Code of Practice - recommendations from the editorial meeting

Issue

1. The editorial group of the Quality Standards Specialist Group (QSSG) reviewed the comments on the *Codes of Practice and Conduct – Second Consultation Draft, July 2010* and the group recommendations are attached in annex A and a revised draft of the Codes of Practice and Conduct has been produced (QSSG 2010.12.16 -4).

Background

2. The Quality Standards Specialist Group meeting on September 16th 2010 reviewed general comments received deferring all comments specific to clauses in the Codes of Practice and Conduct to the editorial group.

3. The comments received on the Codes of Conduct have been dealt with in the separate paper QSSG 2010.12.16 -2 Code of Conduct.doc.

4. The page numbers and clause references in annex A refer to the *Codes of Practice and Conduct – Second Consultation Draft, July 2010* as published on the Regulator's website.

5. It was apparent some comments received referred to earlier drafts that the various specialist groups would have seen and these were generally mapped across to the consultation draft as published.

Recommendation

6. That the Quality Standards Specialist Group (QSSG) considers the contents of annex A and makes appropriate recommendations to the Regulator.

FSRU
December 2010

QSSG 2010.12.16 - 3 Feedback Code of Practice Annex A

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
1	Various			Other than page numbering, the document has no visible version control which permits the user to identify which version is held	Apply appropriate version control	Agree, version control on front cover not sufficient - version control to be added to footer.
2	10		2	"relevant additional requirements in the appropriate appendix" - there are no appendices so it is unclear what this means. How can anyone say they comply with a requirement that does not exist?	delete that part of the sentence and add back in when/if appendices are added. The reference should be specific to the appendix and/or requirement	Remove all cross references to individual appendices, refer to future appendices in preamble only.
3	10		5	There are no appendices listed	remove paragraph until there are appendices	Agree
4	10		4	There are no appendices listed	remove paragraph until there are appendices	Agree
5	10		6	Is this necessary as the code of conduct states "as a practitioner you shall". In international standards the word "shall" is defined as criteria organisations must comply with. Therefore makes this paragraph redundant	removal of paragraph	Disagree
6	10		7	This should just be included in the scope. It is not a "code" within itself	removal of paragraph	Disagree
7	10		8	Should this also reference UKAS "LAB" documents such as LAB32?	include other standards that directly affect this code such as LAB32	Neutral support; if required it might be relevant in the DNA appendix
8	10	1	3	Not sure who "experts from other professions" applies to in the world of forensics and how they would be aware of the code of conduct if not working in the forensics profession.	clarify who this would apply to.	Rephrase to place requirement on customer to inform them of ALL requirements.
9	10	5		Document DOES cover aspects of crime scene work in several places	Revise and add appendix after due consultation	Agree

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
10	10	Code of Practice	3	Refers to ISO 17025 earlier now ISO 17025:2005	Needs to be uniform throughout document	Agree
11	10	Code of Practice	3	ILAC G19 to be reissued in near future		To note only
12	10	Code of Practice	4	Appendices part of codes? Assessed by UKAS?		They will be, exact mechanism to be agreed
13	10	Code of Practice	8	Include ILAC G19		Agree
14	10	Code of Practice	9	Include ISO9001		Disagree, would imply both 9001 and 17025 are required
15	10		1	State that this code does not apply to organisations who already have 9000 and 17025. Add section from page 10, section 3 to the scope. To say that this document is not a substitute of the standards 17025 and 17020.		Disagree, this DOES apply to such organisations. Agree to adding "not a substitute to standards.
16	10		5	Where are they?		Agree, references removed
17	10	2		Require a list of appendices	include list of appendices	List not finalised
18	10	8		Possible opportunity to include all relevant standards e.g. LAB32, ILAC - G19		Agree G19, but neutral support for Lab 13; if required it might be relevant in the DNA appendix
19	11	1	1 a-d	Document DOES cover aspects of crime scene work in several places		Remove footnote 12; the main text is designed to cover common features of both 17025 and 17020.

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20	11	1	1.a.	'Initial action at scene' in a criminal investigation context would be to ensure the safety of police officers and members of the public at the location. As this code is intended for 'sciences with scene based elements' I would change vocabulary used. The scene would have been searched for offenders and victims by uniformed officers and all potential hazards identified and listed in the Scene Attendance Log prior to the arrival of the scientist.	Change to 'Initial actions of scientist at scene.'	Agree, amended to read "They cover the provider's:"
21	11	2		It specifies	The **Codes** specify	Agree
22	11	1	2	The Codes do not specify requirements etc for 'the requisite management processes and technical procedures to be used'	Delete 'and the requisite management processes and technical procedures to be used'	Agree
23	11	1	e	Sampling occurs in lab based methods	Sampling may occur in either	Agree
24	11	1	i	How will UKAS be expected to assess the presentation part?		No change to text, UKAS will assess the assessment by the provider
25	11	1	a-e footnote 11	Again where is this bespoke appendix?		Removed
26	11	1	a-e footnot	This based	This **is** based	Agree
27	11	3		How will this be monitored/assessed/enforced?		Agree, modified to require customer to inform the provider

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
28	11		9	The Codes of Practice and Conduct very briefly refer to other quality standards and good working practices e.g., GLP, GMP, CPA standards, but states that these are not alternatives to ISO 17025, although they do provide compatible guidance. Surely more emphasis could be placed on the potential of using other standards like GLP, with the recommendation that if GLP principles were introduced to fingerprint enhancement laboratories then this would greatly assist the laboratory in adhering to the Codes and in achieving ISO 17025 accreditation. Or is this something that the NPIA can use as a way of assisting forces?		The Regulator does not believed GLP as an assessed standard is equivalent and has said so; moreover, the comment appears not to be referring to MHRA to governed process rather to broader principles
29	11	9		Include ISO9000/9001	Add ISO9000/9001	No requirement to 9001 is included in current Codes
30	12	3	1&2	There is no glossary	add in a glossary	much earlier draft circulated to the QSSG
31	12	4	1	Who is the provider? Not all situations covered by the scope could have either ISO 17025 or 17020 applied to them. For instance an organisation specialising in the reporting and presentation of results with associated interpretations and opinions. This is not covered by either of the ISO standards. An example of this maybe where a academic is required to give an expert opinion.	either revisit the scope of the codes of conduct or remove this as a compulsory requirement	If an academic is required then item 3 applies, reporting only could be 17043 (i.e. was Guide 43) which is for 17025. This will remain open until after UKAS pilot
32	12	4	3	Our techniques are routine to our discipline but considered to be non-routine by most providers	Clarification of routine & non-routine in relation to the discipline or wider field	Routine to a discipline is covered
33	12	1	3	CJS should be bound	**Are** or **must** or else why will people sign up to the codes if they do not need to?	Agree
34	12	3	1	Definitions as	Definitions **are**	Agree
35	12	4	5	archived	retained	Agree

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
36	12	4	3	This point needs clarification. We read it as meaning that whilst novel methods do not need to have been accredited they must have been validated but when the method becomes routine accreditation must be sought. Is that correct?	Wording needs to be changed to clarify point being made.	The taken meaning is correct; though is essential the correct requirement? The Regulator has made it clear that the Courts must be able to form their own judgements as to admissibility with the expectation that novel techniques will have to demonstrate their validity through a voire dire. Therefore clause should be amended to "....non-routine activities the provider should have validated the method,...." which implies the default position is still validation but is not so absolute.
37	12	4	1	The implication of this requirement is that all methods, products and services routinely supplied should be subject to accreditation. If that is the case then we suggest that it should be specified. There are implications for suppliers in the identification of what they consider to fall under the definition of 'routine' and for ensuring that accreditation has been achieved for each of them.	Wording needs to be changed to clarify point being made.	Routine was defined, but the definition was felt too restrictive. Routine could be redefined in terms of offering services through the Framework but it would stumble for internal services.
38	12	4	4	It is not clear what information should be available, and to whom.		Slight redraft to imply status quo ' …ensure continuous availability of information' and delete remainder of line.
39	12	Normative Reference		There is no reference to ISO/IEC 17020:1998	Add reference to ISO/IEC 17020:1998	Re-added, also with A4
40	12	2		Suggest remove HMG security policy framework as this is not a standard.	Delete	Disagree, there is a requirement to comply with it so it remains

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
41	12	4		This section is already explained in 17025.	Delete	Disagree
42	12	4	3	Remove as also part of the standard.	Delete	Disagree
43	12	4	5	Continuity plans should not include a requirement to preserve archive material (e.g. casework files etc) in these circumstances as it is out of our control		Comment is believed to mean to refer to there being circumstances that are out of anyone's control. However, a plan should still exist to cover the issues
44	12	4	1	Could be clarified by defining which standard applies to what	BE EN ISO/IEC 17025:2005 for laboratory examinations and BS EN ISO/IEC 17020:2004 for scene examination.	Full title in Normative references, now also including 17020
45	12	4	3	Clarification of novel techniques or non-routine activities are required, both in terms of time since the introduction of the method or technique and the frequency of use. This should be clearly defined also in the forensic providers quality documentation.		Group felt this was not required in the Codes, however some redrafting around the use of 'essential' was required.
46	12	1	3	Will the courts allow experts to give expert testimony only if they have signed the FSR's Code? In the interim when some forces may have achieved ISO 17025 and the FSR's Code and other forces may not have, will the FSR be in communication with the wider CJ community to ensure guidance on how evidence from an expert witness should be considered, guarding against evidence being dismissed *purely* due to lack of accreditation?		The intention is not to close the door on avenues of evidence, although it there will be more awkward questions in future once the Codes are in effect. It is worth considering a Q&A type doc in the coms strat.
47	12	2		Chief Officer	Chief Executive Officer	Meant to cover Chief Constable but also could include CEOs, CIOs etc.
48	12	4		Ensure availability of information	ensure, confidentiality, integrity and availability of information	Agree

