Report:

Regulation of incident scene examination and implementation of change

May 2025

Contents

Executive summary

Concerns about the impact of statutory regulation on the delivery of effective and efficient incident scene examination were raised with the Forensic Science Regulator and through Home Office ministers. To understand the foundations of these concerns the Regulator sought information from organisations undertaking FSA – INC 100, Incident scene examination, through a survey of responses to several statements.

The responses to the survey statements could be summarised as follows:

- Most organisations (87.5%) stated they had prepared effectively for regulation of incident scene examination.
- Organisations mainly agreed (46%) or strongly agreed (21%) that achievement of accreditation demonstrates that their organisation is competent to deliver incident examination.
- Most organisations disagreed (75%) or strongly disagreed (17%) with the statement that the volume of work and impact of the accreditation process is proportionate to the risk of error or quality failure.
- Over half of organisations (58%) supported the statement that the accreditation process enables my organisation to continually improve incident scene examination services to our end users.
- There was largely support (63%) for the statement that meeting the requirements to comply with the Code (excluding the requirement for accreditation) enables my organisation to continually improve incident scene examination services to our end users.
- There was overall support (63%) for the statement that the accreditation process provides confidence to the CJS, complainants and commissioning parties, in the quality of the incident examination process.
- There was overwhelming agreement (92%) with the statement that achievement of accreditation introduces unnecessary bureaucracy.
- Most organisations were in agreement (79%) with the statement that meeting the requirements to comply with the Code (excluding the requirement for accreditation) introduces unnecessary bureaucracy.
- Over half of organisations agreed (58%) with the statement that the accreditation process enables my organisation to identify quality failures that would have had an impact on CJS cases.
- There was complete agreement (100%) that as a result of the requirement to achieve accreditation practitioners take longer to examine incident scenes.

The Regulator undertook a review of regulation of incident scene and drafted a proposal for change. This proposal was presented to the Regulator's Incident Examination Specialist Group and the Group was asked to consider how the proposal for change could be delivered and what changes to the Code of Practice would be needed to address the issues raised.

The Regulator's proposal for change covers six points:

1. **Ensuring competency frameworks are delivered corporately**
2. **Implementing contamination controls based on risk assessment**
3. **Appropriate use of verification, validation, and assessment of fitness for purpose**
4. **Flexible note taking appropriate to the risk of not recording information**
5. **Accreditation schedules without reference to volume or major crime**
6. **Compliance at a corporate level rather than by site/base**

To deliver these changes the Regulator proposed amendments and additions to version 2 of the Code. This included addition of FSA specific requirements for incident scene examination and changes to the general requirements in the Code.

It is intended that the changes in version 2 of the Code will reduce duplication in demonstrating that processes are in place and allow these to be demonstrated once for an organisation along with testable evidence that corporate processes have been implemented across the organisation. The changed approach will also better align with the activities of FSA – INC 100 and allow organisations to manage risks to quality using measures appropriate to the level of risk to the CJS.

The Regulator recognises that the implementation of these changes and meeting the requirements in version 2 of the Code will require time. The Regulator has removed the requirement for accreditation to ISO/IEC 17020 to demonstrate compliance with the Code for FSA – INC 100 in version 2 of the Code. The requirement to achieve accreditation to ISO/IEC 17020 based on revised general and new FSA specific requirements in version 2 of the Code will be reinstated in April 2027.

To understand the extent of adjustment required the Regulator will ask organisations to complete a gap analysis setting out where work is needed to meet the requirements in version 2 and to provide a timescale for meeting the requirements.

To support organisations with implementing the changes the Regulator will publish guidance on meeting the FSA specific requirements for incident scene examination and has established a Compliance Assurance Working Group as a sub-group of the Incident Examination Specialist Group to advise on implementation of the changed approach and recommend any additional guidance and support.

Survey

Background

Concerns about the impact of statutory regulation on the delivery of effective and efficient incident scene examination were raised with the Forensic Science Regulator and through Home Office ministers.

The main concern raised was that statutory regulation and the requirement for ISO/IEC 17020 accreditation to demonstrate compliance with the Regulator's Code of Practice (the Code) was negatively impacting on efficiency in delivery incident scene examination and had reduced the number of incidents that scene examiners were able to attend.

