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## **PECB Certified ISO/IEC 27001 Lead Auditor exam (ISO-IEC-27001-Lead-Auditor中文版) Sample Questions (Q244-Q249):**

### **NEW QUESTION # 244**

您詢問 IT 經理，為什麼組織仍在使用行動應用程序，而個人資料加密和假名化測試卻失敗了。此外，服務經理是否有權批准測試。

IT經理解釋說，根據軟體安全管理程序，測試結果應由他批准。加密和假名功能失敗的原因是這些功能嚴重降低了系統和服務效能。需要額外 150% 的資源來滿足這一點。服務經理同意存取控制足夠好並且可以接受。這就是服務經理簽署批准書的原因。

您正在準備審計結果。選擇正確的選項。

- A. 不存在不合格項 (NC)。服務經理做出了繼續提供服務的正確決定。  
(與第 8.1 條相關，控制措施 A.8.30)
- B. 存在不合格項 (NC)。組織和開發人員不執行驗收測試。  
(與第 8.1 條相關，控制措施 A.8.29)
- **C. 存在不合格項 (NC)。服務管理員不遵守軟體安全管理程序。(與第 8.1 條相關，控制措施 A.8.30)**
- D. 存在不合格項 (NC)。組織和開發人員執行的安全測試失敗。  
(與第 8.1 條相關，控制措施 A.8.29)

**Answer: C**

Explanation:

According to ISO 27001:2022 Annex A Control 8.30, the organisation shall ensure that externally provided processes, products or services that are relevant to the information security management system are controlled. This includes developing and entering into licensing agreements that cover code ownership and intellectual property rights, and implementing appropriate contractual requirements related to secure design and coding in accordance with Annex A 8.25 and 8.29. In this case, the organisation and the developer have performed security tests that failed, which indicates that the secure design and coding requirements of Annex A 8.29 were not met. The IT Manager explains that the encryption and pseudonymisation functions failed because they slowed down the system and service performance, and that an extra 150% of resources are needed to cover this. However, this does not justify the acceptance of the test results by the Service Manager, who is not authorised to approve the test according to the software security management procedure. The Service Manager should have consulted with the IT Manager, who is the owner of the process, and followed the procedure for handling nonconformities and corrective actions. The Service Manager's decision to continue the service based on access control alone exposes the organisation to the risk of compromising the confidentiality, integrity, and availability of personal data processed by the mobile app. Therefore, there is a nonconformity (NC) with clause 8.1, control A.8.30.

References:

1: ISO/IEC 27001:2022 Lead Auditor (Information Security Management Systems) Course by CQI and IRCA Certified Training 1

2: ISO/IEC 27001 Lead Auditor Training Course by PECB 2

## NEW QUESTION # 245

情境 8: EsBank 自 9 月起為愛沙尼亞銀行業提供銀行和金融解決方案

2010年，該公司在全國擁有30家分行和100多台ATM機。

EsBank 在高度監管的行業中運營，必須遵守許多有關資料安全和隱私的法律和法規。他們需要透過實施技術和非技術控制來管理整個營運的資訊安全。EsBank 決定實施基於 ISO/IEC 的 ISMS

27001，因為它提供了更好的安全性、更多的風險控制以及符合法律法規的關鍵要求。

在成功實施 ISMS 九個月後，EsBank 決定由獨立認證機構根據 ISO/IEC 27001 對其 ISMS 進行認證。

第一階段和第二階段審核是共同進行的，發現了一些不符合項。第一個不合格之處與 EsBank 的資訊標籤有關。該公司有資訊分類方案，但沒有資訊標籤程序。因此，需要相同保護等級的文件將被貼上不同的標籤（有時為機密，有時為敏感）。

考慮到所有文件也以電子方式存儲，不合格情況也影響了媒體處理。審計小組透過抽樣得出結論，200 個可移動媒體中有 50 個儲存了被錯誤分類為機密的敏感資訊。根據資訊分類方案，允許將機密資訊儲存在可移動媒體中，而嚴格禁止儲存敏感資訊。這標誌著另一個不合格之處。

