

# **2025 ISO-IEC-27001-Lead-Auditor-CN: PECB Certified ISO/IEC 27001 Lead Auditor exam (ISO-IEC-27001-Lead-Auditor中文版) Perfect Valid Test Vce**



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**PECB Certified ISO/IEC 27001 Lead Auditor exam (ISO-IEC-27001-Lead-**

## Auditor 中文版) Sample Questions (Q176-Q181):

### NEW QUESTION # 176

您是 ISMS 審核小組組長，由您的認證機構指派對客戶進行後續審核。您正在為此審核準備審核計畫。下列哪兩項敘述是正確的？

- A. 應先驗證改進機會，然後再修正，最後採取糾正措施
- B. 應先檢視糾正措施，然後是糾正，最後是改進機會
- C. 驗證應重點關注所採取的任何行動是否有效
- D. 驗證應重點關注所採取的任何行動是否有效
- E. 應先驗證糾正措施，然後是糾正措施，最後是改進機會
- F. 驗證應專注於所採取的任何操作是否完成

**Answer: C,F**

Explanation:

According to ISO 27001:2022 clause 9.1.2, the organisation shall conduct internal audits at planned intervals to provide information on whether the information security management system conforms to the organisation's own requirements, the requirements of ISO 27001:2022, and is effectively implemented and maintained. According to ISO 27001:2022 clause 10.1, the organisation shall react to the nonconformities and take action, as applicable, to control and correct them and deal with the consequences. The organisation shall also evaluate the need for action to eliminate the causes of nonconformities, in order to prevent recurrence or occurrence.

The organisation shall implement any action needed, review the effectiveness of any corrective action taken, and make changes to the information security management system, if necessary. A follow-up audit is a type of internal audit that is conducted after a previous audit to verify whether the nonconformities and corrective actions have been addressed and resolved, and whether the information security management system has been improved. Therefore, the following statements are true for preparing a follow-up audit plan:

- \* Verification should focus on whether any action undertaken is complete. This means that the auditor should check whether the organisation has implemented all the planned actions to correct and prevent the nonconformities, and whether the actions have been documented and communicated as required.
- \* Verification should focus on whether any action undertaken has been undertaken effectively. This means that the auditor should check whether the organisation has achieved the intended results and objectives of the actions, and whether the actions have eliminated or reduced the nonconformities and their causes and consequences. The following statements are false for preparing a follow-up audit plan:
  - \* Verification should focus on whether any action undertaken has been undertaken efficiently. This is false because efficiency is not a criterion for verifying the actions taken to address the nonconformities and corrective actions. Efficiency refers to the optimal use of resources to achieve the desired outcomes, but it is not a requirement of ISO 27001:2022. The auditor should focus on the effectiveness and completeness of the actions, not on the efficiency.
  - \* Corrections should be verified first, followed by corrective actions and finally opportunities for improvement. This is false because there is no prescribed order for verifying the corrections, corrective actions, and opportunities for improvement. The auditor should verify all the actions taken by the organisation, regardless of their sequence or priority. The auditor may choose to verify the actions based on their relevance, significance, or impact, but this is not a mandatory requirement.
  - \* Opportunities for improvement should be verified first, followed by corrections and finally corrective actions. This is false because there is no prescribed order for verifying the opportunities for improvement, corrections, and corrective actions. The auditor should verify all the actions taken by the organisation, regardless of their sequence or priority. The auditor may choose to verify the actions based on their relevance, significance, or impact, but this is not a mandatory requirement.
  - \* Corrective actions should be reviewed first, followed by corrections and finally opportunities for improvement. This is false because there is no prescribed order for reviewing the corrective actions, corrections, and opportunities for improvement. The auditor should review all the actions taken by the organisation, regardless of their sequence or priority. The auditor may choose to review the actions based on their relevance, significance, or impact, but this is not a mandatory requirement.