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
49	12	4		archived	current and archived	Agree
50	13		13 1, 2, 11 (p. 8); 5c (p. 43)	References to the provision of evidence that "fair and impartial' (p. 8, 1); acting with 'objectivity and impartiality' (p.8, 2); working according to 'established principles of the profession (p.8, 11); in respect of 'independence, impartiality and integrity' (p. 13,8); and providing 'objective, unbiased opinion' (p.43, 5c) need to be supported more in the document.	Liaise with the AFSP concerning their principles of 'balance, logic, robustness and transparency' and incorporate these in the code of conduct. This could be done in the section on validation of interpretive methods, starting on p. 28.	Group felt this was not required
51	13	4	11	proposition	hypothesis	Agreed; a strict definition has a hypothesis becoming a proposition in court
52	13	4	15	Disclosure rules	Freedom of Information Act subsection Disclosure obligations	Consider if further advice is needed
53	13	4	8	If a provider is expected to adhere to the code of conduct, why restate they need to adhere to it again here?	remove paragraph	Modifying clause included so disagree
54	13	4	11	This is a repetition of page 7 para 14	remove paragraph	Code of Conduct clauses under review; however, restating in context assists the flow
55	13	4	12	Isn't this covered by the code of conduct pages 6-7	remove paragraph	Code of Conduct clauses under review; however, restating in context assists the flow
56	13	4	10	Isn't this covered by all the other ISO standards that specify that organisations must procedures around non-conforming work, thereby making this requirement unnecessary to be restated here	remove paragraph	Group disagreed, but suggested 'having been' was better.
57	13	4	15	Is this necessary? Have already stated that organisations must comply with CJS (page 8 para 7)	remove paragraph	Retain

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
58	13	4	16	This is already covered in all the ISO standards regarding subcontractors	remove paragraph	Retain
59	13	Independence, impartiality and integrity	11	It would be expected that the expert would not only consider the original proposition but other possible propositions which could equally or better explain their findings. This would be true of the investigative phase of a case where the scientist would be expected to provide possible explanations for the findings. It does not apply to the evaluative phase where the scientist should be considering the probability of the findings given the specific propositions pertinent to that particular case (usually a pair of propositions - forwarded by the prosecution and defence). This is not a trivial point – I can imagine all sorts of confusion in the courtroom caused by a literal interpretation of this regulatory requirement.		Reworded
60	13	4	9	This appears to be a requirement to have a robust checking / peer review system which is covered elsewhere (pgs 19-20). The text does not instruct nor require anything of a practitioner or its employer, rather it is a list of threats to impartiality that is by no means exhaustive. The use of the term 'work' in relation to the sole reviewer is somewhat vague, are we referring to laboratory findings, or matters of interpretative opinion.	review whether needed	This was felt still required and should be built on to assist understanding and to ensure internal police provision is explicitly covered.

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61	13	4	12	The term due diligence is a legal term without definition here or context. If used - it needs to be defined in the glossary. In order for a value such as integrity to be demonstrated it needs to be measurable, how does a provider measure integrity - if the answer to that is through competence testing, peer review etc then this point is dealt with more effectively and with greater clarity elsewhere.	Delete	Clause deleted; requirements contained in the Code of Conduct which is restated at beginning of section
62	13	4	13	This is a very important point. I would also add that remuneration should not depend on the number of billable hours / products associated with individual scientists cases or for that of their team that they manage. For example the awards of bonuses to teams that generate income is a practice that would be highly questionable.	Add to text.	This was seen as a management issue so no change recommended.
63	13	14		The requirements should be readily and easily available.	These requirements should be added to this document or as an appendix	Footnote link
64	13	11		Other possible should be replaced by other reasonable. It is generally impossible to cover all possible propositions and even when possible it is extremely time consuming	Replace other possible propositions with other reasonable propositions.	Reworded

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
65	13	11		The word ‘proposition’ has a very specific meaning. It refers to the hypothesis being advanced by the prosecution or defence when a case comes to trial. The Courts have established that the scientist should not comment upon the likelihood or otherwise of a proposition (see Doheny and Adams ruling). To generate ‘propositions’ to explain findings would fall foul of this ruling.	We would suggest the following alternative wording for this section: When acting as an evaluator for the court the scientist should consider the findings in the light of the propositions being advanced by both prosecution and defence. When assisting the law enforcement agency in investigating an alleged offence the scientist must take care to consider all reasonable explanations for the scientific findings and, wherever possible, rank them in order of likelihood.	Reworded
66	13	4	11	‘Expert’ appears to be a title not defined anywhere	Define expert or amend reference	Glossary entry slightly modified; expert witness was defined and is what is meant
67	13	4	11	Conflation of the role of the expert as an 'investigator' and as an 'evaluator'. Investigators generate explanations. Evaluators consider the probability of the evidence given the prosecution proposition and the probability of the evidence given defence alternatives.	Replace 'which could equally or better explain their findings' with 'including those proposed by the defence, if any.'	Reworded to be more general
68	13	Business continuity	7	Should be removed as this is not clear as to what it is trying to convey.	Delete	Agree, deleted
69	13	Business continuity	6	Define how this should be tested. This should be defined more precisely.	Delete	Disagree, policy and procedure should define how it is tested. Table top exercise appears likely but a more elaborate test may be quite agreeable.
70	13	Confidentiality		Unnecessary [section] as this is referenced in guidance booklet for experts.	Delete	Disagree
71	13	Confidentiality	16	Remove and reference the guidance booklet for experts which provides rules on the disclosure of unused material	Delete	Disagree

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72	13	pages 8, 13, 43	1, 2, 11 (p. 8); 5c (p. 43)	References to the provision of evidence that "fair and impartial' (p. 8, 1); acting with 'objectivity and impartiality' (p.8, 2); working according to 'established principles of the profession (p.8, 11); in respect of 'independence, impartiality and integrity' (p. 13,8); and providing 'objective, unbiased opinion' (p.43, 5c) need to be supported more in the document.	Liaise with the AFSP concerning their principles of 'balance, logic, robustness and transparency' and incorporate these in the code of conduct. This could be done in the section on validation of interpretive methods, starting on p. 28.	Group felt this was not required
73	13		9	This is considered a very important point and its inclusion is welcome		Noted
74	13	14	general	Protective marking	for comment this document is not protectively marked should be Not Protectively Marked	As the final publication will be ISBNed this ought not to be required
75	13	15		Disclosure, this should be in accordance with guides and recommendations, these should be clearly referenced	Add reference	Agree
76	14	4.3		The heading document control states "4.3 Document Control" but there is no 4.1 or 4.2	renumber the heading (and subsequent/previous ones)	This was a comment from several individuals; the wording of G19 was recommended as it conveyed the message there ought to be gaps so something like "This document does not re-state all the provisions of ISO/IEC 17025 and laboratories are reminded of the need to comply with all of the relevant criteria detailed in ISO/IEC 17025. The clause numbers in this document follow those of ISO/IEC 17025 but since not all clauses require interpretation, the numbering may not be continuous." added to Preamble

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77	14	4.3		This whole section simply repeats requirements already covered by all the ISO standards and so is unnecessary	remove section	Disagree
78	14	4.4		This whole section simply repeats requirements already covered by all the ISO standards and so is unnecessary. Also use of phrases such as "may include but not limited to" are not used in standards as they are not specific and so it is not possible to ascertain if an organisation has complied or not. Therefore these types of phrases should be avoided.	remove section	Adds context, so disagree
79	14	4.5		This whole section simply repeats requirements already covered by all the ISO standards and so is unnecessary	remove section	Modifying clause included so disagree
80	14	4.4.2	k	In relation to human tissue, when samples are no longer required for police purposes consent is required to retain, store and use human tissue for scheduled purposes.	To include the requirement that whenever human tissue is no longer required for police purposes, the tissue cannot be retained and used for scheduled purposes, as defined in the Human Tissue Act 2004 (HT Act), unless it is in accordance with consent.	This is under exhibit disposal (5.8 12-14), internal reference added
81	14	4.3	1+2	These are lists of possibilities and therefore should be a guidance note and not part of the standard itself.		Group felt it assisted the reader and it should be retained; it was felt that as it was not exhaustive it ought to have the work 'including added.
82	14	4.3	1	organisation	Provider	Agree
83	14	4.3	2	superseded	obsolete	Agree, added rather than replaced
84	14	4.3	2	In to	into	Agree
85	14	4.3	1	Reference is made to 'The organisation …' whereas references elsewhere are the provider and/or practitioner	Amend reference to be consistent throughout the document	Agree

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
86	14	4.3		Should be removed as this is part of the 17025 standard.		Modifying clause (retention period) included so disagree
87	14	4.4		4.10 and 4.12 are missing from the document. Previous deletions are because these are already referenced in the 17025 standard and are not adding anything to the code. Duplication of the standard.		Numbering better explained in Preamble, disagree that context is not added
88	14	4.4		Delete because duplication of what is recorded in the standard re technical records. Could say that 'all work should be carried out in accordance with 17025 or the relevant standard'		Modifying clause included so disagree
89	14	4.3		Numbering out of sequence	update	Numbering better explained in Preamble
90	14	4.4	1,2,4	Is this too generic? This clause covers not only business tenders and agreements but requests for changes to treatment of exhibits. There could be a clearer break between the two subjects	Consider one clause specifically on business agreements and a separate clause on changes to work requests, discussed and agreed between IO and scientific staff	Not believed to be required at this time; however output from a planned December 2010 workshop on SIO and ROs may modify this stance
91	15	4.5		As things other than tests can be subcontracted this reference should just refer to subcontracting	Delete ‘of tests’	Moved from comment on contents - delete 'of tests'
92	15	4.6		This whole section has nothing to do with purchasing services or supplies and is only concerned with detailing the specification for kits. The specification of kits for DNA sampling has traditionally been the remit of the NDNAD Strategy Board. Has the FSR taken over this responsibility?	Remove section or at least redefine the title of the section	Agree with first point in part, section deleted
93	15	4.5.1		The sub-contractor should be subject to all the rules and regulations pertinent to main providers	Revise	17025 requirement already
94	15	4.5	1	Whether or not approval will be required should be part of the provider/customer contract and is not required here unless there is an absolute need for customer approval universally.	Remove – and approval may be required	Group felt it was required

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
95	15	4.5	1	May be required?	**Mus**t be received	Agree, redrafted and tightened
96	15	4.5	2	This is not at all clear		Reworded, 'the subcontracted provider must also be approved.'
97	15	4.6		Is this only for DNA kits?		It shouldn't be, but was seen as out of kilter with the rest of the document aimed at providers rather than kit assemblers so redrafted and main section removed
98	15	4.6		This section refers only the requirements placed upon forensic science suppliers who provide packaging to customers. In practice this requirement currently applies only to the Forensic Science Service. In our view this section should set the standards for packaging materials whatever their source.	Remove this section and replace with standards for item packaging	Remove 3-8 and specify the provider should define the quality
99	15	4.6	6	There will be duplication, and a risk of typographical errors and subsequent sample rejection, if the 'unique kit identification details' are put on each label. The unique kit identification details should just be recorded on the accompanying documentation as indicated in 4.6.5	Remove 'unique kit identification' from 4.6.6	Entire clause recommended for removal
100	15	4.5	1	'of tests' is superfluous	Delete 'of tests'	Agree
101	15	4.6	2	Providers will 'use' sample kits	Delete 'provide' and replace with 'use'	Agree
102	15	4.6	3	This section could be interpreted as referring to 'product certification' which is not the case	Ensure that it is clear that this requirement does not convey that the sampling kits have been certified	Section deleted
103	15	4.6	1	Purchasing services and supplies section title but content is only around packaging and kits	expand content	Unclear what else is needed, however Group recommended section should be deleted. A future PAS may be developed and may fill this gap.