To understand the specific elements of regulation that were negatively affecting service delivery and identify whether changes could be made to the Code of Practice that would address the issues, the Regulator developed a survey. This survey was sent to all Senior Accountable Individuals for organisations or collaborations of organisations that were undertaking FSA – INC 100.

The survey listed several statements and respondents were asked to state whether they agreed or disagreed with the statements on a scale of support from strongly agree to strongly disagree. Examples of the causes of the impact of regulation and accreditation on incident examination were sought for three of the questions to assist with understanding the specific issues.

The survey was sent out to SAIs in May 2024 with responses required by the end of May 2024. The responses were collated and reviewed, and a summary provided to SAIs in June 2024, together with the Regulator's proposal for regulatory change in incident scene examination.

Survey statements

The survey asked respondents to say to what extent they agreed, disagreed, or had no view with the following statements:

1 My organisation has prepared effectively for the regulation of incident examination.

2 Achievement of accreditation demonstrates that my organisation is competent to deliver incident examination.

3 The volume of work and impact of the accreditation process is proportionate to the risk of error or quality failure.

4a The accreditation process enables my organisation to continually improve incident scene examination services to our end users.

4b Meeting the requirements to comply with the Code (excluding the requirement for accreditation) enables my organisation to continually improve incident scene examination services to our end users.

5 The accreditation process provides confidence to the CJS, complainants and commissioning parties, in the quality of the incident examination process.

6a The achievement of accreditation introduces unnecessary bureaucracy - if you agree please provide examples, including the change in process and the reason this adds unnecessary steps.

6b Meeting the requirements to comply with the Code (excluding the requirement for accreditation) introduces unnecessary bureaucracy - if you agree please provide examples, including the change in process and the reason this adds unnecessary steps.

7 The accreditation process has enabled my organisation to identify quality failures that would have had an impact on CJS cases.

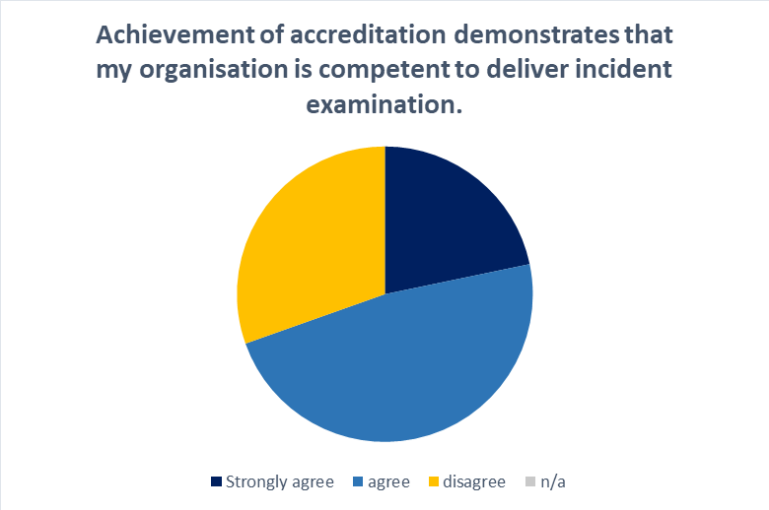
8 As a result of the requirement to achieve accreditation practitioners take longer to examine incident scenes - if you agree please provide the three main reasons for this, including the change in process.

Reponses

A total of 24 organisations or collaborations responded to the survey. A summary of the responses to the scale of support questions can be found in annex A.

The pie charts on the following pages show the proportion of respondents strongly disagreeing (dark orange), disagreeing (yellow), agreeing (blue), strongly agreeing (dark blue), or holding no view (spotty) with each statement

Statement 1
There was significant agreement with the statement that organisations prepared effectively for regulation of incident examination with 87.5% of respondents either agreeing or strongly agreeing with the statement.

