STPA Introduction

Dr. John Thomas

Any questions? Email me! JThomas4@mit.edu

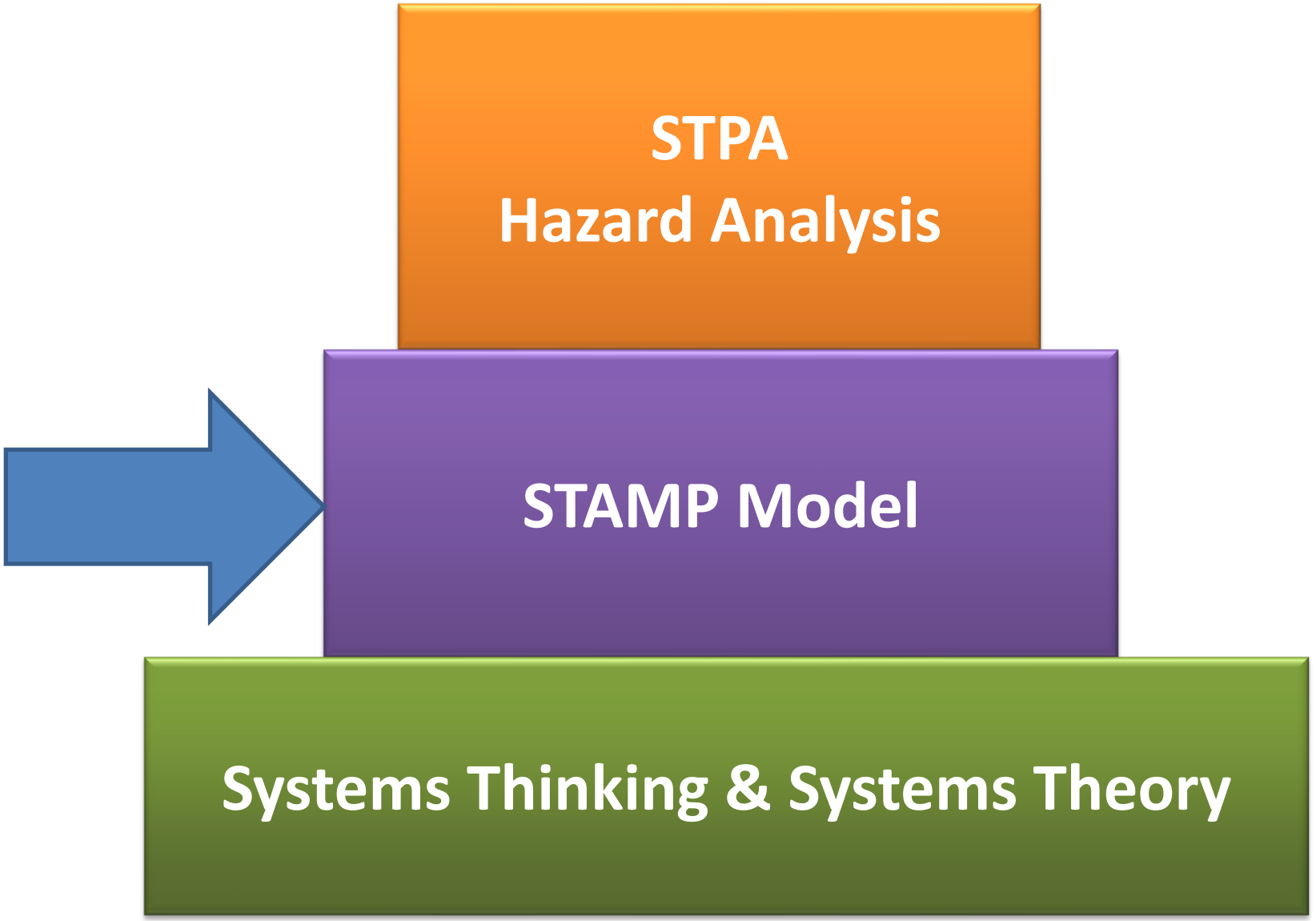
Tutorial Objective

- These short tutorials are **not training classes**
- We cannot cover everything in these tutorial sessions.
- The objective is to introduce some of the core concepts so new attendees can follow the presentations this week.
- Training and practice with a qualified instructor are needed to apply these techniques and become proficient (as with most techniques). These short tutorials are subsets of larger training classes.

