



DIGITALISERINGSSTYRELSEN

# Audit guide for Public policy for qualified signature and seal validation

version 1.0

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Version: 1.0

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## 1. Introduction

In connection with the Danish Agency for Digitisation's supervision of trust service providers offering qualified signature and seal validation, a conformity assessment report from a conformity assessment body shall be enclosed (cf. eIDAS article 20(1)).

The purpose of this document is:

- to describe the scope of the conformity audit for trust service providers that apply the public policy for qualified signature and seal validation, version 1.0;
- to provide examples and guidance on the preparation of audits and assessments, and
- to describe the requirements for the final conformity assessment report which can be used by the trust service provider and the conformity assessment body.

This document is targeted at trust service providers applying

- Public policy for qualified signature and seal validation version 1.0

and conformity assessment bodies that assess such trust service providers.

Readers of this document are expected to be familiar with the eIDAS Regulation and the above validation policy.

## 2. Guide

### 2.1 Assessment form

As a supplement to this document, a form has been prepared (see Annex A) which is to be filled in and attached to the conformity assessment report. The form contains the requirements from the validation policy and related fields to be filled in by the trust service provider and the conformity assessment body, respectively.

The first columns contain all requirements from the validation policy presented in a structured format and constitute the primary documentation for compliance with the requirements.

Next to the respective requirements, the form has two columns to be filled in by the trust service provider and two columns to be filled in afterwards by the conformity assessment body:

#### Bilag A - Skema for kravgenngang

| Kravnr. | Kravtekst | Tilføjelsestjenestudbyders opfyldelse | Tilføjelsestjenestudbyders kontrolmål | Revisionshandlingar | Resultat af revision |
|---------|-----------|---------------------------------------|---------------------------------------|---------------------|----------------------|
|---------|-----------|---------------------------------------|---------------------------------------|---------------------|----------------------|

The purpose of the individual columns are described below:

- **“Tillidstjenesteudbyderens beskrivelse af opfyldelse” - Trust service provider's description of compliance (VA practice statement)**  
Here, the trust service provider describes how the related requirements are met. This account contains a description of any implemented technical, procedural or organizational measures as described in the VA practice statement (see clause 6.2 of the validation policy).
- **“Tillidstjenesteudbydernes beskrivelse af kontrolmål” - Trust service provider's description of SMART goals**  
Here, the trust service provider uses SMART-goals to describe how to check whether the described practice has been observed/implemented. This item should be formulated as a SMART<sup>1</sup> requirement to make sure that it is clear and measurable.
- **“Revisionshåndlinger ved udført vurdering” - Audit actions for completed assessments**  
Here, the conformity assessment body specifies the types of actions used in the assessment of the specific requirement
- **“Resultat af udført revision” - Outcome of completed audit**  
Here, the conformity assessment body gives a conclusion regarding the completed assessment of the relevant requirement.

It is recommended to use the following principles in the selection of audit actions:

| Principle                    | Description  |
|------------------------------|--|
| <b>Inquiry</b>               | Interview, meeting, inquiry with responsible staff at the trust service provider   |
| <b>Observation</b>           | Observation of the completion of control   |
| <b>Inspection</b>            | Review and evaluation of policies, procedures and documentation regarding the outcome of the control. That includes review and evaluation of reports and other documentation to assess whether controls have been prepared and implemented. Moreover, it is assessed whether controls are monitored and checked at appropriate intervals |
| <b>Repetition of control</b> | Repetition of the relevant control elements to verify the execution of the control functions   |

<sup>1</sup> Specific, Measurable, Achievable, Relevant and Time-bound

Please note that the filling in by the trust service provider of the form (Annex A) should be comprehensive and self-contained. However, it is permitted to refer to documents appended in Annex A for further details (e.g. technical documentation, IT security certificates and/or protection of personal data - e.g. ISO 2700x certificate, various ISAE declarations). Please note that the description in the form should be sufficient to provide a coherent account of how the requirements has been observed.