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104	16	4.6	8	This is a requirement of all ISO management systems so does not require restating	remove paragraph	Section deleted
105	16	4.7	1	This is almost an exact copy of ISO 17025, so why restate it?	remove paragraph	Agree, consider removing and moving the remainder of the section to section on defence
106	16	4.7	2	This paragraph seems contradictory. The first part seems to list a possible example but then there is a mandatory requirement to have a defined policy and procedure. Are there other possible scenarios where an organisation must have a policy and procedure? Should an organisation have such a policy if their work would never fall in to this scenario? It also states that it must be "in accordance with the specific appendix" but there are no appendices and therefore it is not specified. How can any organisation claim compliance to this paragraph?	remove paragraph	Unclear how an organisation supplying forensic science services to the CJS would not have a disclosure requirement. However, other comments have led to a suggested reedit "2. The provider must have defined policies and procedures to facilitate access by defence examiners to carry out a review of the work already completed by the provider in the relevant case." Moved to be under defence examinations on page 47
107	16	4.7	3	This is already covered by previous paragraphs on confidentiality and impartiality and so is superfluous.	remove paragraph	Specific to defence examination, move to page 47
108	16	4.8	1 to 5	Complaint handling is a mainstay of all ISO standards - why respecify the requirement?	remove paragraphs	Has some modifying clauses, so recommend retaining.
109	16	4.8	2	What is meant by "significantly disaffected"? This needs to be defined so it is clear what is meant. One organisation may interpret this very differently to another.	define what significantly disaffected means	Modification to "2. The Regulator shall be informed about any complaint if it has significantly disaffected the customer such that it could attract adverse public interest or lead to a miscarriage of justice. " should add context

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
110	16	4.8	2	A conflict between legal confidentiality and the wish to bring cases of possible miscarriage to the regulators attention…[in]..an example of gross maladministration…I do not have..permission from those responsible for the case, to forward the details to the regulator, although I have asked to be able to.		This has been passed to the Regulator as it is also a Code of Conduct issue
111	16	4.7	3	Will the Regulator be issuing a list of approved "recognised and relevant professional bodies"?		No approval list planned
112	16	4.6	7a	Alternative systems using names or letters rather than numbers should not be excluded	Revise	Agree that other numbering can appear, however Group recommend deleting the section.
113	16	4.8		Some mechanism should be included for complaints by the provider against the customer	Additional paragraph	Not sure how, although certain areas do allow rejecting items etc.
114	16	4.7	2	Which appendix?		Agree, deleted
115	16	4.8	1	organisation	Provider	Agree
116	16	4.8	2	Timescale for reporting to regulator		Hard to define, would adding a time element be useful? This would be looked at during pilot.
117	16	4.8	3	organisation	Provider	Agree
118	16	4.7	1	We are concerned about how this is expected to work in the commercial environment in which providers now operate.		It is a 17025 requirement; however if the rest of section is moved then restating it is not required.
119	16	4.8	2		We suggest that the wording of this post should be revised to - ….significantly disaffected the customer such that it could attract adverse…..	Agree

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120	16	4.6	7	An audit undertaken on behalf of the Forensics Science Subcommittee of the FFLM has found that forms (e.g. FFLM FME forms) on which the practitioner records the information in 4.6.7 a-f frequently does not get sent to the scientist	Add a sentence to 4.6.7 say that the customer is responsible for ensuring that the completed forms (e.g. FFLM FME forms) accompany the samples to the laboratory	Under exhibit handling
121	16	4.8	1	Reference is made to 'The organisation …' whereas references elsewhere are the provider and/or practitioner	Amend reference to be consistent throughout the document	Agree
122	16	4.8		The sub-paragraphs would benefit from 'reordering' to follow the flow of complaint management	Reorder sub-paragraphs as follows 1,5, 6,3,4 & 2	Agree
123	17	4.8	5	This is merely comment and is in no way a code of practice.	remove paragraph	Agree it is, disagree on recommendation as it contains modifying text
124	17	4.9	1	This needs defining better as the wording is very open to interpretation, particularly terms such as "significantly disaffected"	reword paragraph or add definitions to phrases	Reedited to read "1. The Regulator shall be informed about nonconforming work if it has potential to significantly disaffect the customer, attract adverse public interest or lead to a miscarriage of justice. Examples of non-conforming testing which after investigation could require escalation to the Regulator could include, but is not limited to:"
125	17	4.9	2a	Errors in Proficiency tests would never fulfil the criteria set out in paragraph 1.	remove the example	Disagree, prof tests might if designed correctly

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
126	17	4.9	2	Section 2 does not define what is meant in section 1 as it is "not limited to". Such an open phrase allows wide interpretation of the significance of incidents. E.g. a contamination event - does the regulator need to know if one sample is affected and identified immediately or only where the contaminated result has gone on to be used in a case?	reword to be more specific to the circumstances when the FSR should be notified	The two clauses have been merged to add clarity and by preceding it with " informed about nonconforming work if it has potential to significantly disaffect the customer" should be clearer.
127	17	4.9	3	Already covered in all ISO standards	remove paragraph	Retained for completeness
128	17	4.13	15	Section numbering jumps from 4.9 to 4.13	renumber the heading (and subsequent/previous ones)	Numbering better explained in Preamble, disagree that context is not added
129	17	4.13.1		Already covered in all ISO standards and earlier in this document (section 4 para 14.	remove section	Neutral, retain
130	17	4.13.1		Retention of data is a huge area of confusion where both service providers and police customers are seeking guidance from the Home Office or MOJ, these codes provide no such guidance.	Provide advice or an appendix on data retention	Could be best included in the specific appendices
131	17	4.8.6		"Organisation" should be replaced by "Provider"	Change	Agree
132	17	4.13.2	1.a	Any CSI handing an exhibit recovered to another individual will record the date and time of the transaction as well as the individuals name / number	Add 'time' to list of technical records required.	Tend to disagree, SOPs can require other records these are the minimum (and accuracy of precision times of transactions may questioned)
133	17	4.8	5	judiciary	Judicial system	Wider, but Agree
134	17	4.9		Nonconforming testing/test/work		Clarify in Para 1

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
135	17	4.9	1	What does significantly affect the customer mean?	Clarify	Reedited to read "1. The Regulator shall be informed about nonconforming work if it has potential to significantly disaffect the customer, attract adverse public interest or lead to a miscarriage of justice. Examples of non-conforming testing which after investigation could require escalation to the Regulator could include, but is not limited to:"
136	17	4.9	1	Could use these factors to classify anomalies/complaints – category/priority		They could although no formal routine reporting requirement is recommended
137	17	4.9	2	Again this contained advisory info which would be better in a note rather than part of the standard itself		Believed to add context however modified to be clearer
138	17	4.9	2a	Setters expected results not met but labs expected results met		Agree, but no change recommended
139	17	4.9	3	Trend analysis key	Suggest add this in	Recommend adding "capable of being used to identify trends"
140	17	4.9		We suggest that point 2 becomes part of point one so that it is clear that they flow one to the other.	Combine points 1 and 2.	Agree
141	17	4.13.1		Agree with checks, however too prescriptive. Probably misses areas that require checking.		4.13.2 Para 13, recommend retaining

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
142	17	4.9	1-2	With regards to non-conformances in DNA work, this information, where applicable, is already reported to the National DNA Database. The concept is welcome, especially as we are not aware of such a practice in existence in all disciplines, but duplication needs to be avoided. Could a joined-up approach be considered for notification of a non-conformance i.e. a single point of contact that then notifies all of the relevant persons / bodies? Steps to avoid bureaucracy and duplication should be taken at all times. This point should also be considered with reference to P36 section 5.8 'Handling of Test Items'.	Consider a joined-up approach for notification of a non-conformance i.e. a single point of contact that then notifies all of the relevant persons / bodies	Noted, the Regulator could be such a person. Escalation requirements laid down here stand; the Regulator may wish to include any wider role in his Manual of Regulation
143	17			While understanding the need to align this document with ISO 17025, the numbering of sections and paragraphs within this version is misleading as it seems that sections are missing or excluded for whatever reason. A random example is Page 17 – the bold section numbering jumps from 4.9 to 4.13. A suggestion is to number all this document's sections and paragraphs separately but include the corresponding ISO 17025 section reference alongside where appropriate.		Point taken, however this was a policy decision partly based on not the fact it would not cover all requirements and this style of cross referencing might imply otherwise. However, clarifying text from G19 ought to assist the reader.
144	17	4.9	2a	Should clarify after a full investigation as there can be acceptable reasons for variance in performance.	clarify	Agree, text altered to "Examples of non-conforming testing which after investigation could require escalation to the Regulator could include, but is not limited to:"
145	17	4.9		Numbering 4.9 to 4.13	amend	Numbering better explained in Preamble
146	17	4.13.1	2	Records should be stored and disposed of in a manner	add stored	Agree