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 # 177

關於產生審計結果，請選擇最能完成以下句子的單字。

要使用最佳單字完成句子，請按一下要完成的空白部分，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，您可以將該選項拖曳到適當的空白部分。

"\_\_\_\_\_ should be evaluated against the \_\_\_\_\_ in order to determine audit findings."

Audit conclusion

Audit evidence

Audit objective

Audit criteria

Audit scope

**Answer:**

**Explanation:**

"**Audit evidence** should be evaluated against the **Audit criteria** in order to determine audit findings."

Audit conclusion

Audit evidence

Audit objective

Audit criteria

Audit scope

**Explanation:**

Audit evidence should be evaluated against the audit criteria in order to determine audit findings.

- \* Audit evidence is the information obtained by the auditors during the audit process that is used as a basis for forming an audit opinion or conclusion<sup>12</sup>. Audit evidence could include records, documents, statements, observations, interviews, or test results<sup>12</sup>.
- \* Audit criteria are the set of policies, procedures, standards, regulations, or requirements that are used as a reference against which audit evidence is compared<sup>12</sup>. Audit criteria could be derived from internal or external sources, such as ISO standards, industry best practices, or legal obligations<sup>12</sup>.
- \* Audit findings are the results of a process that evaluates audit evidence and compares it against audit criteria<sup>13</sup>. Audit findings can show that audit criteria are being met (conformity) or that they are not being met (nonconformity). They can also identify best practices or improvement opportunities<sup>13</sup>.

References :=

- \* ISO 19011:2022 Guidelines for auditing management systems
- \* ISO/IEC 27001:2022 Information technology - Security techniques - Information security management systems - Requirements
- \* Components of Audit Findings - The Institute of Internal Auditors

#### **NEW QUESTION # 178**

您正在一家提供醫療保健服務的住宅療養院進行 ISMS 初始認證審核。審計計劃的下一步是召開末次會議。在最終審核小組會議上，身為審核組組長，您同意報告 2 項輕微不符合項和 1 項改進機會，如下：

| Cosmic Certifications Limited      |                                                                                                                                                                                                                                                                                          |       |                               |                                  |
|------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------|----------------------------------|
| Summary of audit findings:         |                                                                                                                                                                                                                                                                                          |       |                               |                                  |
| Opportunities for Improvement (OI) |                                                                                                                                                                                                                                                                                          |       |                               |                                  |
| Item                               | Findings                                                                                                                                                                                                                                                                                 |       | Requirements                  | Follow-up                        |
| 1.                                 | The organisation should improve the overall awareness of information security incident management responsibility and process.                                                                                                                                                            |       | Clause 7.4 and Control A.5.24 | N/A                              |
| Nonconformities (NCs)              |                                                                                                                                                                                                                                                                                          |       |                               |                                  |
| Item                               | Findings                                                                                                                                                                                                                                                                                 | Grade | Requirements                  | Follow-up                        |
| 1.                                 | During the audit on the outsourced process, sampling one of the outsourced service contracts with WeCare the medical device manufacturer found that ABC does not include personal data protection and legal compliance as part of the information security requirements in the contract. | Minor | Clause 4.2 and Control A.5.20 | Corrective actions are required. |
| 2.                                 | During the audit on information security during the business continuity process, sampling one of the service continuity and recovery plans for the resident's healthy status monitoring service. The auditor found the recovery plan has not yet been tested.                            | Minor | Clause 8.1 and Control A.5.29 | Corrective actions are required. |
| signed by Audit                    |                                                                                                                                                                                                                                                                                          |       |                               |                                  |
| Team Leader                        |                                                                                                                                                                                                                                                                                          |       |                               |                                  |

選擇您將在最後一次會議上向受審核方提供建議的審核專案經理的建議選項。

- A. 建議在未來某個日期進行突擊審核
- B. 建議在 6 個月內進行全面的重新審核
- C. 立即推薦認證
- D. 建議在 3 個月內進行部分審核
- E. 在您批准擬議的糾正措施計劃後建議進行認證 建議可以在 1 年內透過監督審核結束調查結果