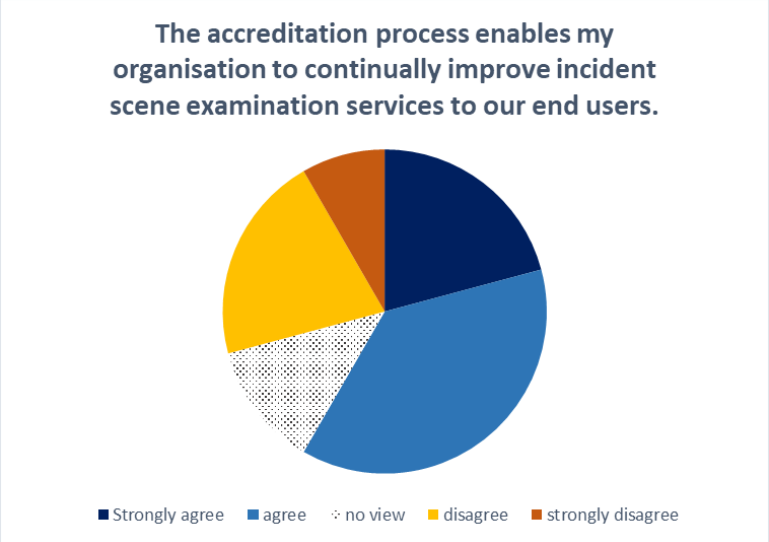


Statement 2

There was agreement with the statement that accreditation demonstrates competence in delivery of incident scene examination with 67% of respondents either agreeing or strongly agreeing with the statement.

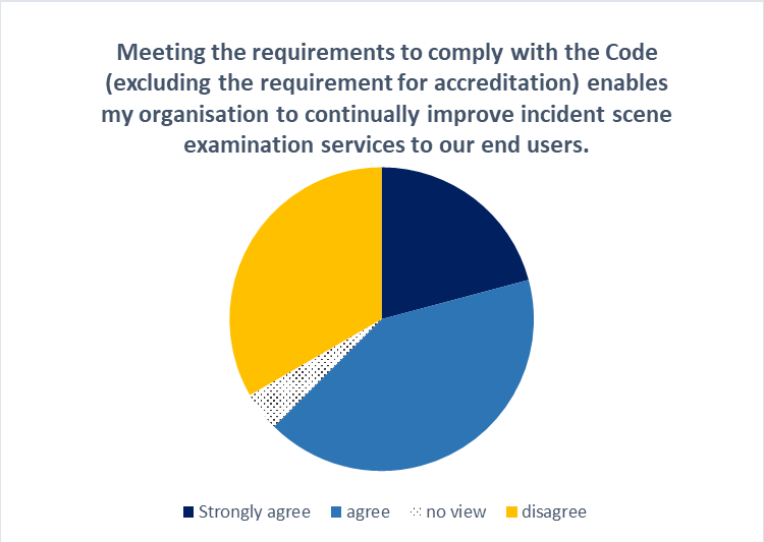
Statement 3

There was significant disagreement with the statement that the volume of work and impact of the accreditation process is proportionate to the risk of error or quality failure with 92% of respondents either disagreeing or strongly disagreeing with the statement.



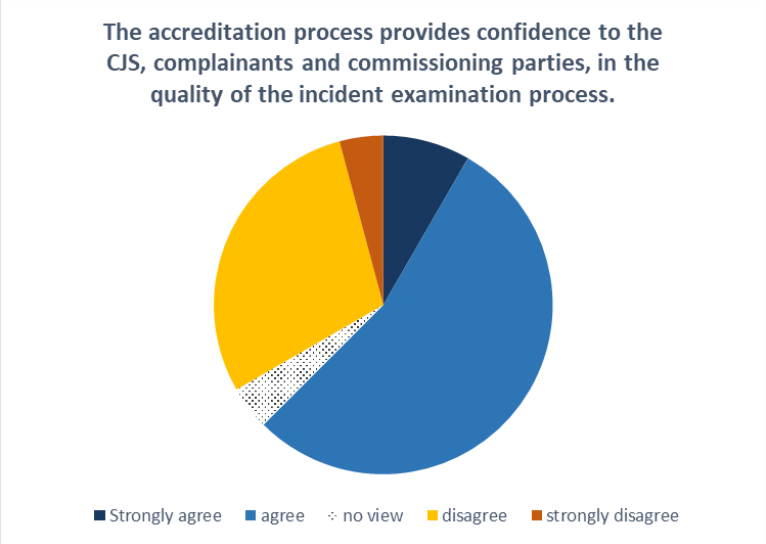
Statement 4a

There was less confidence with whether accreditation assists with continual improvement with 13% not expressing a view. However, 58% of respondents did agree or strongly agree that accreditation assists with improving services for end-users.