This STPA introduction is **not a training class**

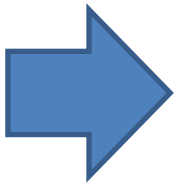
	Today	Actual Training & Collaborative Projects
Goal	Provide basic STPA familiarity to follow the presentations	Build capability to apply STPA proficiently to a real system.
Duration	< 5.5 hours	Training: ~40 hours of hands-on instruction
Hands-on Practice	Minimal	Extensive, using real-world applications
Complexity of Examples	Minimal	Moderate - High
Analysis Depth/Quality	Superficial	High-quality, correct, and careful analysis. Details matter. Will generate new engineering insights, uncover new flaws, produce real technical requirements.
Exit Criteria	Clock = 10:30	Participants demonstrate proficiency applying STPA themselves on a real system, satisfy 25 certification criteria, and receive a certificate
Instructor Feedback Loop	Minimal	Loop: - Introduce new step / concept - Practice new step / concept - Performance reviewed - Gaps in skill and knowledge identified - Corrections made - Repeat

System Theory, STAMP, STPA



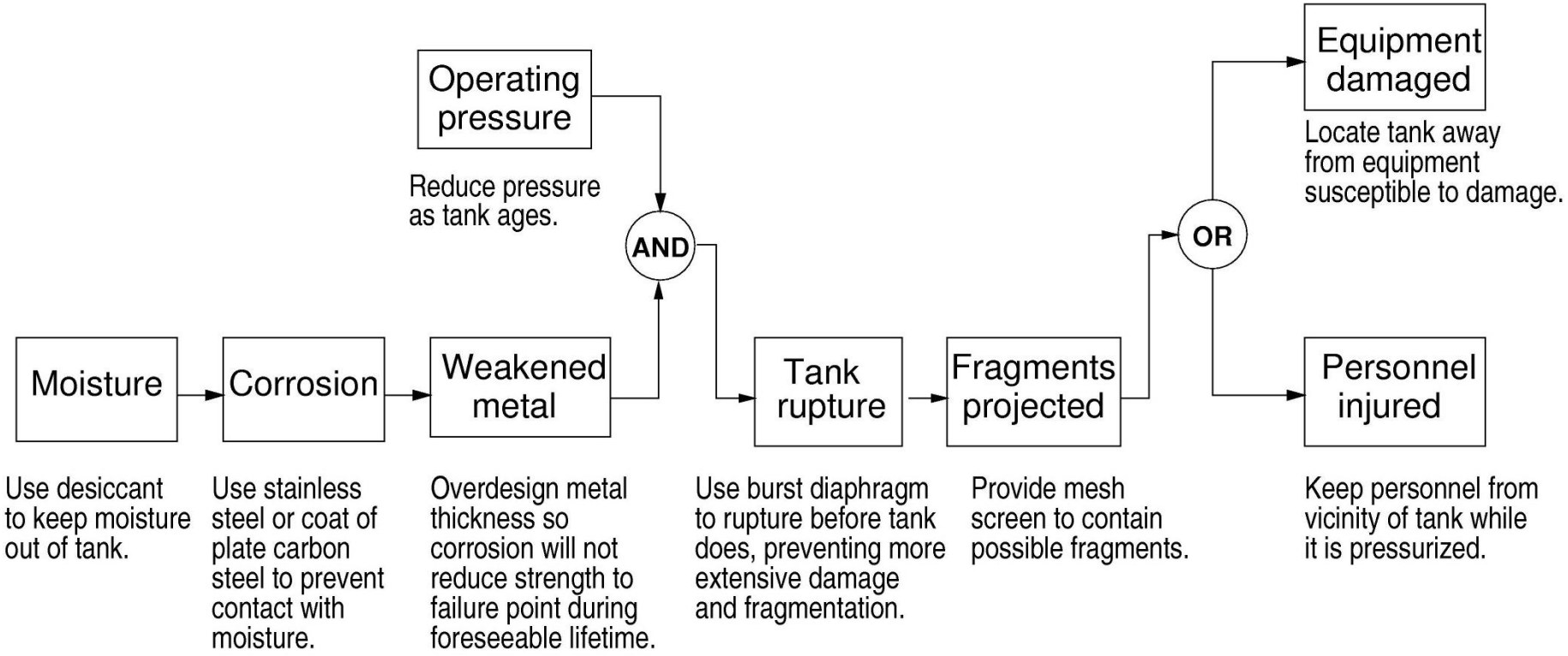
(Leveson, 2012)