他們起草了不合格報告，並與 EsBank 代表討論了審計結論，代表同意在兩個月內針對發現的不合格問題提交行動計劃。

EsBank 接受了審計組組長提出的解決方案。他們根據實體和電子格式的分類方案起草了資訊標籤程序，解決了不合格問題。可移動媒體程式也基於此程式進行了更新。

審計完成兩週後，EsBank 提交了總體行動計畫。在那裡，他們解決了檢測到的不合格問題以及採取的糾正措施，但沒有包括有關受影響的系統、控制或操作的任何詳細資訊。審核小組評估了該行動計劃並得出結論，該計劃將解決不合格問題。然而，EsBank 收到了不利的認證建議。

根據上述場景，回答以下問題：

哪個選項可以證明不利的認證建議是合理的？請參閱場景 8。

- A. 與缺乏資訊標籤程序相關的輕微不合格項
- B. 提交的行動計劃的不切實際的日期（兩週）
- **C. 與在可移動媒體中儲存敏感資訊相關的主要不符合項**

**Answer: C**

Explanation:

The major nonconformity related to storing sensitive information in removable media justifies the unfavorable recommendation for certification. This issue directly contradicts the information classification scheme's stipulations, indicating a significant oversight in enforcing the ISMS policies.

#### NEW QUESTION # 246

情境 5: Data Grid Inc. 是一家知名公司，為整個資訊科技基礎設施提供安全服務。它提供網路安全軟體，包括端點安全、防火牆和防毒軟體。二十年來，Data Grid Inc. 透過先進的產品和服務幫助多家公司保護其網路安全。Data Grid Inc. 在資訊和網路安全領域享有盛譽，決定獲得 ISO/IEC 27001 認證，以更好地保護其內部和客戶資產並獲得競爭優勢。

Data Grid Inc. 任命了審計團隊，該團隊同意審計任務的條款。此外，Data Grid Inc. 明確了審核範圍，明確了審核標準，並建議在五天之內結束審核。由於 Data Grid Inc. 員工人數眾多，流程複雜，審計小組拒絕了 Data Grid Inc. 在五天之內進行審計的提議。Data Grid Inc. 堅稱他們計劃在五天之內完成審核，因此雙方同意在規定的時間內進行審核。審計小組遵循基於風險的審計方法。

為了獲得主要業務流程和控制的概述，審計團隊存取了流程描述和組織圖表。他們無法對 IT 風險和控制進行更深入的分析，因為他們對 IT 基礎架構和應用程式的存取受到限制。然而，審計小組表示，Data Grid Inc. 的 ISMS 出現重大缺陷的風險很低，因為該公司的大部分流程都是自動化的。因此，他們透過詢問 Data Grid Inc. 的代表以下問題來評估 ISMS 整體上符合標準要求：

\*如何定義和指派 IT 和 IT 控制的職責？

\*Data Grid Inc. 如何評估控制措施是否達到了預期效果？

\*Data Grid Inc. 採取了哪些控制措施來保護操作環境和資料免受惡意軟體的侵害？

\*是否實施了與防火牆相關的控制？

Data Grid Inc. 的代表提供了充分且適當的證據來解決所有這些問題。

審計組長起草審計結論並向 Data Grid Inc. 的最高管理階層報告。

儘管審核員推薦 Data Grid Inc. 進行認證，但 Data Grid Inc. 與認證機構之間在審核目標方面產生了誤解。Data Grid Inc. 表示，儘管審計目標包括確定潛在改進的領域，但審計團隊並未提供此類資訊。

根據該場景，回答以下問題：

哪種類型的審計風險被審計團隊定義為「低\*」？

- A. 固有的
- B. 檢測
- C. 控制

Answer: C

Explanation:

The audit team stated that the risk of a significant defect occurring in Data Grid Inc.'s ISMS was low. This refers to "Control Risk," which is the risk that a misstatement could occur in any relevant assertion related to an ISMS and that the risk could not be prevented or detected on a timely basis by the organization's internal control systems.