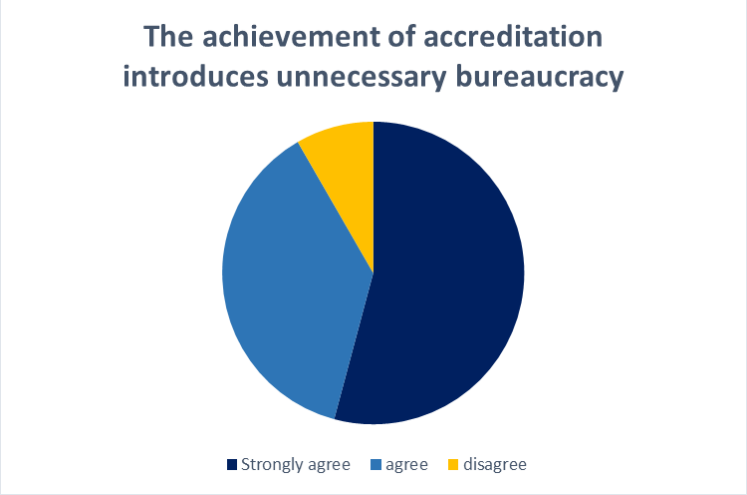
Statement 4b

The majority (63%) of respondents agreed or strongly agreed that meeting the requirements for compliance with the Code did assist with continual improvement of services for end-users. However, there was also disagreement with this statement with just over a third of respondents disagreeing.



Statement 5

There was a mixed view as to whether the accreditation process provided confidence to the CJS, complainants and commissioning parties, however the majority agreed that it did with 63% of respondents agreeing or strongly agreeing with the statement.

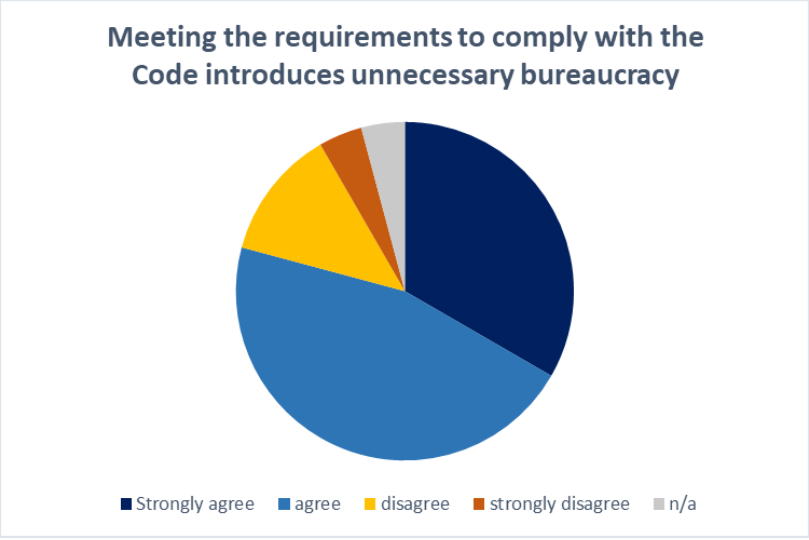


Statement 6a

There was a strong agreement that the accreditation process added unnecessary bureaucracy. Examples were requested and lists of the most common responses can be found in the following text box.