STAMP is an Accident Model

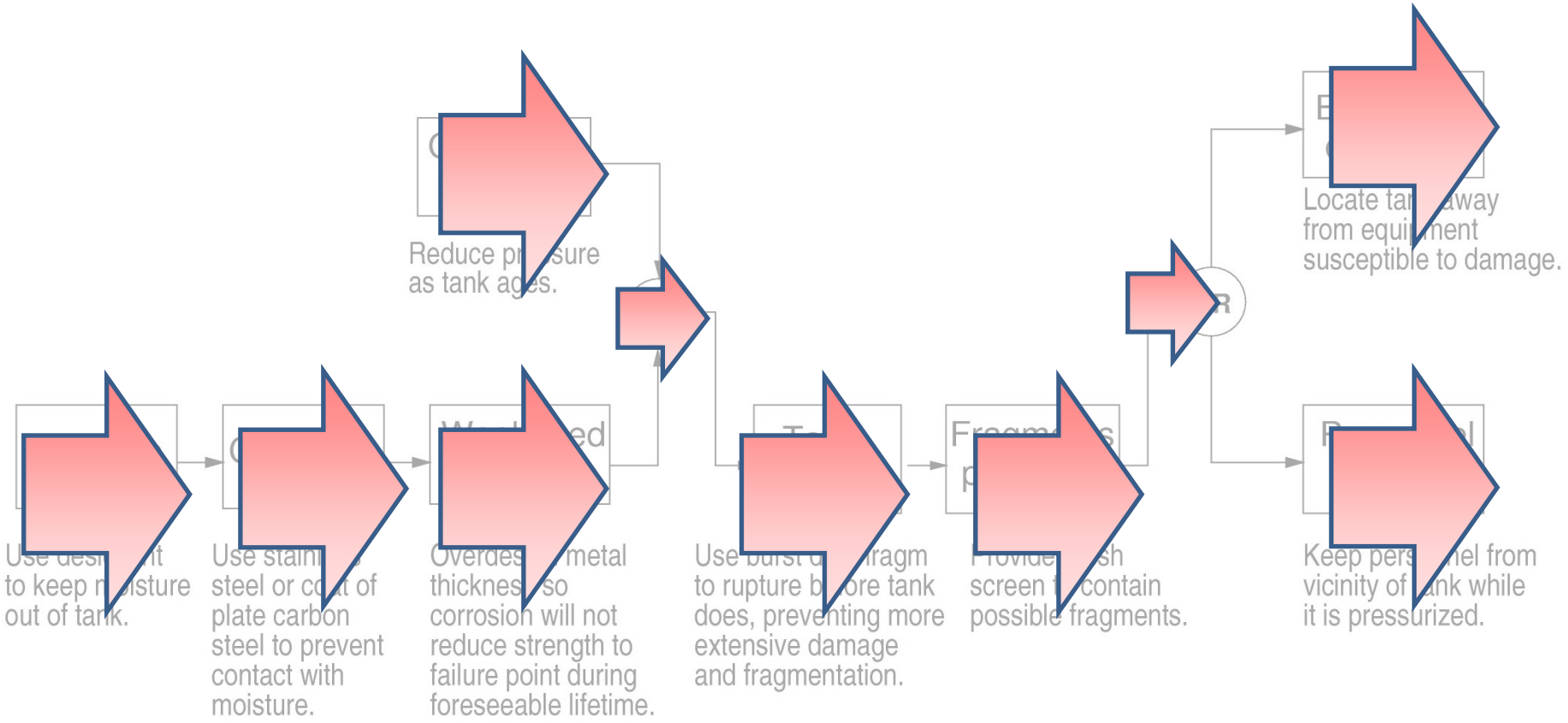


- What is an accident model?
- What is STAMP?
- What is STPA?