**Answer: E**

Explanation:

According to ISO/IEC 17021-1:2015, which specifies the requirements for bodies providing audit and certification of management systems, clause 9.4.9 requires the certification body to make a certification decision based on the information obtained during the audit and any other relevant information<sup>1</sup>. The certification body should also consider the effectiveness of the corrective actions taken by the auditee to address any nonconformities identified during the audit<sup>1</sup>. Therefore, when making a recommendation to the audit programme manager, an ISMS auditor should consider the nature and severity of the nonconformities and the proposed corrective actions.

Based on the scenario above, the auditor should recommend certification after their approval of the proposed corrective action plan and recommend that the findings can be closed out at a surveillance audit in 1 year. The auditor should provide the following justification for their recommendation:

Justification: This recommendation is appropriate because it reflects the fact that the auditee has only two minor nonconformities and one opportunity for improvement, which do not indicate a significant or systemic failure of their ISMS. A minor nonconformity is defined as a failure to achieve one or more requirements of ISO/IEC 27001:2022 or a situation which raises significant doubt about the ability of an ISMS process to achieve its intended output, but does not affect its overall effectiveness or conformity<sup>2</sup>. An opportunity for improvement is defined as a suggestion for improvement beyond what is required by ISO/IEC 27001:2022.

Therefore, these findings do not prevent or preclude certification, as long as they are addressed by appropriate corrective actions within a reasonable time frame. The auditor should approve the proposed corrective action plan before recommending certification, to ensure that it is realistic, achievable, and effective. The auditor should also recommend that the findings can be closed out at a surveillance audit in 1 year, to verify that the corrective actions have been implemented and are working as intended.

The other options are not valid recommendations for the audit programme manager, as they are either too lenient or too strict for the given scenario. For example:

Recommend certification immediately: This option is not valid because it implies that the auditor ignores or accepts the nonconformities, which is contrary to the audit principles and objectives of ISO 19011:2018<sup>2</sup>, which provides guidelines for auditing management systems. It also contradicts the requirement of ISO/IEC 17021-1:2015<sup>1</sup>, which requires the certification body to consider the effectiveness of the corrective actions taken by the auditee before making a certification decision.

Recommend that a full scope re-audit is required within 6 months: This option is not valid because it implies that the auditor overreacts or exaggerates the nonconformities, which is contrary to the audit principles and objectives of ISO 19011:2018<sup>2</sup>. It also contradicts the requirement of ISO/IEC 17021-1:2015<sup>1</sup>, which requires the certification body to determine whether a re-audit is necessary based on the nature and extent of nonconformities and other relevant factors. A full scope re-audit is usually reserved for

major nonconformities or multiple minor nonconformities that indicate a serious or widespread failure of an ISMS.

Recommend that an unannounced audit is carried out at a future date: This option is not valid because it implies that the auditor distrusts or doubts the auditee's commitment or capability to implement corrective actions, which is contrary to the audit principles and objectives of ISO 19011:20182. It also contradicts the requirement of ISO/IEC 17021-1:20151, which requires the certification body to conduct unannounced audits only under certain conditions, such as when there are indications of serious problems with an ISMS or when required by sector-specific schemes.

Recommend that a partial audit is required within 3 months: This option is not valid because it implies that the auditor imposes or prescribes a specific time frame or scope for verifying corrective actions, which is contrary to the audit principles and objectives of ISO 19011:20182. It also contradicts the requirement of ISO/IEC 17021-1:20151, which requires the certification body to determine whether a partial audit is necessary based on the nature and extent of nonconformities and other relevant factors. A partial audit may be appropriate for minor nonconformities, but the time frame and scope should be agreed upon with the auditee and based on the proposed corrective action plan.