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
147	18	4.13.2	2	Already stated on page 7 para 12.	remove paragraph	Code of Conduct clauses under review; clause mentioned being considered for removal from Code of Conduct as it sits better in the Codes of Practice section
148	18	4.13.2	3	This is already covered in the ISO standards and page 7 para 12	remove paragraph	Code of Conduct clauses under review; clause mentioned being considered to removal as it sits better here
149	18	4.13.2	4	Already covered in ISO standards	remove paragraph	Agree, deleted
150	18	4.13.2	6&7	Already covered in ISO standards	remove paragraph	Modifying clause included so disagree
151	18	4.13.2	1f	Providing all telephone records is onerous. Perhaps only those with pertinent information or decisions should be recorded.	Revise	Amended, adding 'relevant' to the overarching clause and removing 'all' which could be misconstrued
152	18	4.13.2	1g	Unclear whether electronically saved material must be printed or whether it is acceptable to keep only an electronic copy.	Clarify	No requirement for printing, however need for later retrieval should also be considered.
153	18	4.13.2	1c	This sounds as if it is more related to general case information than technical records.		Agree
154	18	4.13.2	2	assumptions	Opinions/interpretations	agree
155	18	4.13.2	2	Where insufficient of the	Where **an** insufficient **quantity** of the	agree
156	18	4.13.2	5	Examination or test	Examination**,** test	agree
157	18	2	2	Is the use of the word assumption best?	consider interpretation	agree
158	18	2	2	where insufficient of the exhibit	incomplete wording amend	agree
159	19	4.13.2	8	Already covered as part of document control in ISO standards	remove paragraph	Disagree

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
160	19	4.13.2	11	Already covered as part of document control in ISO standards	remove paragraph	Adds context, so disagree
161	19	12		This requirement implies that calculations may be conducted using spreadsheets that have not been validated. If that is the case then it would be helpful if it were spelled out.		Clause is correct, if a spreadsheet is not validated then a second manual check is required and must be recorded.
162	19	footnote 15		This definition is different from the one included in the definitions section of this document (we contend that the one in the footnote is more appropriate but would not include the 'and' in 'and / or').		Agree, swapped
163	19	4.13.2	11	The wording of this section should be incorporated into any document created in the Fingerprint Peer Review piece of work to demonstrate consistency and compliance.		Noted
164	20	4.14		Already covered by ISO standards	remove section	Modifying clause included so disagree
165	20	4.14	2	Where has the 3-4 year cycle come from? Is this what UKAS recommend?	ensure this is compliant with UKAS expectations	Referred to UKAS representative; it is compliant.
166	20	4.14	6	We would not anticipate that any audit finding that 'cast doubt' on the validity of test results would immediately be dealt with as a non conforming test. Further investigation would be conducted to confirm the concern raised by the audit before being escalated to that status.	Add the requirement to conducting investigation before escalating.	Modified language under non-conforming test ought to address the issue.
167	21			There is no 5.1	renumber the heading (and subsequent/previous ones)	Numbering better explained in Preamble
168	21	5.2	5	Central part of ISO standards and so does not require repetition.	remove paragraph	Adds requirement, so disagree
169	21	5.2	6,7,8 & 9	Unnecessary to state. The ISO standards already state that organisation must have competent staff e.g. section 6.2.2	Remove section	Modifying clause included so disagree

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
170	21	5.2	5	This skill is not the same as others within the skillset of a forensic scientist and should not be treated as such. Appearing in court as an expert witness is not a skill that is measureable like others, there is no reliable standard for which one can acceptably draw a baseline for comparison. Subjective assessments of an individual should be avoided at all costs. It is not uncommon for the court to voice its concern over the behaviour and demeanour of experts and plenty have done so in the past (see judgement in R-v-Hoey para 63). But perhaps we should not only put the burden on FSPs but on the court in this regard by providing a better mechanism for all participants in the court to submit feedback / complaints.	Provide a mechanism for the court to feedback to the Regulator regarding an expert witnesses' appearance at court. Insist on mock court / external courses as part of scientist's continuing professional development but do not use it as a measure of competence, because it is not.	The Regulator will continue to look at any judgements with wider aspects, other escalation routes are outlined here. Requirement for mock courts is CPD so could be under training.
171	21	5.2	9	Is there any intention to stipulate the necessary experience or qualifications of trainers in this sector? Equally is there any intention to stipulate 'accredited' courses? Is there a preferred accrediting body (particularly now that the 'Forensic Skillsmark' accreditation is not available).		Not at this time
172	21	5.2	3	Why can't provider use regulators code of conduct – surely duplication		They may, or may wish it have a more expansive Code
173	21	5.2	9	Training before competence		Agree, move sections round
174	21	5.2	10	System = details of how competence is assessed, if lapsed or withdrawn how re-instated/regained.		For the provider to specify
175	21	5.2	5	We have attempted to address this matter within the Forensic Science Service and the practicalities and cost are major stumbling blocks in the implementation of such review. We suggest that this requirement might be better positioned as one of ongoing personal development than one of performance review.		Requirement for mock courts is CPD so could be under training; editorial group recommend it remains with-in competence

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
176	21	5.2	8	Comply is the wrong word in this context	Replace ‘comply’ with ‘utilise’	Agree
177	21	5.2	-	this area should be removed, as personnel already described in 17025 and also the ILAC guidance. Include reference to these documents.		Adds context, so disagree
178	21	5	1	Numbering out of step	amend	Numbering better explained in Preamble
179	21	5.2	8	Wording on compliance with National Occupational Standards could appear to be restrictive	Consider wording to reflect compliance with NOS and/or to a higher standards already assessed by UKAS	Replace ‘comply’ with ‘utilise’
180	22	5.2	9	Unnecessary to state. The ISO standards already state that organisation must have competent staff e.g. section 6.2.2	Remove section	Disagree
181	22	5.2	10	Already covered in ISO standards regarding the retention of records. Is the requirement to store training records "long Term" in line with DPA legislation regarding employees? Surely if an organisation has procedures to ensure competence of staff carrying out work, why do the actual training records need to be kept "long term"? What is meant by long term?	Either remove section or define "long term"	Long term removed, in line with that of case files inserted
182	22	5.3		All this section is already covered by the ISO standards, this document adds no extra value	Remove section	Adds context, so disagree
183	22	5.3.1.a		Positive pressure cabinets or rooms must be available to prevent contamination	Add within existing brackets; also delete "and" before "to carry"	Disagree; appropriate pressure labs may be required (i.e. not positive pressure in amplified DNA areas)
184	22	5.2	9f	Also agreement by individual and line manager		Not clear if required, believed to be management issue

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
185	22	5.3	1b	gunshot	Firearms discharge	Agree
186	22	5.3	1b	Different format from a and c-f	Remove 'is intended' and make new sentence starting, 'This includes...'	agree
187	22	5.3	1b	Accelerant and fire scene debris examinations to be separated		Not generally wishing to increase such lists, but important included on this occasion
188	22	5.2	10	Duplicate, therefore remove. This is included in the standard and ILAC. Remove the NOS as this provides no added value to the quality of work conducted by providers.		Disagree, retention in line with case file additional to ILAC etc.
189	23	5.4		no 5.4.1	renumber the heading (and subsequent/previous ones)	Numbering better explained in Preamble
190	23	5.4.2	1 to 3	Section is called "selection of methods" but has little to do with selecting a method. Para 1 & 2 are covered by the ISO standards and para 3 is unclear as to its meaning and refers to a non existent appendix	Remove section	Points out that methods selected need to be validated and Para 3 is non-existent
191	23	5.4.5		Where are sections 5.4.3 & 5.4.4?	renumber the heading (and subsequent/previous ones)	Numbering better explained in Preamble
192	23	5.4.5		This section adds nothing more than is already included in the ISO documents. Also there are references to appendices that do not exist	remove section	Disagree
193	23	5.4.5	5	A flow chart, or cycle would assist understanding that there are feedback loops here (comment from DFSG)		One has been drafted, however level of detail in this document may add little - a guidance document however may be more suitable

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
194	23	5.4.5	4	Consideration should be given to the requirements of the HT Act if human tissue is used in validation studies. In many laboratories samples for research and development are obtained from staff or from surplus tissue.	The validation policy should include the need for compliance with the HT Act when human tissue is used in validation studies.	Agree with the requirement, referenced under the validation plan section
195	23	5.3	3	Testing of consumables is not really environmental monitoring. You cannot environmentally monitor staff.	Change to '..work areas'. Insert section 5.3.5 stating 'Staff and visitor DNA databases must be maintained and any unexpected profiles found in casework screened against them.'	Agree
196	23	5.3	2	This needs to also state that visitors who have handled firearms within the recent past must not be allowed into FDR labs and police officers or others who regularly handle drugs must not enter drugs laboratories.		Agree
197	23	5.4.2	1	Not definite enough.	Change 'is' to 'must be'	Partially agree, however clause must not exclude use of experimental techniques in exceptional circumstances
198	23	5.4.2	2	Verification is a more relevant term here	Change 'validation' to 'verification'.	Partially agree; however verification will require validation steps completing so the text is trying to prevent the two being seen as separate.
199	23	5.4.5	4	'should' is not a requirement	Replace 'should' with 'shall'	Agree
200	23	5.4.5	5	The wording 'shall generally ..' dilutes the requirement	Delete 'generally' and insert 'where relevant' after 'to include'	Agree
201	23	5.3	3	Define what is acceptable...		Acceptable is user defined and specific to casework and process
202	23	5.3	3	Should be 'appropriate contaminants' relevant to the exhibit being examined.		Agree, text included in redrafted 5h
203	23	5.4		numbering out of step	amend	Numbering better explained in Preamble

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
204	24	5.4.5	7	The end-user is described as being the CJS and for which the needs have to be determined. It is not clear the extent to which a provider would be expected to go to determine CJS needs	Clarify meaning and/or intent of requirement	Added clarifying text "8. The amount of direct input from the CJS end-user should be determined by the provider based on the type of innovation; certain requirements may be generic and form a set of core requirements to the casework type."
205	24	5.4.5	7-11	This is not manageable or indeed auditable. This should be removed from the code.		Unclear how defining an end-user requirement is unmanageable although agree it is descriptive of how to get to clause 12.
206	25	5.4.5.12.b		Very important point since some methods require specialists of many years experience. Such practitioners should be tested by peers. Point 12.b seems to cover only relatively simple methods. Some disciplines have complex tasks for interpretation within the whole procedure.	Consider making more explicit comments.	Agree with point made, but believe it is suitably explicit
207	25	5.4.5.13.b		Some fields of study engage models and hypotheses which are adequate for some purposes but not appropriate for forensic application. It is imperative that the practitioner is aware of current findings and new ideas and, preferably, be an active author in the field.	Insert at the end "in the forensic context".	Agree
208	25	5.4.5	11	Do we need to ask the customer their intentions with our new methods?		If a method is developed to be used directly by the customer then the customer will need to ensure the validation is fit for the purpose they put it to. New methods need to meet the customer requirement, although in practice the transparency of what the technique will do and will not do should normally suffice