Examples provided for unnecessary bureaucracy introduced by working to achieve accreditation (statement 6a)

Low risk findings
Short timeframe to respond to findings
Long assessment reports
Inconsistency between assessors
High expectations for detail in non-conformance reports
Expectation for traceability of all consumables
Extent of audits required not proportionate to improvements generated
Time required to prepare for and set up assessment visits
Validation studies required to have large numbers of practitioners involved
Repetition of validation of the same methods across an organisation
Amendments to validation studies resulting in changes to SOPs and retraining
EM/batch testing requirements are not proportionate to risk
Inability to use professional judgement
Requiring declarations on MG22A/scene notes
Unable to undertake the required tests for infrequently used methods
Inability to examine items away from the scene – e.g. at police stations
Extensive scene notes required
Recording exact time on exhibit labels
Abstraction of staff for quality roles
Monitoring and checks, such as freezer temperature
Supplier evaluation when there is only one option
Security checks
Frequency and amount of competency testing

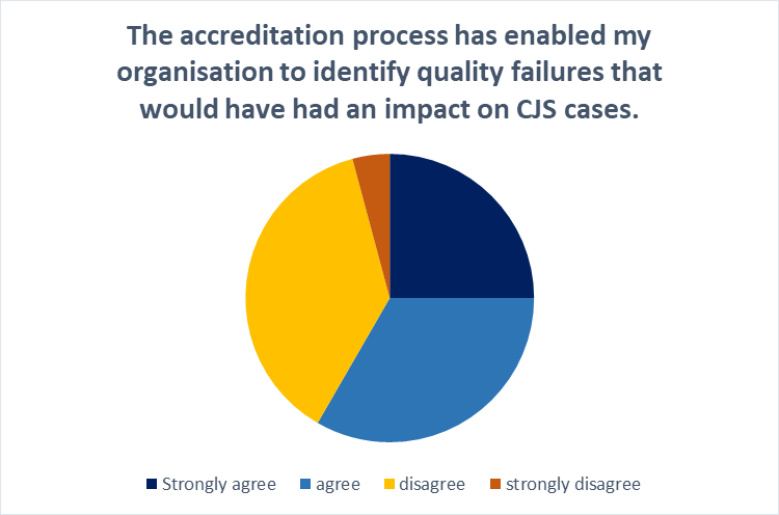


Statement 6b

There was a strong agreement that the requirements for complying with the Code added unnecessary bureaucracy. Examples were requested and lists of the most common responses can be found in the following text box.

Examples provided for unnecessary bureaucracy introduced by working to comply with the Code.

Infrequently used method timeframe is too short
Requiring declarations on MG22A/scene notes
Mitigation tables time consuming, complicated, and adding work.
Dip checks/mock scene and live witnessing abstract staff
Excessive QA checks
Requirements mean scene notes take a disproportionate amount of time to complete
Validation at multiple sites
Excessive validation documentation
Repeated validation of established methods
Inability to use unvalidated methods where some options are validated
Validation section of Code is long and complex
Information security requirements add work
Requirements to have control over areas outside of the forensic unit (e.g. vehicle recovery garages, vetting)
Contamination control requirements too open to interpretation
Not appropriate for scenes and not based on scientific research
No allowance for professional judgement
PT to doesn't add value
Extent of auditing required - time and staff abstraction
Multiple regulatory documents to consider



Statement 7

There was a mixed view as to whether the accreditation process has enabled identification of quality failures that would have had an impact on CJS cases. 58% of respondents agree or strongly agreed with this statement, however 38% disagreed and a further 4% strongly disagreed with this statement.

Statement 8

There was 100% agreement with the statement that the requirement to achieve accreditation resulted in practitioners taking longer to examine incident scenes with 87.5% of respondents strongly agreeing that scene examination was longer. While respondents did provide examples

of why scene examination took longer some respondents also acknowledged that some of the processes that result in longer scene examination times are important and necessary.

Excessive contamination controls and the extent of note taking required were the most common responses given for why scene examination was taking longer. The main reasons given are listed in the box below.

Reasons practitioners take longer to examine scenes
Excessive and disproportionate contamination controls
The extent of note taking required
The number of checks to be carried out
The need to track all equipment and consumables
Contamination control boxes add time to gathering consumables and equipment
Time taken for calibration and kit checks
Prescriptive procedures over being able to use professional judgement
IT systems not set up to meet requirements
Complex SOPs and frequent changes mean staff need to check processes

The Regulator found the responses to the survey to be considered, balanced, and to provide a useful insight into the views of organisations undertaking incident scene examination and the challenges of meeting regulatory requirements. The overarching position appeared to be that while organisations were committed to effective regulation of incident scene examination there were significant and real concerns about the impact of regulation, and in particular some of the requirements of the Code and the accreditation process.