References: ISO 19011:2018, Guidelines for auditing management systems

#### NEW QUESTION # 247

您是一位經驗豐富的 ISMS 審核團隊領導，為審核員提供培訓指導。他們對風險流程的理解不清楚，並要求您向他們提供下面詳細介紹的每個流程的範例。

將提供的每項描述與下列風險管理流程之一相符。

要填寫表格，請按一下要填寫的空白部分，使其以紅色突出顯示，然後從下面的選項中按一下適用的文字。或者，您可以將每個選項拖曳到適當的空白部分。

Answer:

Explanation:

Explanation:

\* Risk analysis is the process by which the nature of the risk is determined along with its probability and impact. Risk analysis involves estimating the likelihood and consequences of potential events or situations that could affect the organization's information security objectives or requirements<sup>12</sup>. Risk analysis could use qualitative or quantitative methods, or a combination of both<sup>12</sup>.

\* Risk management is the process by which a risk is controlled at all stages of its life cycle by means of the application of organisational policies, procedures and practices. Risk management involves establishing the context, identifying, analyzing, evaluating, treating, monitoring, and reviewing the risks that could affect the organization's information security performance or

compliance<sup>12</sup>. Risk management aims to ensure that risks are identified and treated in a timely and effective manner, and that opportunities for improvement are exploited<sup>12</sup>.

\* Risk identification is the process by which a risk is recognised and described. Risk identification involves identifying and documenting the sources, causes, events, scenarios, and potential impacts of risks that could affect the organization's information security objectives or requirements<sup>12</sup>. Risk identification could use various techniques, such as brainstorming, interviews, checklists, surveys, or historical data<sup>12</sup>.

\* Risk evaluation is the process by which the impact and/or probability of a risk is compared against risk criteria to determine if it is tolerable. Risk evaluation involves comparing the results of risk analysis with predefined criteria that reflect the organization's risk appetite, tolerance, or acceptance<sup>12</sup>. Risk evaluation could use various methods, such as ranking, scoring, or matrix<sup>12</sup>. Risk evaluation helps to prioritize and decide on the appropriate risk treatment options<sup>12</sup>.

\* Risk mitigation is the process by which the impact and/or probability of a risk is reduced by means of the application of controls. Risk mitigation involves selecting and implementing measures that are designed to prevent, reduce, transfer, or accept risks that could affect the organization's information security objectives or requirements<sup>12</sup>. Risk mitigation could include various types of controls, such as technical, organizational, legal, or physical<sup>12</sup>. Risk mitigation should be based on a cost-benefit analysis and a residual risk assessment<sup>12</sup>.

\* Risk transfer is the process by which a risk is passed to a third party, for example through obtaining appropriate insurance. Risk transfer involves sharing or shifting some or all of the responsibility or liability for a risk to another party that has more capacity or capability to manage it<sup>12</sup>. Risk transfer could include various methods, such as contracts, agreements, partnerships, outsourcing, or insurance<sup>12</sup>. Risk transfer should not be used as a substitute for effective risk management within the organization<sup>12</sup>.

References :=

\* ISO/IEC 27001:2022 Information technology - Security techniques - Information security management systems - Requirements

\* ISO/IEC 27005:2022 Information technology - Security techniques - Information security risk management

#### NEW QUESTION # 248

您是經驗豐富的 ISMS 審核團隊領導，指導審核員進行培訓。她詢問您審核報告中不合格項的分級。您決定透過詢問她以下哪四個陳述是正確的來測試她的知識。

- A. 幾個輕微不符合項可以歸為一個主要不符合項
- B. 非常輕微的不符合項應重新評級為改進機會
- C. 不合格品的分級必須在首次會議上向受審核方解釋
- D. 不合格項必須僅使用術語「嚴重」或「輕微」進行分級
- E. 受審核方始終負責確定不合格品的分級標準
- F. 可以將不合格項分級以表示其重要性
- G. 解決重大不合格問題所採取的行動通常比解決輕微不合格問題所採取的行動更為實質性
- H. 重大不符合項目可能需要現場跟進