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
209	25	11		The end users requirement shall be written as a detailed specification for the method….. It is not clear if the end user is the customer or the provider. If the intent is the customer the customer will not be in a capable position to comply	consider clarity	Section retitled and end stage is clause 12
210	26	5.4.5	22	It is not clear what the acceptance criteria are or how they should be measured.	Clarify.	New text added "23. The acceptance criteria should be clearly stated based upon the specification, the risk analysis and any control strategies put in place to control identified risks. 24. The acceptance criteria shall be used to demonstrate the effectiveness of the method and control strategy with-in measurable and set tolerances."
211	26	5.4.5	18	Show the customer method development and validation work?	Remove – Seldom done	Where 'appropriate', so perhaps it is seldom appropriate however the clause is to ensure the end-user and or customer knows what it is the method will and will not do.
212	26	5.4.3	22	Needs clear info as to what might be required to be considered when considering and specifying acceptance criteria		New text added "23. The acceptance criteria should be clearly stated based upon the specification, the risk analysis and any control strategies put in place to control identified risks. 24. The acceptance criteria shall be used to demonstrate the effect
213	26	5.4.5	23	Development process	Development **plan** referred to on pg 24	Section deleted
214	26	5.4.5	18	'others who may have an interest' is a very open ended requirement.	Remove this phrase.	Agree

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
215	26	5.4.5	16	Far too prescriptive. Suggest use of FMEA as part of the initial validation /qualification.		A failure modes and effects analysis (FMEA) would be appropriate, but prescribing its use may be to restrictive and fault tree analysis (FTA) might be a better approach or also required. Will consider look at ensuring compatibility in redraft.
216	26	5.4.5	22	This is part of the development process. Suggest that this is part of the 9001 planning process. This is a duplication of this.		9001 is not specified in this Code
217	26	5.4.5	16 & 22 & 23 & 25	Link between the risk assessment process and mitigation in the design of the method and definition of the acceptance criteria	Suggest a paragraph in one of those sections or split between them: "The development of the forensic science process and the subsequent validation shall set out how the identified risks are being addressed and how the effectiveness of the action will be tested along with the end-user requirements."	New text added "23. The acceptance criteria should be clearly stated based upon the specification, the risk analysis and any control strategies put in place to control identified risks. 24. The acceptance criteria shall be used to demonstrate the effectiveness of the method and control strategy with-in measurable and set tolerances."
218	27	5.4.5	30b	For measurement based methods the equipment MUST be calibrated	Remove 'where appropriate'	Equipment providing measurement data should be calibrated, but the view was that this was not all equipment (can a laminar flow cabinet be calibrated, or simply checked it is operating as expected?)
219	27	Footnote 20		For use casework	For use **of** casework	Agree
220	27	5.4.5	31m	This is specified in 17025 and ILAC. There are numerous guidance documents - e.g. 5725		Noted

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
221	28	5.4.5	32c	Will the Regulator be issuing a list of approved "recognised and relevant professional bodies"?		No plans to do so
222	28	5.4.5	31l	Different disciplines working on the same sample have different sampling techniques. If there is any possibility of compromising the sample, the discipline whose sampling technique is able to provide material for all concerned should be adopted	Consider revision.	Agree certain sequential considerations ought to be made, not sure how to add it to this text
223	28	5.4.5	31m	Limitations may vary in different situations.	Insert after "applicability": "in the particular situation".	Here m. limitations of applicability is meant to prompt a statement of what they are, or the scope of the validation.
224	28		Footnote 21	Identifications & comparisons, presumptive tests & microcrystalline tests are not equivalent to interpretation. They are simply recognition or taxonomic skills rather than interpretive skills.	Differentiate between interpretation and identification or simple testing for presence/absence.	Footnote shortened
225	28	5.4.5	32d	Remove design		Design included in clause as in house testing can not be performed in the validation stage, but it can be required to be designed/specified etc.
226	28	33		This section seems to be making a distinction between 'interpretive' methods and presumably non interpretive (scientific?) methods. If this is the case then it is a very important distinction that needs much more discussion and defined in the COP. There would be major implications if the Regulator Code of Practice promoted the view that certain types of traditional forensic science were not scientific.		It was a change from subjective and objective - group still consider that it is better than quantitative and qualitative
227	28	5.4.5	32	Require mention of validity: the method has to do what it claims to do. What it actually does may not be correct: it may be reliable but wrong.	Insert: 'valid' between 'reproducible' and 'reliable' in line 5.	Agree
228	28	footnote 21		'comparison' requires appropriate statistical procedures	Add phrase 'including appropriate statistical procedures' at the end of the sentence.	Footnote tightened to microscopic comparisons although others may apply

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
229	28	5.4.5	32	Title: Wrong - should be qualitative. Could be misleading.		It was a change from subjective and objective - quantitative and qualitative may be better
230	29	5.4.5	38	Covered by 9001 - suggest that this is reduced to one paragraph to simplify. Reference existing validation documents.		Not clear how 9001 fully covers clause
231	29	5.4.5	39f Footnote 22	Remove as already included in 17025 in terms of technical records and validation section.		Neutral, retained from previous draft to assist reader
232	30	5.4.5.43		The validation details and data are sometimes unlikely to be fully appreciated by the end user & CJS. These should be appraised by another leading specialist in the UK or abroad. The end user and CJS can get an opportunity to comment if a draft report is submitted. This often happens	Revise.	Clause 44 is intend to cover point raised - suggest combining 43 and 44 to strengthen clause
233	30	5.4.5	44	Not commercially viable.		Higher risk methods that are likely to attract challenge once implemented should be considered for escalation and scientific methods released that surprise the CJS tend to damage commercial interests rather than protect them
234	30	5.4.5	46	Is this a duplication? Very prescriptive. Suggest simplify. Could also be covered by 9001 re approval of a method at the planning stage. Could reference the 9001 standard.		9001 is not directly required by the Codes
235	31	5.4.5.47		The provider should not be the one to submit a report to an independent reviewer. This could lead to corruption. The independent reviewer should be chosen by the Regulator on the advice of other specialists in the field.	Revise.	The clause is not intended to imply that the reviewer need be independent in that sense (see 40), footnote 23 covers the point and clause 43/44 requires escalation. Text could be harmonised to reflect that point.

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
236	31	5.4.5.51		Insert a separate category in the list of examples to allow for previously published scientific, peer-reviewed, work.	Insert "copies of peer-reviewed scientific publications".	Covered in validation report
237	31	5.4.5	47	Independent review by whom? For all methods? Competition barrier to this? Or do you mean by UKAS		The clause is not intended to imply that the reviewer need be independent in that sense (see 40), footnote 23 covers the point and clause 43/44 requires escalation. Text could be harmonised to reflect that point.
238	31	5.4.5	48	Means of accessing the records	Does this mean software/equipment to be retained for 30yrs – not practicable	Wider question; are records required to be accessible and if so how
239	31	5.4.5	49	This can be within the validation document so not controlling two documents		Agree, it could be within but should be in this format as it will also need to standalone
240	31	5.4.5	51		Add as e – 'A statement of fitness for purpose signed by the staff member(s) carrying out the validation, the manager of the unit which will use the method and the quality manager, or other approved staff with the relevant technical knowledge and management authority'	Tend to agree, however 'approval by the provider must be clear' is already a requirement.
241	31	5.4.5	49	Duplication of effort. Does a validation report not cover this? Too prescriptive! -'no more than two sides of A4 paper in plain language'.		The validation report and any summary will no doubt be longer than 2 sides; this is a statement of fitness for purpose for the CJS
242	32	5.4.5.52		"and extensive and appropriate reference collections where identifications or comparisons are involved".	Insert between "documents relevant".	Agree, appropriate text inserted covering issue raised should be inserted as a separate paragraph

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
243	32	5.4.5.55.b		For certain specialised disciplines and techniques, this needs to be carried out by outside specialists rather than the provider.	Add this caveat.	Agree that it may require external training but this is sourcing issue so no caveat included
244	32	5.4.5.55		This section requires an entry in relation to reference collections.	Insert new item: "The authentification of reference materials used in comparison work (e.g. reference microscopic preparations).	Agree, however "h. the supply and traceability of any standards/reference materials;" covers the topic
245	32	5.4.5	55	When a new technical procedure is introduced which is better than previous techniques or allows new analysis, there is the double edge sword of opening up opportunities for cold case reviews as well as potential appeals.	Add to list 'x. where the revised or new method offers new analytical opportunities, the benefit (or otherwise) of revisiting old cases should be explored and if relevant communicated to the customer'.	Inserted: a. if revisiting old cases should be explored where the revised or new method offers new analytical opportunities and if relevant communicated to the customer the benefit or risks;
246	32	5.4.5	52	Don't recognise the need for this section covered already		Points are covered, collation is the requirement
247	32	5.4.5	Footnote 25	Suggest that a robust development process is constructed which will include all these requirements. Again too prescriptive.		So it should, but the note is to ensure that providers who try to hide behind commercial-in-confidence are clear that the evidence may be excluded and the customer disaffected
248	33	5.4.6		Already covered by ISO standards	remove section	Agree, as drafted it adds nothing a reference to M3003 appendix N may assist

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
249	33	5.4.7	1 to 10	Already covered by ISO standards regarding document control and control of data, as well as being covered by other sections of this document	remove section	It is covered, but no requirement to have the other ISO standards. An organisation may choose to have these ISO standards as well as ISO 17025
250	33	5.4.6	1	Current paragraph adds nothing to ISO 17025, measurement of uncertainty is unfamiliar to many	Replace with a reference to M3003 appendix N	Agree, as drafted it adds nothing a reference to M3003 appendix N may assist
251	33	5.4.6	1	Estimation of uncertainty of measurement	Estimation **measurement uncertainty**	Title as ISO 17025
252	33	5.4.7	6	See comment on pg 31 point 48		Wider question; are records required to be accessible and if so how
253	33	5.4.6	1	This is important yet only covered by two lines. This is one area where guidance or reference to suitable documents would be useful.		Agree, as drafted it adds nothing a reference to M3003 appendix N may assist
254	33	5.4.7	7	How is this done. What methods should be considered.		If retention is required then persistent accessibility is required, how this achieved is for the provider to decide
255	34	5.4.7	14	Is it realistic to expect small companies to be able to have off site back up systems?	consider if the requirement needs to be as prescriptive as it currently is	Agree in part, insert "suitably" to separate and secure location to allow same site back-up but suitably removed to reduce the same calamity affecting both copies.
256	34	5.4.7.14		Make clear whether separate and secure locations can be in the same building or must be on a different site.	Clarify.	Agree, insert "suitably" to "separate and secure location" to allow same site back-up but suitably removed to reduce the same calamity affecting both copies.