### NEW QUESTION # 179

您正在作為審核組組長進行您的第一次第三方 ISMS 監督審核。您目前與審核團隊的另一位成員一起在被審核方的資料中心。

您目前所在的大房間被分成幾個較小的房間，每個房間的門上都有一個數位密碼鎖和刷卡器。您注意到兩個外部承包商使用中心接待台提供的刷卡和組合號碼進入客戶的套房進行授權的電氣維修。

您前往接待處並要求查看客戶套房的門禁記錄。這表示只刷了一張卡。你問接待員，他們回答說：“是的，這是一個常見問題。我們要求每個人都刷卡，但尤其是承包商，一個人往往會刷卡，而其他人只是‘尾隨’進來”，但我們知道他們是誰接待處簽到。

根據上述情況，您現在會採取下列哪一項行動？

- A. 由於安全區域未充分保護，因此針對控制 A.7.2「物理進入」提出不符合項
- B. 由於尚未與供應商就資訊安全要求達成一致，因此針對控制措施 A.5.20「解決供應商關係中的資訊安全問題」提出不符合項
- C. 告訴組織他們必須寫信給承包商，提醒他們需要適當使用門禁卡
- D. 不採取任何行動。無論有什麼建議，承包商都將始終以這種方式行事
- E. 針對控制 A.7.6「在安全區域工作」提出不符合項，因為尚未定義在安全區域工作的安全措施
- F. 確定是否有任何額外的有效安排來驗證個人對安全區域（例如閉路電視）的存取權限
- G. 提供改進機會，承包商在訪問安全設施時必須始終有人陪同
- H. 提供改進機會，在接待處設置大型標牌，提醒每個需要進入的人必須始終使用刷卡

**Answer: A**

Explanation:

According to ISO/IEC 27001:2022, which specifies the requirements for establishing, implementing, maintaining and continually improving an information security management system (ISMS), control A.7.2 requires an organization to implement appropriate physical entry controls to prevent unauthorized access to secure areas<sup>1</sup>. The organization should define and document the criteria for granting and revoking access rights to secure areas, and should monitor and record the use of such access rights<sup>1</sup>. Therefore, when auditing the organization's application of control A.7.2, an ISMS auditor should verify that these aspects are met in accordance with the audit criteria.

Based on the scenario above, the auditor should raise a nonconformity against control A.7.2, as the secure area is not adequately protected from unauthorized access. The auditor should provide the following evidence and justification for the nonconformity:

Evidence: The auditor observed two external contractors using a swipe card and combination number provided by the centre's reception desk to gain access to a client's suite to carry out authorized electrical repairs. The auditor checked the door access record for the client's suite and found that only one card was swiped. The auditor asked the receptionist and was told that it was a common problem that contractors tend to swipe one card and tailgate their way in, but they were known from the reception sign-in.

Justification: This evidence indicates that the organization has not implemented appropriate physical entry controls to prevent unauthorized access to secure areas, as required by control A.7.2. The organization has not defined and documented the criteria for granting and revoking access rights to secure areas, as there is no verification or authorization process for providing swipe cards and combination numbers to external contractors. The organization has not monitored and recorded the use of access rights to secure areas, as there is no mechanism to ensure that each individual swipes their card and enters their combination number before entering a secure area. The organization has relied on the reception sign-in as a means of identification, which is not sufficient or reliable for ensuring information security.

The other options are not valid actions for auditing control A.7.2, as they are not related to the control or its requirements, or they are not appropriate or effective for addressing the nonconformity. For example:

Take no action: This option is not valid because it implies that the auditor ignores or accepts the nonconformity, which is contrary to the audit principles and objectives of ISO 19011:20182, which provides guidelines for auditing management systems.

Raise a nonconformity against control A.5.20 'addressing information security in supplier relationships' as information security

requirements have not been agreed upon with the supplier: This option is not valid because it does not address the root cause of the nonconformity, which is related to physical entry controls, not supplier relationships. Control A.5.20 requires an organization to agree on information security requirements with suppliers that may access, process, store, communicate or provide IT infrastructure components for its information assets<sup>1</sup>. While this control may be relevant for ensuring information security in supplier relationships, it does not address the issue of unauthorized access to secure areas by external contractors.