The Regulator set out to propose changes to version 2 of the Code to address the concerns raised and ensure effective and focused regulation that builds on the work that has already been undertaken by organisations to meet existing requirements.

The main drivers for change were the need to better recognise in the Code that incident scene examination is not an activity undertaken in laboratories or at the sites/bases of an organisation. The quality management system, including the competency frameworks, should be corporate and consistently delivered across organisations and the focus for regulation should be on the demonstration of competence and the application of sound professional judgement.

Regulatory change

The Regulator's proposal for regulatory change that was set out to SAIs in June 2024 is reflected in the amendments and additions in version 2 of the Code and covers the following six points:

- **Corporate competency framework**: Version 2 of the Code sets clear competency requirements for incident examination (section 90.2) and the primary focus for meeting these requirements will be for organisations to design and implement a corporate competency framework based on the achievement of practitioner competence including demonstration of professional judgement. Assessment of competence to examine incident scenes should allow for variation in approach depending on competent application of professional judgement. Forensic scene management should be built into the competency framework. Demonstration of compliance with the Code will be achieved by evidencing organisational competence in the design, delivery, and effectiveness of the competency framework.

- **Contamination controls**: Managing the potential risk of contamination will recognise the difference between a controlled laboratory environment and the uncontrolled environment of the scene of an incident. Version 2 of the Code clarifies that incident scenes, vehicle recovery facilities and ad-hoc examination areas are not considered to be examination facilities (Code v2, section 23.1.1). Version 2 of the Code also requires forensic units to have a thorough and comprehensive understanding of the risks of contamination and develop appropriate risk management methods (Code v2, section 23.3.8 – 23.3.12). Organisations will take a range of approaches to manage risk and monitor effectiveness based on a sound risk assessment.

- **Validation**: The overarching methodology of incident scene examination will be demonstrated as fit for purpose. Validation requirements will only apply to those elements of incident scene examination that involve testing. The methods and method validation section of version 2 of the Code (section 24) has been redrafted to clarify that validation and verification are distinct processes. Verification should be used for methods that have been widely validated and draw on existing validation data, whether internally held or from other organisations, to confirm the end-user requirements are still met. Validation/verification studies should be designed and delivered to cover use across the organisation at any relevant incident scene. Equipment should be demonstrated as fit for purpose.

- **Note taking**: The examination notes made by crime scene examiners are a critically important source of information for investigators and others in the criminal justice system. While quality note taking remains an important requirement in version 2 clarity has been added in the incident scene examination FSA specific requirements that notes should be proportionate to the incident (Code v2, section 90.8.1).

- **Volume/major crime:** There is no distinction between volume and major crime in the regulation of incident scene examination. There is a continuum in the extent and complexity of incident scene management rather than any separation between incident scene examinations based on the incident type. The definition of FSA – INC 100 in version 2 of the Code clearly states that the FSA does not distinguish between activities performed at volume and major incident scenes and compliance for activities undertaken at all the incident types relevant to the forensic unit is required (section 39.2.3). Processes relating to forensic scene management and examination of all types of incident scenes attended should be included in the organisation's quality management system and internal audits.

- **Organisation-based accreditation:** Incident scene examination is a forensic science activity that is not undertaken in sites/bases and while there are supporting activities (such as exhibit storage and transmission) that are undertaken at a site/base, the main activities of FSA – INC 100 are undertaken at incident scenes or other remote locations. The FSA specific requirements for incident examination set out that the scope of accreditation shall be defined based on the sub-activities listed in FSA – INC 100, i.e. not on the basis of site or location. In addition, version 2 of the Code makes clear that activities that form part of the end-to-end process of incident scene examination, such as tasking and strategy setting, may be undertaken at ad-hoc locations (Code v2, section 90.9.4).

