



Intermountain Forensics

SOP #

ORG-214

Revision #

01

Forensic DNA Technical Leader Approval

Issue Date

01/19/2024

Position Summary: New York State Laboratory Director

1. Purpose

To describe the role and responsibilities of the New York State Laboratory Director within the organization and provide the minimum and preferred education, experience, certification, knowledge, skills, and abilities required for the position.

2. Summary

The New York State Laboratory Director (NYSLD) is responsible for the administration of the technical and scientific operation of forensic identity operations, including the supervision of procedures, reporting of results, and other duties and responsibilities as they pertain to testing performed for the state of New York.

3. Procedure

Minimum Educational Requirements

1. M.D., D.O., or D.D.S. degree, or an earned doctoral degree (e.g., Ph.D., Sc.D.) in a relevant chemical, physical, or biological science major from an accredited institution

Minimum Experience Requirements

1. At least four years of **postdoctoral** training and/or experience in an acceptable laboratory of which two or more years of training and/or experience must be demonstrated in the methods and techniques currently in use in the permit category(ies) sought.
2. Two or more years of experience in general laboratory management.
3. A portion of this training and/or experience must have been obtained within the previous six years.

Minimum Experience Requirements

1. Certificate of Qualification from the New York State Clinical Laboratory Evaluation Program within the Department of Health

Mandatory Roles and Responsibilities

1. Has all of the responsibilities required by the NY DOH CLEP accreditation standards as follows. (Note: These responsibilities may be delegated in writing to anyone qualifying as a supervisor per the NY DOH CLEP Human Resources Standard of Practice 4):
 - a. Compliance, evaluation and monitoring of laboratory's Quality Management System (QMS) according to New York State Clinical Laboratory Standards of Practice, including but not limited to:
 - i. The appropriateness of laboratory services, including test procedures that meet the needs of the users of laboratory services;
 - ii. Requirements for quality indicators (QI), quality goals and performance expectations;
 - iii. Scheduled review of audits, outcomes, management reviews, and on-going monitors of conformance; and
2. Providing effective administrative direction, including budget planning and controls, in conjunction with the individual(s) responsible for the financial management of the laboratory;
3. Providing advice to clients regarding the significance of laboratory findings and ensuring that test reports include information required for interpretation;



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4. Monitoring all work performed in the laboratory to ensure that analytically and clinically valid data are generated;
5. Selecting all reference laboratories;
6. Ensuring that sufficient and qualified personnel are employed including:
 - a. defining the qualifications and responsibilities of all laboratory testing personnel and documenting training and/or competency;
 - b. where applicable, personnel are not engaged in practices limited by license or beyond the scope of licensure; and
7. Ensuring that supervisors have sufficient time to perform their supervisory functions even if they have testing/bench responsibilities;
8. Competency assessment of assistant directors and direct-report personnel;
9. Specifying in writing the technical and administrative responsibilities and duties of all laboratory personnel and comply with all Human Resource Standards of Practice;
10. Ensuring that all delegated duties are performed by staff at defined intervals, and as needed;
11. Promoting a safe laboratory environment to protect the public and personnel, including, as required, limited or restricted access;
12. Providing continuing education to laboratory testing personnel that is relevant to laboratory practices;
13. Ensuring that current and approved test procedures are available and accessible to all personnel;
14. Effectively implementing a plan of correction to deficiencies identified;
15. Ensuring that the laboratory complies with all proficiency testing requirements within the New York State Clinical Laboratory Standards of Practice;
16. Maintaining an effective working relationship with applicable accrediting and regulatory agencies, administrative officials, and the medical community
17. Ensuring compliance with all local, state, and federal laws as applicable to laboratory operations
18. Designation of a quality manager
19. The NYSLD must be present in the laboratory at minimum once every 2 months and be available electronically during business hours to employees and clients.

Additional Roles and Responsibilities

1. Participate in continuing education (workshops, training courses, conferences etc.) as per laboratory policy and applicable accreditation and certification requirements
 - a. Maintain documentation of above participation as per policy
2. Provide training to organization staff and external entities

4. References

N/A

5. Definitions

N/A