Raise a nonconformity against control A.7.6 'working in secure areas' as security measures for working in secure areas have not been defined: This option is not valid because it does not address the root cause of the nonconformity, which is related to physical entry controls, not working in secure areas. Control A.7.6 requires an organization to define and apply security measures for working in secure areas<sup>1</sup>. While this control may be relevant for ensuring information security when working in secure areas, it does not address the issue of unauthorized access to secure areas by external contractors.

Determine whether any additional effective arrangements are in place to verify individual access to secure areas e.g. CCTV: This option is not valid because it does not address or resolve the nonconformity, but rather attempts to find alternative or compensating controls that may mitigate its impact or likelihood. While additional arrangements such as CCTV may be useful for verifying individual access to secure areas, they do not replace or substitute the requirement for appropriate physical entry controls as specified by control A.7.2.

Raise an opportunity for improvement that contractors must be accompanied at all times when accessing secure facilities: This option is not valid because it does not address or resolve the nonconformity, but rather suggests a possible improvement action that may prevent or reduce its recurrence or severity. While accompanying contractors at all times when accessing secure facilities may be a good practice for ensuring information security, it does not replace or substitute the requirement for appropriate physical entry controls as specified by control A.7.2.

Raise an opportunity for improvement to have a large sign in reception reminding everyone requiring access must use their swipe card at all times: This option is not valid because it does not address or resolve the nonconformity, but rather suggests a possible improvement action that may increase awareness or compliance with the existing controls. While having a large sign in reception reminding everyone requiring access must use their swipe card at all times may be a helpful reminder for ensuring information security, it does not replace or substitute the requirement for appropriate physical entry controls as specified by control A.7.2.

Tell the organisation they must write to their contractors, reminding them of the need to use access cards appropriately: This option is not valid because it does not address or resolve the nonconformity, but rather instructs the organization to take a corrective action that may not be effective or sufficient for ensuring information security. While writing to contractors, reminding them of the need to use access cards appropriately may be a communication measure for ensuring information security, it does not replace or substitute the requirement for appropriate physical entry controls as specified by control A.7.2.

### NEW QUESTION # 180

您是一位經驗豐富的 ISMS 審核團隊領導，為 ISMS 審核員提供訓練指導。他們被要求對外部提供者進行評估，並準備了一份包含以下活動的清單。他們要求您查看他們的清單，以確認他們提議的行動是適當的。

他們受邀參加的審核是對資料中心的第三方監督審核。資料中心代理是更廣泛的電信集團的一部分。集團內的每個資料中心都運行自己的 ISMS 並持有自己的憑證。

選擇與 ISO/IEC 27001:2022 有關外部提供者的要求相關的三個選項。

- A. 我將把審核活動限制在外部提供的流程中，因為不需要審核外部提供的產品或服務
- B. 我將確保最高管理階層為提供外部 ISMS 流程和內部 ISMS 流程的人員分配角色和職責
- C. 我將確保外部提供者制定書面流程，以通知組織因使用其產品或服務而產生的任何風險
- D. 我將確保組織對其外部提供者進行排名，並將大部分工作分配給那些評級最高的供應商
- E. 我將確保組織已確定需要與外部提供者就 ISMS 進行溝通
- F. 我將確保組織定期監控、審查和評估外部提供者的績效
- G. 我會檢查其他資料中心是否被視為外部供應商，即使它們屬於同一電信集團
- H. 我將確保該組織為其確定的對於保護其資訊的機密性、完整性和可訪問性至關重要的每個流程都有一個備用外部提供商

**Answer: C,F,G**

Explanation:

\* A. I will check the other data centres are treated as external providers, even though they are part of the same telecommunication group. This is appropriate because clause 8.1.4 of ISO 27001:2022 requires the organisation to ensure that externally provided processes, products or services that are relevant to the information security management system are controlled. Externally provided processes, products or services are those that are provided by any external party, regardless of the degree of its relationship with the organisation. Therefore, the other data centres within the same telecommunication group should be treated as external providers and subject to the same controls as any other external provider<sup>12</sup>

\* B. I will ensure external providers have a documented process in place to notify the organisation of any risks arising from the use of its products or services. This is appropriate because clause 8.1.4 of ISO 27001:2022 requires the organisation to implement appropriate contractual requirements related to information security with external

providers. One of the contractual requirements could be the obligation of the external provider to notify the organisation of any risks arising from the use of its products or services, such as security incidents, vulnerabilities, or changes that could affect the information security of the organisation. The external provider should have a documented process in place to ensure that such notification is timely, accurate, and complete<sup>12</sup>

\* E. I will ensure the organisation is regularly monitoring, reviewing and evaluating external provider performance. This is appropriate because clause 8.1.4 of ISO 27001:2022 requires the organisation to monitor, review and evaluate the performance and effectiveness of the externally provided processes, products or services. The organisation should have a process in place to measure and verify the conformity and suitability of the external provider's deliverables and activities, and to provide feedback and improvement actions as necessary. The organisation should also maintain records of the monitoring, review and evaluation results<sup>12</sup>

\* F. I will ensure the organisation has determined the need to communicate with external providers regarding the ISMS. This is appropriate because clause 7.4.2 of ISO 27001:2022 requires the organisation to determine the need for internal and external communications relevant to the information security management system, including the communication with external providers. The organisation should define the purpose, content, frequency, methods, and responsibilities for such communication, and ensure that it is consistent with the information security policy and objectives. The organisation should also retain documented information of the communication as evidence of its implementation<sup>12</sup> The following activities are not appropriate for the assessment of external providers according to ISO 27001:

2022:

\* C. I will ensure that the organisation has a reserve external provider for each process it has identified as critical to preservation of the confidentiality, integrity and accessibility of its information. This is not appropriate because ISO 27001:2022 does not require the organisation to have a reserve external provider for each critical process. The organisation may choose to have a contingency plan or a backup solution in case of failure or disruption of the external provider, but this is not a mandatory requirement. The organisation should assess the risks and opportunities associated with the external provider and determine the appropriate treatment options, which may or may not include having a reserve external provider<sup>12</sup>

\* D. I will limit my audit activity to externally provided processes as there is no need to audit externally provided products or services. This is not appropriate because clause 8.1.4 of ISO 27001:2022 requires the organisation to control the externally provided processes, products or services that are relevant to the information security management system. Externally provided products or services may include software, hardware, data, or cloud services that could affect the information security of the organisation. Therefore, the audit activity should cover both externally provided processes and products or services, as applicable<sup>12</sup>

\* G. I will ensure that top management have assigned roles and responsibilities for those providing external ISMS processes as well as internal ISMS processes. This is not appropriate because clause 5.3 of ISO 27001:2022 requires the top management to assign the roles and responsibilities for the information security management system within the organisation, not for the external providers. The external providers are responsible for assigning their own roles and responsibilities for the processes, products or services they provide to the organisation. The organisation should ensure that the external providers have adequate competence and awareness for their roles and responsibilities, and that they are contractually bound to comply with the information security requirements of the organisation<sup>12</sup>

\* H. I will ensure that the organisation ranks its external providers and allocates the majority of its work to those providers who are rated the highest. This is not appropriate because ISO 27001:2022 does not require the organisation to rank its external providers or to allocate its work based on such ranking. The organisation may choose to evaluate and compare the performance and effectiveness of its external providers, but this is not a mandatory requirement. The organisation should select and use its external providers based on the information security criteria and objectives that are relevant to the organisation<sup>12</sup> 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 # 181

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