It is intended that this changed approach and the new and amended requirements in version 2 of the Code will improve alignment of regulation to the activities of FSA – INC 100 and the management of risks to quality. The expectation is that regulatory change will reduce duplication in demonstrating that processes are in place at each site/base, such as for competency and validation, and allow these to be demonstrated once for an organisation along with testable evidence that corporate processes have implemented across the organisation.

Implementation of change

The Regulator recognises that for some organisations the regulatory changes may require organisational changes which may take time to deliver. The Regulator has removed the requirement for accreditation to ISO/IEC 17020 to demonstrate compliance with the Code for FSA – INC 100. The requirement to achieve accreditation to ISO/IEC 17020 based on revised general and new FSA specific requirements in version 2 of the Code will be reinstated in April 2027.

The section 9 guidance on declarations of compliance and non-compliance with the Code of Practice will be updated and reissued to provide support on declarations for the undertaking FSA – INC 100.

It will be open to organisations as to when to seek accreditation to ISO/IEC 17020 for incident scene examination, with version 2 of the Code on the scope. This could be undertaken at any time from the point version 2 of the Code comes into force until it becomes a requirement for compliance 18 months after version 2 of the Code comes into force. Accreditation schedules will be expected to align with the changed approach – i.e. without reference to volume or complex/major crime and without reference to individual sites/bases.

Organisations may have queries about the best approach to take to ensure their accreditation aligns with the requirements of version 2 of the Code. The following box provides some guidance.

Where accreditation is being maintained, applications for extension to scope (ETS) should only be considered if the extension will align the organisation with the expectations for a corporate approach without a distinction between volume and major/complex crime.

For example, an ETS that means that the organisation corporately meets the requirements in version 2 of the Code for all incident scene types examined would be in line with the changed approach.

However, an ETS to add examination of major/complex incident scenes at some of the organisation’s sites/bases would not be in line with the proposal for change and should not be undertaken. In this case the organisation should focus on ensuring there is corporate compliance with the requirements of version 2 of the Code.

The focus of any extension to scope should be to remove volume crime and any listing of specific sites/bases from the accreditation schedule.

New applications for accreditation to ISO/IEC 17020 for FSA – INC 100 or applications following the lapse of previously held accreditation should only be made once version 2 of the Code is in force and where an organisation meets the requirements in a corporate manner for all types of incidents examined.

To understand the adjustment required the Regulator will ask organisations to complete a gap analysis setting out where work is needed to meet the requirements in version 2 and to commit to a timescale for meeting these requirements. The gap analysis will be shared with UKAS for them to plan their assessments and the FCN to allow them to identify areas where they can best assist forces in achieving compliance.

To support organisations with implementing the changes the Regulator will publish guidance on meeting the FSA specific requirements for incident scene examination. The Regulator has established a Compliance Assurance Working Group (CAWG) as a sub-group of the Incident Examination Specialist Group. This group will represent organisations that deliver FSA – INC 100 and support the implementation of regulatory change and the new FSA specific requirements. The CAWG will advise on effective implementation of the changed approach and recommend any additional guidance and support.

Conclusion

The Regulator has given careful consideration to concerns raised about the impact of regulation on delivery of incident scene examination and has implemented a six-point plan for change to reduce the impact of regulation whilst managing the risk of quality failure in this critical forensic science activity.

To support organisations with implementing the changes the Regulator will publish guidance on meeting the FSA specific requirements for incident scene examination and has established a Compliance Assurance Working Group to feedback on implementation of the changed approach and advise on any necessary additional guidance and support.

The Regulator welcomes continued engagement from the community in delivering change and driving improvements in quality in a manner that is appropriate, balanced, and effective.

Annex A: Summary of responses to scale of support questions

Table 1: Summary of responses to scale of support questions

Question number	Strongly agree	Agree	No view	Disagree	Strongly disagree	Not applicable	Total
1	9	12	0	3	0	0	24
2	5	11	0	7	0	1	24
3	0	1	1	18	4	0	24
4a	5	9	3	5	2	0	24
4b	5	10	1	8	0	0	24
5	2	13	1	7	1	0	24
6a	13	9	0	2	0	0	24
6b	8	11	0	3	1	1	24
7	6	8	0	9	1	0	24
8	21	3	0	0	0	0	24