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
257	34	5.4.7	8	This relies on suitable equipment/IT infrastructure being available to access the data. Some technical areas (e.g. DNA have gone through several generations of equipment and software in the past two decades and older versions of the IT equipment e.g. tape drives can no longer be repaired. Older versions of the software are no longer supported. It is extremely difficult to guarantee compliance with this section, however best efforts should be made.		If retention is required then persistent accessibility is required, how this achieved is for the provider to decide
258	34	point 8	2	The provider is at the control of the 3rd party supplier if there is no upward compatibility to next release software	for comment and applicatability to suppliers of equipment and software to providers	If retention is required then persistent accessibility is required, how this achieved is for the provider to decide
259	35	5.4.7	17	This has already been specified in section 5.4.5	remove section	Agree the validation section does require validation, inclusion here to ensure it is not missed.
260	35	5.4.7	18 p and r	duplication		Agree, delete p (it is in validation too)
261	35	15		Could it be clarified as to whether the requirement arising out of this point would be for providers to have a documented process for the development of databases? We currently do not have such a document and are not clear on what such a document would be expected to contain.		Understanding the impact of a judicial rulings etc is part of the CJS requirement
262	35	5.4.7	17	Delete		Disagree
263	35	5.4.7	18s	Too much details and no coverage on how to do it. How do you validate a database?		Anything with a defined specification can be validated to that specification.

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
264	35	5.4.7	18	Remove as this is a duplication of the standard.		Agree
265	35	5.4.7	15	Suggested cross reference to section 5.9.10 (p39) elimination databases. Is it possible to expand on the information about the setting-up and management of elimination databases?	Cross reference to section 5.9.10 (p39) elimination databases	Reference added earlier in the doc
266	36	5.5		Already covered in ISO standards and earlier sections regarding validation, why restate?	remove section	Neutral, does however remind about configuration control
267	36	5.5	5	Covered by HMG security policy which already a requirement, so why restate?	remove section	More specific that the policy
268	36	5.6	5.6.3.3	Numbering is again awry. Paragraph does not relate to either headings for this section. Section is also already covered by ISO standards so there is no need to repeat	remove section	Disagree
269	36	5.8		no 5.7?	remove section	Numbering better described in Preamble
270	36	5.8		Wouldn't this be better listed in section 4.9?	incorporate section 4.9	This is appropriately positioned where the item would be looked at and as it has checks and balances prior to escalation it is deemed correct. A suggestion that the Customer ought to be informed first, however the suggestion is this includes at receipt, presumably from the Customer, and it is deliberate attempt to influence results it is appropriate.

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
271	36	5.6.3.3	1	The verification of an out of date standard will not give any information regarding its future life expectancy. It may be possible however, by retaining and checking out of date standards and checking them against current ones, to re-evaluate the expiry dates for future use.	End sentence at ‘expiry date’.	Group disagreed
272	36	5.8.1		Such events can be very difficult to handle. At the very least there should be a requirement for the customer to be involved in the investigation before the issue is escalated to the Regulator.	Add the requirement for the customer to be involved in the 'investigation'.	This includes at receipt, presumably from the Customer, and as post investigation it is believed to be a deliberate attempt to influence results it thought to be appropriate that the Regulator is informed.
273	36	5.6.3.3	1	In the incorrect section. Also covered by the standard and ILAC.		Group disagreed
274	36	5.6	5.6.3.3	Numbering out of step	amend	
275	37	5.8	2	As this list is "not limited to", it leaves it up to two parties to come to their own conclusion. In a supplier / police relationship, it would be unlikely for a supplier to reject something from a police force unless it is explicitly stated they shouldn't otherwise the police force may see this as a supplier being difficult and so could jeopardise the relationship and so ultimately future contracts.	Specify the exact circumstances in which an exhibit must be rejected by a provider/supplier	once built into a policy or procedure should provide sufficient cover to reject items where continuity can not be demonstrated. The group felt that the policy for dealing with 'recoverable' irregularities and recording rejections which were not recoverable was appropriate and in line with real activity in forensic science laboratories.

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
276	37	Case assessment and prioritisation	5	1. Prior to commencing work the provider shall, in consultation with the customer, identify the issue(s) in the case, develop an appropriate examination strategy and agree the timescale for the delivery of the results. This may be in an overarching SLA / Contract for more routine casework. 2. In developing the examination strategy.....	I hope there is recognition by the Regulator, courts and external auditors that the current forensic science environment does not encourage such dialogue and agreement. Whilst we would agree with the sentiment of this requirement forensic science suppliers are increasingly being treated as testing houses with the customer being very prescriptive about what should be done.	Most of this is from Skills for Justice CN702, the group felt that the "overarching SLA/Contract for more routine casework" would make allowances for testing house work as well as this approach.
277	37	5.8	2	Should be a risk based	Should be a documented risk based	Tend to assume all procedures are documented, but can a in.
278	37	5.8	2 e	Appropriate control samples not submitted		Agree
279	37	5.8	3	The return of unsuitable exhibits should be discouraged as this may lead to re-labelling or repackaging of items which are unsuitable for examination or are contaminated. It is better to accept these items and document the reason for not examining in the statement/report. This can prevent actions out of the control of the forensic supplier being a risk to the CJS.	Change to ‘If a supplier is unable to examine an item due to two of the above then the reason should be included in the statement/report.’	The group felt that the policy for dealing with 'recoverable' irregularities and recording rejections which were not recoverable was appropriate and in line with real activity in forensic science laboratories. The comment was that no report or statement would exist if nothing was examined, and if unused material it would be detailed there.
280	37	5		Case assessment and prioritisation, it is noted that this process involves two parties the provider and customer and as such will be constrained by the customer/supplier relationship	for note only	Noted
281	38	5.8	8	Insufficient of the exhibit	Insufficient **quantity** of the exhibit	Agree

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
282	38	6.b and c		Whilst we would agree with these requirements the current customer / supplier relationship does not, in many instances, promote such dialogue. The onus on ensuring that the right items are examined, the right information is provided and item integrity has been maintained should not fall solely to the practitioner but is a shared responsibility for those involved throughout the supply chain.		Agree, some more onus on customer would be useful. However, it is also felt that required dialogue ought to occur as part of "12. Prior to commencing work the provider shall, in consultation with the customer, identify the issue's) in the case, develop an appropriate examination strategy and agree the timescale for the delivery of the results"
283	38	5.8	6d.	Important part of the strategy. Requires more explanation and guidance. How should people approach it?		See CN 702
284	38	5.8	6	It will be interesting to see how this will happen when the examination is done partly in force and then passed onto an external body for further examination, often for a different discipline. Hopefully, it will encourage an increase in dialogue and consideration of other forensic disciplines.		Noted

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
285	38	5.8	7	Section 5.8 is light on specific requirements and/or a clear statement around continuity - suggest adding this section:	The provider shall ensure that exhibit handling policies and procedures address continuity requirements including but not limited to: - That the exhibit or sub-sample can, at all times when in the possession or control of the provider, be uniquely identified; - That the exhibit can be conclusively shown to be the exhibit submitted to the provider; - Any material recovered from an exhibit or subsample of an exhibit can be conclusively linked to the exhibit or sub-sample from which it came; - Any results can be conclusively linked back to the exhibit or sub-sample from which it came; and - The provider can show whether the exhibit was retained, returned to the organisation that submitted it or destroyed.	Agreed, with minor alteration
286	39	5.8	10 & 11	Much of this is covered by the section on accommodation and/or ISO standards	consolidate the contamination and environmental/accommodation sections in to one section for ease and clarity	Aspects could be transferred e.g. 10, 11
287	39	5.8	9d	establish	establish**ing**	Agree

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
288	39	5.8	9e		Add in preventive actions	Contamination section moved. Agree, however HACCP seven principles used so "e. establishing preventative and corrective actions (e.g. when acceptable or control limits are found to be exceeded);"
289	39	5.8	11d	Testing of consumables from reputable suppliers is a waste of time, consumables and effort as contamination issues have been shown to be in the region of 1:10,000 or less frequently. The likelihood of finding these contaminated consumable by pre-use testing is infinitesimally small.	Change to 'testing before use of standards, record keeping of batches of consumables and reagents in all areas of the examination/analytical processes and where appropriate [add current paragraph here]	Agree
290	39	5.8	11e	Don't think this GLP should be included.	Would do this anyway (obvious)	Agree, could be removed, currently retained
291	39	Note 31		All samples from humans should be treated as if from infected persons (until the contrary is known)	Delete 'from persons suffering from infectious diseases'	Agree
292	39	5.8	10	Simplify 10 and 11. Too complex and too prescriptive		Looking at merging with 5.3, however the need for the following doesn't appear overly prescriptive: a. reporting policies; b. data formats; c. searching procedures and algorithms; d. retention periods; e. sharing agreements (i.e. between laboratories/providers); f. agreements/consents; and g. release forms.

