this form to the Quality Manager.

**Action Taken:**

27 Cases dating back to July were reviewed with no errors of this nature observed. The oversight of the analyst was determined to be of an accidental nature and not systemic in anyway. An amended case was generated.

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	Corrective Action Request	

Sign-off: 

Date: 11/25/2019

**Section VI.**

This section is completed by the Quality Manager/Technical Leader.

*Final Resolution*

1. Did action correct the problem? Yes
2. Was action taken a temporary or permanent action? Permanent
3. Was corrective action closed? Yes
4. Date corrective action closed. 11/27/2019
5. Was effectiveness verified? Yes
6. Date effectiveness verified. 11/27/2019

*Comments/Suggestions:*

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QM/TL: Wallace Moore 

Date: 11-28-2019