



Intermountain Forensics

SOP #	ADM-123
Revision #	01

Forensic DNA Technical Leader Approval

Issue Date

03/13/2023

Professional Development

1. Purpose

To describe the professional development required for staff.

2. Summary

This protocol establishes the guidelines for continuing education, literature review, and annual review of ethics and policies and procedures for IMF staff.

3. Procedure

Continuing Education

1. All qualified Forensic DNA analysts, Sr. Forensic DNA Analysts, Forensic DNA Supervisors, the DNA Technical Leader, and Directors of Laboratory Operations and Development (if active in casework) must receive a minimum of eight (8) cumulative hours of continuing education annually.
 - a. Forensic Molecular Biologists and Laboratory Managers are strongly recommended to complete a minimum of eight (8) cumulative hours of continuing education annually.
2. Continuing Education must be in a subject area related to DNA analysis.
3. Reading of scientific literature and subsequent lab-sponsored discussions (e.g., journal club, article presentation) do not count toward continuing education hours.
4. Activities required as part of the laboratory's training program and/or that are required for establishing an individual's competency do not count toward continuing education hours.
5. Continuing Education Documentation
 - a. It is the analyst's responsibility to acquire the necessary continuing education records and place the documentation in the Continuing Education folder of their Personnel File on the Shared Drive.
 - b. Continuing education records are kept indefinitely.
 - c. Documentation Requirements:
 - i. International, national, or regional conferences, meetings, or workshops
 1. Certificate of attendance or proof of travel/registration.
 2. Documentation of content is not required.
 - ii. Other in-person training (i.e., vendor training, lab-organized training)
 1. Proof of participation in the form of a sign-in sheet, certificate of attendance, or its equivalent.
 2. Documentation of content as evidenced through an agenda, syllabus, record of presentation content (e.g., copy of the slides), and/or the CV of the presenter.
 - iii. Multi-Media/internet training
 1. Written documentation of the length of the training and content as evidenced through an agenda, syllabus, record of presentation content (e.g., copy of the slides), and/or the CV of the presenter.
 2. Proof of completion
 3. DNA Technical Leader approval
 - a. The Technical Leader must approve any multimedia/internet training prior to its designation as continuing education.



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Literature Review

1. IMF-SLC personnel authorized to perform casework will participate in a review of relevant literature review at minimum twice in a calendar year.
2. Procedure:
 - a. Journal articles and other literature review resources will be distributed in the first half and the second half of the calendar year via email by the DNA Technical Leader.
 - i. The email will include a deadline for the completion of the literature review.
 - ii. Any literature as assigned will be appropriate for the job duties of the individuals assigned.
 - iii. This literature review may include literature found in the required training readings.
 - b. Once the review is completed, the staff member will send an acknowledgement email back to the DNA Technical Leader for documentation of the completion of the literature review.
 - c. The DNA Technical Leader will compile the following documentation and retain it in the Literature Review folder located on the Shared Drive:
 - i. Email sent to staff members assigning the Literature Review
 - ii. Completion acknowledgement responses from all staff members
 - iii. Copies of all assigned articles
 1. If the assigned article cannot be saved in a suitable format for long term retention, the location of the article will be maintained (i.e., web address or complete citation)
3. The laboratory maintains an internal library and access to electronic (PDF) literature that will be housed on the laboratory's shared drive, which can be utilized as additional continuing education resources for staff members.

Annual Ethics Review

1. All Forensic Biology Unit personnel will receive ethics training which includes:
 - a. An annual review by all staff to adhere of the "Guiding Principles of Professional Responsibility for Forensic Service Providers and Forensic Personnel".
 - b. Additional resources on ethics and human factors topics.
2. Procedure for the annual review:
 - a. The ethics document will be distributed via email by the DNA Technical Leader in the last quarter of the calendar year and will include a due date for the completion of the review.
 - i. The review email may also include other relevant ethics-based literature, to encourage discussion or thought on the application of the ethical guidelines. The minimum review requirement is for the Guidelines document.
 - b. Once the staff member had completed their review, they must send an acknowledgement email back to the DNA Technical Leader for documentation of the completion of the ethics review.
 - c. The DNA Technical Leader will compile the following documentation and retain it in the Ethics folder located on the Management shared drive:
 - i. Email sent to staff members assigning the review.
 - ii. Completion acknowledgement responses from all staff members
 - iii. Copies of any assigned articles
 1. If the assigned article cannot be saved in a suitable format for long term retention, the location of the article will be maintained (i.e., web address or complete citation)



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Management System, Procedures and Protocols review

1. Staff should annually review all procedures, protocols and relevant management system documents applicable to their job function at least once in a calendar year.
 - a. If the document had been revised in the 12 months prior to the assignment of the annual review, that document is not required to be reviewed again by the staff member.
 - b. Staff is highly encouraged to provide feedback to the DNA Technical Leader on possible improvements and changes to the reviewed procedures and policies.
2. Procedure:
 - a. The DNA Technical Leader will assign the review to staff via email in the beginning of the third quarter of the year.
 - i. The email will include a due date for completion of the review.
 - b. Once the review is completed, the staff member will send an acknowledgement email back to the DNA Technical Leader for documentation of the completion of the policy and procedure review.
 - i. Feedback can be provided in this acknowledgement email or via direct conversation with the DNA Technical Leader.
 - c. The DNA Technical Leader will compile the following documentation and retain it in the Annual Policies and Procedure Review folder located on the Management shared drive:
 - i. Email sent to staff members assigning the review.
 - ii. Completion acknowledgement responses from all staff members
 - d. The DNA Technical Leader will initiate any necessary changes to SOPs resulting from feedback provided by staff.

4. References

ANAB Guiding Principles of Professional Responsibility for Forensic Service Providers and Forensic Personnel

5. Definitions

N/A