**Answer: A,F,G,H**

Explanation:

The four statements that are true are:

\*Major nonconformities may be subject to on-site follow up

\*The action taken to address major nonconformities is typically more substantial than the action taken to address minor nonconformities

\*Several minor nonconformities can be grouped into a major nonconformity

\*Nonconformities may be graded to indicate their significance

According to ISO 19011:2018, a nonconformity is the non-fulfilment of a requirement<sup>1</sup>. Nonconformities may be graded to indicate their significance, based on the criteria established by the audit programme or the audit client<sup>2</sup>. The grading of nonconformities may use different terms or levels, such as major, minor, critical, etc., depending on the nature and context of the audit<sup>3</sup>. However, some common definitions of major and minor nonconformities are:

\*A major nonconformity is a nonconformity that affects the ability of the management system to achieve its intended results, or that represents a significant breakdown of the management system<sup>4</sup>. Major nonconformities may require immediate corrective action and on-site follow up by the auditor to verify their closure<sup>5</sup>.

\*A minor nonconformity is a nonconformity that does not affect the ability of the management system to achieve its intended results, or that represents an isolated lapse of the management system<sup>4</sup>. Minor nonconformities may require corrective action within a specified time frame and off-site verification by the auditor to confirm their closure<sup>5</sup>.

The action taken to address nonconformities depends on the severity and impact of the nonconformity, and the risk of recurrence or escalation. Typically, the action taken to address major nonconformities is more substantial than the action taken to address minor nonconformities, as it may involve identifying and eliminating the root cause of the problem, implementing preventive measures, and monitoring the effectiveness of the solution.

Several minor nonconformities can be grouped into a major nonconformity if they are related to the same requirement, process, or



area, and if they indicate a systemic failure or a significant risk to the management system. The auditor should use professional judgment and evidence-based approach to decide whether to group or report nonconformities individually.

The other statements are false, based on the guidance of ISO 19011:2018. For example:

\*Option B is false, because nonconformities can be graded using different terms or levels, depending on the criteria established by the audit programme or the audit client<sup>2</sup>. The terms 'major' and 'minor' are not mandatory or universal, but rather examples of possible grading levels<sup>3</sup>.

\*Option D is false, because very minor nonconformities should not be re-graded as opportunities for improvement, but rather reported as nonconformities, as they still represent a non-fulfilment of a requirement<sup>1</sup>. An opportunity for improvement is a suggestion for enhancing the performance or effectiveness of the management system, but it is not a nonconformity or a requirement.

\*Option F is false, because the grading of nonconformities does not have to be explained to the auditee at the opening meeting, but rather at the closing meeting, where the audit findings and conclusions are presented and discussed. The opening meeting is intended to provide an overview of the audit objectives, scope, criteria, and methods, and to confirm the audit arrangements and logistics.

\*Option G is false, because the auditee is not always responsible for determining the criteria for grading nonconformities, but rather the audit programme or the audit client, in consultation with the auditee and other relevant parties<sup>2</sup>. The auditee is responsible for taking corrective action to address the nonconformities, and for providing evidence of their completion and effectiveness.

References: 1: ISO 19011:2018, 3.13; 2: ISO 19011:2018, 6.6.2; 3: ISO 19011:2018, 6.6.3; 4: ISO Audit Findings :Non-conformance - AUVA Certification<sup>1</sup>; 5: Annex III: Nonconformity grading - FSSC2; : ISO

27001 Certification - Major vs. Minor Nonconformities - Advisera<sup>3</sup>; : GUIDANCE FOR ADDRESSING AND CLEARING NONCONFORMITIES - SADCAS<sup>4</sup>; : ISO 19011:2018, 6.2; : ISO 19011:2018, 3.14; :

ISO 19011:2018, 6.7; : ISO 19011:2018, 6.4; : ISO 19011:2018, 6.7.2; : ISO 19011:2018; : ISO 19011:2018; :

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## NEW QUESTION # 249

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