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
293	40	5.9		Already covered by ISO standards	remove section	Agree it is covered, however restating it to ensure the requirement is not overlooked
294	40	5.9.1		This should be done by an external agent to obviate any bias or collusion.	Make clear the need for external involvement.	Believe it is clear all schemes should be investigated/considered in this clause
295	40	5.8	12	There is no reference to the HT Act. Other requirements such as Health and Safety and Home Office guidelines are referred to in para 14.	Special consideration should be given to the return or disposal of items containing human tissue.	17. The nature of forensic science is such that providers will deal with material which is subject to legal control or prohibition on possession, production or use. Policies covering such exhibits should reflect any legal control or prohibition covering retention, returned to the organisation that submitted it or destruction. Examples of such exhibits include, but are not limited to: a. human tissue; b. drugs; c. section 5 firearms; and d. indecent images of children.
296	40	5.8	14	exhibit	exhibit**s**	Agree
297	40	Note 39		ISO Guide 43 has been replaced with ISO/IEC 17043	Replace reference to ISO Guide 43 with ISO/IEC 17043	Agree, ILAC-G13 amended too but note overlap
298	40	5.8	14	Covered by ACPO memorandum of understanding, therefore include reference and simplify.		Agree it is, although level of detail on HOCs is not there.

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
299	40		Foot note 38 + 39	ISO/IEC 17043:2010 is a replacement for ISO/IEC Guide 43:1997	Replace with new reference	Agree change
300	40	5.8	12		opportunity to refer to Human Tissue Act	Agree
301	41	5.10.1	4	Already covered by requirements regarding competency so need to restate	remove paragraph	Disagree
302	41	5.10.2	1	Already covered by requirements regarding competency so need to restate	remove paragraph	Disagree
303	41	Reports and statements to the CJS	1	Providers shall ensure that all staff who provide expert evidence based on scientific methodology are additionally able to demonstrate, if required, that: □ the margin of error associated with the application of and conclusions drawn from the principles, techniques and assumptions is known. **I can understand the margin of error associated with a test result but am not so clear on what that might mean for a conclusion – e.g. what would the margin of error be in relation to the evidential weight of a footwear mark comparison ?** 'Providers shall ensure that all staff who provide expert evidence based on their practical experience and/or their professional (non-scientific) knowledge are additionally able to provide': □ specific instances which support their claim to experience-based expertise or accepted professional practice and methodology resulting in demonstrably valid or erroneous opinion, and an explanation of how these have a bearing on the matter(s) in issue. **What is the definition of experience based expertise – it is a term that is not in the glossary?**	This bullet is not well written and like the others above has the potential for causing confusion if the requirement placed on the scientist is not clearly understood.	First point: Revised text to "e. the impact the uncertainty of measurement associated with the application of a given method could have on any conclusion." Second point, no fix suggested

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
304	41	5.9	3	The laboratory should only use its own methods in these exercises. If an exercise cannot be participated in using the laboratories own methods, then it is not suitable for checking the work of the laboratory and the laboratory should not participate in the exercise.	End sentence at '....shall be used'.	Agree, extra sentence to cover other types of trials and therefore for a different purpose
305	41	5.9	4		If lab does not meet the setters expected results the lab must instigate the non-conforming work procedure. Assess the potential impact on case results reported.	This is an additional point being suggested, cross referencing back to 4.9
306	41	5.10.1	1		Split sentence	Agree it is overly long, but could split into bullets if felt needed
307	41	5.10.1	3	Competence is surely a requirement for all types of reports (including intelligence)		Revised to read: "3. The reporting scientist shall be appropriately competent and have had sufficient involvement in the work carried out to meet any relevant requirements of the National Occupational Standards and CJS."
308	41	Footnote 43			Not currently done	Footnote is guidance, however the practicality of reporting on a case where the analytical section was 17025 but there was also expert opinion ought to be considered
309	41	Footnote 44		This footnote raises the same issue as 28/33 above. 'Interpretive' and 'experience' based seem to define the same thing. We also have concerns about the term 'experience based' in that it implies that the feature that assures quality in certain types of examination is experience - and we do not agree with that.		Agree, delete footnote

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
310	41	5.10.1	3	The wording appears to exclude defence work where there may have been little or no involvement in the work carried out to meet the requirements of the NOS and CJS	Reword to be inclusive of defence 'experts'	Defence experts will need to meet the requirements of the CJS (e.g. CPIA); however, a minor amendment may help to "3. The reporting scientist shall be appropriately competent and have had sufficient involvement in the work carried out to meet any requirements of the CJS and relevant National Occupational Standards"
311	41	5.9	3	This is covered by ILAC and the 17025 standard. Remove.		Agree it is, included for completeness and to assist the reader
312	41	5.10.2/3		This might need amendment for Scotland and will certainly need discussion with COPFS.		Noted
313	41	5.10.1	3	NOS needs to be in capitals	Capitals for NOS	Agree, National Occupational Standards
314	42	5.10.2/5.10.3.2b		Explain what part 33 of the Rules 2010 are in a footnote or appendix.	Add footnote or appendix.	Footnote added
315	42	5.10.3	2b		Add to references	Reference added in footnote
316	42	5.10.3	2e	Margin of error	Measurement uncertainty	Agree
317	42	2c		This requirement raises the same issue as described in 13/11 above.		Noted

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
318	42	3d		Rather than ‘erroneous’ we would suggest ‘misleading’.	Replace 'erroneous' with 'misleading'.	Agree
319	42	5.10.2/5.10.3	1	'comprehensible to a lay person' but it also has to be correct!	Reword as 'comprehensible to a lay person and not misleading'	Agree
320	42	5.10.2/5.10.3	2b	Why 'and / or'? How much do the CPR say about 'validity'?	Replace 'and/or' with 'and'	Part 33.3 clauses mirror that of validation protocols only focussed on the practitioner not the method. Alternative change suggested as b. that they have complied with part 33 of the Criminal Procedure Rules 2010 and the principles, techniques and assumptions they have relied on have are valid;
321	42	5.10.2/5.10.3	2c	See the comment immediately below about p. 13, para 4.11. Explain distinction between 'explanations' in the investigative mode and 'propositions' in the evaluative mode. Reference to the AFSP principles somewhere would be useful.	Insert between 'alternative explanations' and 'have been': 'in the investigative mode and alternative propositions in the evaluative mode'	Agree
322	42	5.10.2/5.10.3	2e	There is a current debate about the role of margin of error in association with likelihood ratio assessments. The situation in which 2e applies needs to be clarified. The likelihood ratio is the best single estimate of the value of the evidence.	Insert 'where appropriate' between 'that' and 'the margin of error'	Agreed, with minor alteration using previously used term "uncertainty of measurement"
323	42	5.10.2/5.10.3	3d	This is not well-written. 'support or undermine' would help. Can specific instances ("I've been right three times so far") really say anything about whether the expert can consistently do what they claim to do? 'Demonstrably valid' has to mean more than the defendant was found guilty.	Insert 'or undermine' between 'support' and 'their claim'	Agree
324	42	5.10.2/5.10.3	4	All covered by CPS guidance. Suggest reference to relevant documents only.		Agree it is covered, however restating it to ensure the requirement is not overlooked

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
325	42	5.19.2/5.10.3	2b	It has been commented that it currently could read as if validation has precedence over part 33 CPR which was not the intention; something could be validated and still fail to meet 33 CPR.	b. that the principles, techniques and assumptions they have relied on comply with part 33 of the Criminal Procedure Rules 2010 and the validation status of the techniques.	Suggested text: "that they have complied with part 33 of the Criminal Procedure Rules 2010 and that the principles, techniques and assumptions they have relied on are valid" (alternative may be "the validation status of principles").
326	43		1, 2, 11 (p. 8); 5c (p. 43)	References to the provision of evidence that "fair and impartial' (p. 8, 1); acting with 'objectivity and impartiality' (p.8, 2); working according to 'established principles of the profession (p.8, 11); in respect of 'independence, impartiality and integrity' (p. 13,8); and providing 'objective, unbiased opinion' (p.43, 5c) need to be supported more in the document.	Liaise with the AFSP concerning their principles of 'balance, logic, robustness and transparency' and incorporate these in the code of conduct. This could be done in the section on validation of interpretive methods, starting on p. 28.	AFSP document is not in public domain also R v T may have impact
327	43	pages 8, 13, 43	1, 2, 11 (p. 8); 5c (p. 43)	References to the provision of evidence that "fair and impartial' (p. 8, 1); acting with 'objectivity and impartiality' (p.8, 2); working according to 'established principles of the profession (p.8, 11); in respect of 'independence, impartiality and integrity' (p. 13,8); and providing 'objective, unbiased opinion' (p.43, 5c) need to be supported more in the document.	Liaise with the AFSP concerning their principles of 'balance, logic, robustness and transparency' and incorporate these in the code of conduct. This could be done in the section on validation of interpretive methods, starting on p. 28.	AFSP document is not in public domain also R v T may have impact
328	43		5	The template for fingerprint statements that was published by the Fingerprint Evidence Standards National Project Board at the time of the change from a numerical standard for fingerprints will need amending to include the information required in this chapter. Even if accreditation is not mandated for Fingerprint Bureaux, we believe that this should take place to ensure consistency for court personnel to understand.		Noted

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
329	44	5.10.2/5.10.2	6	1. The expert practitioner shall also provide in their report or statement, in addition to complying with the requirements at **5.10.2/5.10.3**: c. the identity, **qualifications, relevant experience and any certification** of the person who carried out the examination, measurement, test, etc.; d. details of any statements of fact, **literature or other information** upon which they have relied, either to identify the examination or test requirements, or which are material to the opinions expressed in the report or statement or upon which those opinions are based; g. where there is a **range of opinion** on the matters dealt with in the report or statement, a summary of the range of opinion, and reasons for the expert's own opinion;	I have highlighted some pertinent text in bold. Point c. This seems to have implications for disclosure protocols. Is this really additional information, in addition to that already provided in the FER really required or has it been added by someone who thinks it would be nice to have without thinking through the implications for providers? Point d. This is an open ended requirement - what can reasonably be expected of the scientist really needs clarification. Point g. As point g above. What can reasonably be expected of the scientist?	CPR (2010) 33.1.—(1) An expert's report must— (e) say who carried out any examination, measurement, test or experiment which the expert has used for the report and— (I) give the qualifications, relevant experience and accreditation of that person, (ii) say whether or not the examination, measurement, test or experiment was carried out under the expert's supervision, and (iii) summarise the findings on which the expert relies;
330	44	5.10.2/5.10.3.2d		"or reference materials (microscopic preparations) used for comparisons or identifications.	Insert after "information".	Rather specific
331	44	5.10.3	6	give	Remove give	Agree