## 2.2 Example of how to fill in the form

The following gives a short example of how to fill in the form. Focus is on illustrating the logic of the form and not on providing an exhaustive and realistic example.

The example is based on **[REQ 6.1-01]** Risk assessment:

### REQ 6.1-01

The VA shall carry out a risk assessment to identify, analyse and evaluate business and technical risks.

#### Trust service provider's description of compliance (VA practice statement)

*The VA undertakes biannual risk assessments. Risk assessments are also undertaken in connection with major organizational, operational or technical changes related to the service provided. CISO decides whether the scope of a change calls for a risk assessment.*

*The risk assessment will be submitted to management.*

#### Trust service provider's description of SMART goals

*All risk assessments are signed by management and will be archived for at least 7 years. Internal audit regularly and at least once a year checks the availability of risk assessments for the preceding period that have been signed by management.*

#### Audit actions for completed assessments

*It has been checked that 3 risk assessments, which have been signed by management, are available for the audit period covering the ordinary assessments as well as a major organizational change. No other organizational, operational or technical changes have been identified during the period with a scope that calls for a separate risk assessment.*

#### Outcome of completed assessment

*The audit has not given rise to any comments and it can be concluded that the procedures and controls described have been implemented and are effective.*

### 3. Requirements for the conformity assessment report

In addition to filling in the above form, the conformity assessment body shall prepare a specific auditor's record (audit report) regarding the trust service provider's solution. The audit report shall be prepared in accordance with the ISAE 3000 standard or a similar standard, and a high degree of certainty must be achieved under this standard.

The purpose of the audit report is to conclude (based on the content in the form – Annex A – for the individual requirements) whether the trust service provider, overall, has managed to establish all relevant procedures and that the design and functionality of controls related to the procedures are effective. All requirements for the validation policy shall thus be met before the solution will be compliant with the validation policy.

The trust service provider is responsible for preparing all relevant procedures and controls for ensuring compliance with the requirements of the validation policy.

The conformity assessment body is responsible for formulating a conclusion as to whether the procedures and controls defined by management were appropriately designed and implemented at the time of the conformity assessment, and whether they worked appropriately throughout the reporting period (see section 3.1. 'Period of the conformity assessment report' below).

Annex A specifies SMART goals that must be considered by the audit report as well as examples of specific audit actions that can be carried out. The conformity assessment shall comprise procedures and controls within all SMART goals. The conformity assessment body is responsible for adapting the audit actions to the specific procedures and controls established by the trust service provider.

#### 3.1. Period of the conformity assessment report

In the event of a new solution/tender service from the trust service provider, an ISAE 3000 type 1 report may be used as the first record, and the report period may comprise a given date that does not exceed 90 days from the reporting date for the Danish Agency for Digitisation.

The trust service provider shall then submit a corresponding ISAE 3000 type 2 report annually prepared by a conformity assessment body. The reporting period for such reports shall run from the date of the latest report.

Under any circumstance, the trust service provider is responsible for subcontractors that undertake checks or delivers relevant services on behalf of the trust service provider. To the extent that the trust service provider uses subcontractors, the audit must also include relevant subcontractors.

In connection with the review of the conformity assessment report (the audit report) from trust service providers, the Danish Agency for Digitisation will apply

SMART goals from the table (Annex A) to assess whether the conformity assessment body's audit report covers the required matters. In case of areas that are not relevant, the conformity assessment body shall provide reasons for why the particular matter is irrelevant. In case of significant matters that are not included in the areas below, such areas must be included in the audit report provided.

In case of a qualified audit report, the trust service provider may lose the right to provide the trust service in question. If the report includes comments (usually of minor importance), the Danish Agency for Digitisation must receive a written statement from the trust service containing an account of the matters and a detailed action plan and time schedule for the remediation of the matter not later than 60 calendar days from the expiry of the reporting period. If the trust service fails to observe this, it may lose the right to provide the trust service in question.