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
332	44	6c		Information as to the “qualifications, relevant experience and certification” of each and every technician will usually not be available to the reporting officer making the statement. However, where individual statements from technicians have been requested and produced, those statements will include the assistant’s qualifications, experience and “accreditation” plus details of the work they carried out on behalf of the court reporting officer. It is worth noting for the record that there has never been any body offering external individual “accreditation” for technicians.		CPR (2010) 33.1.—(1) An expert’s report must— (e) say who carried out any examination, measurement, test or experiment which the expert has used for the report and— (I) give the qualifications, relevant experience and accreditation of that person, (ii) say whether or not the examination, measurement, test or experiment was carried out under the expert’s supervision, and (iii) summarise the findings on which the expert relies;
333	44	5.10.2/5.10.3	6g	An explanation of 'opinion' is required. It cannot be just an expression of interpretation and conclusion from the findings in a particular case. It should refer to instances where the validity or robustness of an actual scientific technique is in dispute.	Insert between 'range of opinion' and 'on the matters dealt with': 'on the validity or robustness of a scientific technique'	Agree
334	44	5.10.2/5.10.3	6i	This is covered by CPR 2010, suggest reference to this only.		Almost all of this section is, group may with to retire whole section or retain it in full

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
335	45	Abbreviated statements	13	'They do not contain all the detail required of a full Section 9 statement, such as an explanation of the technical issues underlying the expert evidence, **consideration of the circumstances of the particular case or details of continuity**.' I would challenge the highlighted text. If an interpretation of findings is required in any particular case then the relevant case specific information **has to be included** in the statement whether abbreviated or otherwise. It must be clear to the reader that the conclusion cannot be assumed to hold irrespective of what conditioning information might apply.		Section deleted
336	45	5.10.2/5.10.9 & 12		Explain what Section 9 format is in footnote or appendix.	Add footnote or appendix.	Footnoted added to reference act
337	45	5.10.3	10	maybe	May be	Clause deleted
338	45	5.10.3	11	Forensic service	Science of just provider	Clause deleted
339	45	5.10.3	12	Existence of DNA match	Existence of **a** DNA match	Clause deleted
340	45	5.10.3	15	Suppliers	providers	Clause deleted
341	45	13		Any report or statement (whether abbreviated or not) that includes an interpretation that relies partly on background information (for example the time delay between an offence being committed and the clothing of a suspect being seized) should include details of that background information. Interpretations cannot be presented in isolation from the conditioning information upon which they rely.	Remove reference to the 'circumstances of the particular case'.	Clause deleted

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
342	45		16	The new 'Streamlined Forensic Report' has the potential to offer a proficient operationally effective process for the communication of evidence and findings, and could generate considerable time and associated cost savings for both forces and courts. With this in mind, it would be good if, when it is adopted, it received support from the FSR and maybe a more detailed inclusion in the FSR's Code in the future.		Agreed, new draft text included
343	45		16-18	Streamlined Forensic Reports is the area in which the code 'may' have the most impact on the authorisation and working of forensic submissions. The above is not detailed enough to establish just what impact this could have on the authorisation procedure, if any. It may be that the initial procedure remains as is however the issuing of a streamlined forensic report negates the need for full examination and thus offer the potential of cost savings to forces whilst speeding up the CJ process.		Noted
344	46	5.10.2	21	Similar to page 7 para 14	include this requirement in the requirement on page 7 para 14	Code of Conduct may be echoed here too
345	46	20		This paragraph appears to suggest that a legal statement should be signed by a person responsible for checking (perhaps quality checking) an expert report rather than the expert. The person signing the statement is giving evidence and may be called on to give oral evidence in chief and be cross examined.	This appears to be wrong in principle	Agree, deleted
346	46	5.10.3	17	And do not contest	And **does** not contest	Deleted section
347	46	5.10.3	18	Suppliers	providers	Deleted section

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
348	46	5.10.3	23	Primary records	Produced by provider? Also include customer related info? E.g. crime reports	Agree that it does, although no need t add. Equally, this section could be deleted
349	46	5.10.2/5.10.3	20	SFR not enforce yet, therefore cannot discuss in an informed way.		Noted
350	47	5.10.5		Whole section is superfluous and is not a code of conduct or practice	remove section	Flags requirement only and 5.10.5 is a 17025 clause
351	47	5.10.2/5.10.3	27	In most defence cases that police forces and/or CPS will obstruct and delay, or just plain refuse release of exhibits to our laboratory for original forensic examination for the defence.	Might it be possible to include something that encourages the unhindered transfer of exhibits if the recipient (i.e. us) were to be accredited.	Defence access paper to follow
352	47	27		Refers to an Appendix of the report detailing the procedure for defence examinations but no Appendix present		Noted
353	47	5.10.2/3	27	Where is the appendix? It should have been submitted for consultation if it exists.	Remove para if appendix not in existence	Noted
354	47	5.10.2/5.10.3	27	Refer to the guidance booklet for disclosure		Agree
355	47	5.10.5	1	Could this section be extended to include / reference interpretation of results? Some forensic disciplines do have quite clear rules/guidance on the interpretation of results; we note that this is addressed in part in section 5.10.5.2 (p47) ‘Opinions and Interpretation’ but it may be worth cross referencing this particular point here.	Extend this section to include / reference interpretation of results and cross-reference to 5.10.5.2	Out of 17025 scope

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356	48			ISO/IEC 17043:2010 is a replacement for ISO/IEC Guide 43:1997	ISO/IEC 17043:2010 Conformity assessment -- General requirements for proficiency testing	Agree change
357	51	Glossary	Accreditation	The documented definition does not align with the definition found within ISO/IEC 17000:2004	Replace definition with definition from ISO/IEC 17000 'third-party attestation related to a conformity assessment body conveying formal demonstration of its competence to carry out specific conformity assessment tasks	Agreed
358	51	Glossary	Certifying Body	Definition is redundant as does not appear in document	Delete 'Certifying Body'	Agreed
359	51		Glossary	Not comprehensive nor consistent. E.g. accuracy described, yet precision is not.		Agree to example; which other definitions
360	51		Glossary	Blank: Does not necessarily need to be a solution!		Sample

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
361	52	Glossary	Critical finding	'Observations or results that have a significant impact on the conclusion reached and the interpretation and opinion provided, cannot be repeated or checked in the absence of the exhibit or sample, and could be interpreted differently.' This is a very long sentence that I believe can be interpreted in a number of ways. I suggest that it needs rewording. For example (assuming that it reflects the requirement of the above definition) - Observations or results that meet one or more of the following criteria: □ have a significant impact on the conclusion reached and the interpretation and opinion provided. □ cannot be repeated or checked in the absence of the exhibit or sample □ could be interpreted differently.	This version of the definition highlights to me that a CFC (as defined) is about the observation / test and does not include the checking of opinions / evaluations. I think something needs to be added to make it clear that these also need to be agreed with a second practitioner. (see page 19 of COP, Checking and review).	Typically observations or results that meet one or more of the following criteria: - have a significant impact on the conclusion reached and the interpretation and opinion provided; - cannot be repeated or checked in the absence of the exhibit or sample; - could be interpreted differently.
362	52	Glossary	Glossary	Database: Current definition implies any collection of information stored systematically is a database; this would suggest any filing system or archive would be covered by the requirements of the Codes. With DNA casework this would imply the archive is a database…a DNA Database!		Database: Collections of information designed to provide information rather than for archive which are stored systematically in hard copy or electronic format, and are for example used for: a) providing information on the possible origin of objects or substances found in casework; and/or b) providing statistical information

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
363	52			Definition of critical findings check. This is at odds with the definition contained within the bulk of the Code of Practice.		Typically observations or results that meet one or more of the following criteria: - have a significant impact on the conclusion reached and the interpretation and opinion provided; - cannot be repeated or checked in the absence of the exhibit or sample; - could be interpreted differently.
364	52	Glossary		'Control sample' definition in a forensic science context can be altered to be contrasted with that of a recovered sample	Control sample: the term is used in the forensic science context to refer to a sample obtained from a known source against which material from an unknown source (recovered sample) is to be compared to consider the strength of the evidence in support of a common origin.'	Agree
365	53	Glossary	-	Typo in text for Method, suggest removing extra ";." and or replacing with next column	Method: A logical sequence of operations, described generically for analysis (e.g. for the identification and/or quantification of drugs or explosives, or the determination of a DNA profile) or for comparison of items to establish their origin or authenticity (e.g. fingerprint/shoemark/toolmark examination; microscopic identifications).	Agree
366	53	Glossary		Measurement uncertainty is not mentioned here	Ensure measurement uncertainty is covered	Agree

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
367	53	Glossary		Precision is not mentioned here or in the section on validation	Ensure that precision is covered in section 5.4.5	A draft definition of precision is now added to the glossary however, the validation section is about process and neither mentions accuracy or precision.
368	54	Glossary		Quality - Definition incomplete.		Agree
369	54			Definition of Quality. This definition is incomplete.		Agree
370	54	Glossary		Definition of 'risk' is not correct. 'Risk' is not a 'something'	Replace with 'The probability something might happen and its effect(s) on the achievement of objectives.'	Agree
371	54	Glossary		A definition of 'recovered sample' is needed to go with the definition of 'control sample' in a forensic science context (p. 52)	Recovered sample: the term is used in the forensic science context to refer to a sample obtained from an unknown source against which material from a known source (control sample) is to be compared to consider the strength of the evidence in support of a common origin.'	Agree
372	54	Glossary		Quality: not complete.....		Agree
373	54	Glossary		Robustness:…check with different analysts to show robustness.		Not required in definition
374	54	Glossary		definition of quality incomplete	update	Agree

	Page	Clause	Para	Comment	Proposed change	Editorial recommendation
375	Various			Reference to application for use in NI	Consider inclusion of reference to Northern Ireland - Previous version mentioned specifically Northern Ireland, now a generic statement. May be a lessening of impact.	Requires escalation
376	Various			The references to supporting documentation throughout the Code are very useful.		Noted
377	Various	General		There is no version control in document	introduce	Agree
378	Various	General		Content numbering out of sequence 4 then 4.4, 4.9 then 4.13.2 etc.	amend	Noted
379	Various	General		Align numbering with ISO 17025, include a statement to such	consider	Noted