Accident model: Chain-of-events example

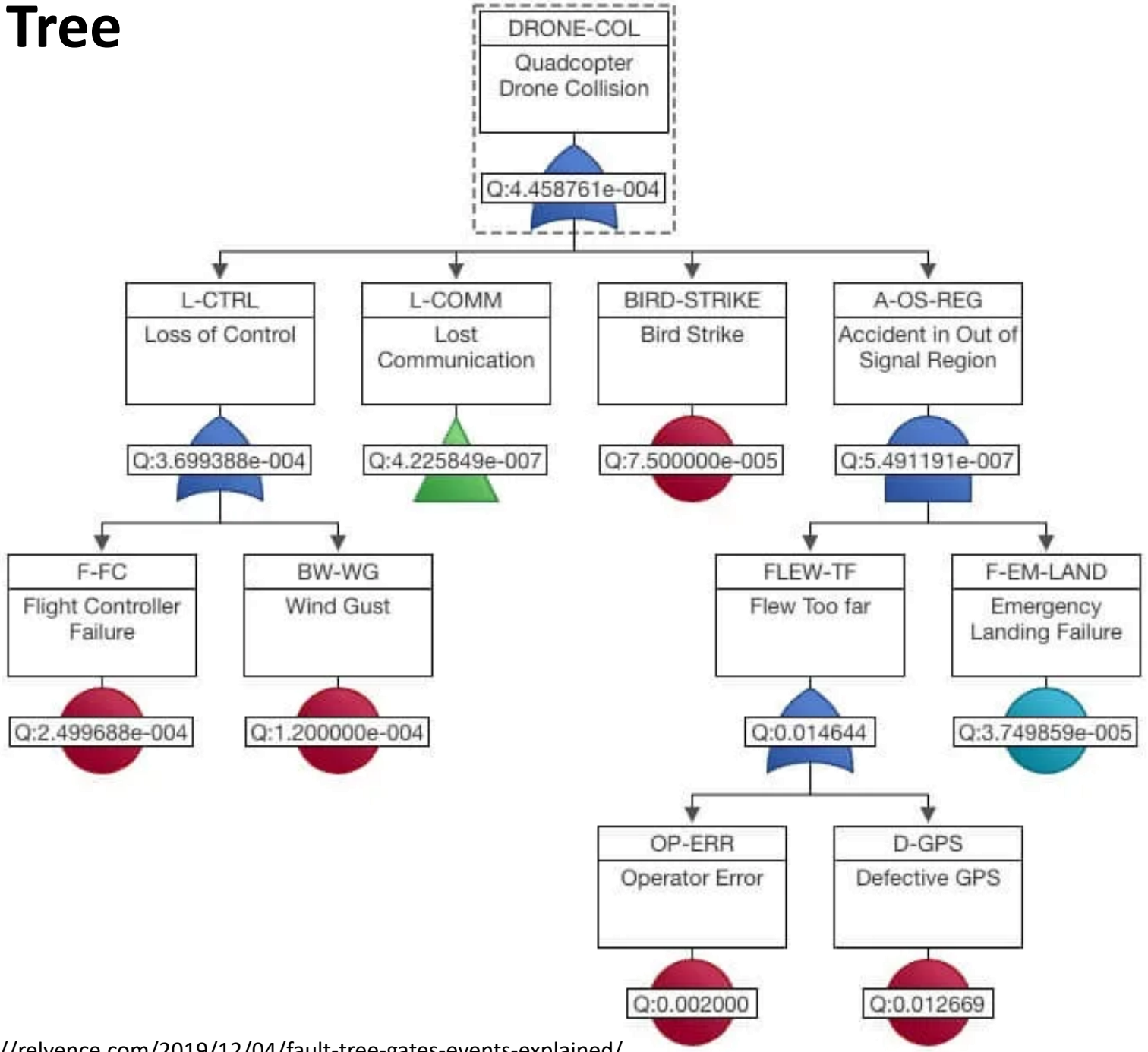


Accident model: Chain-of-events example



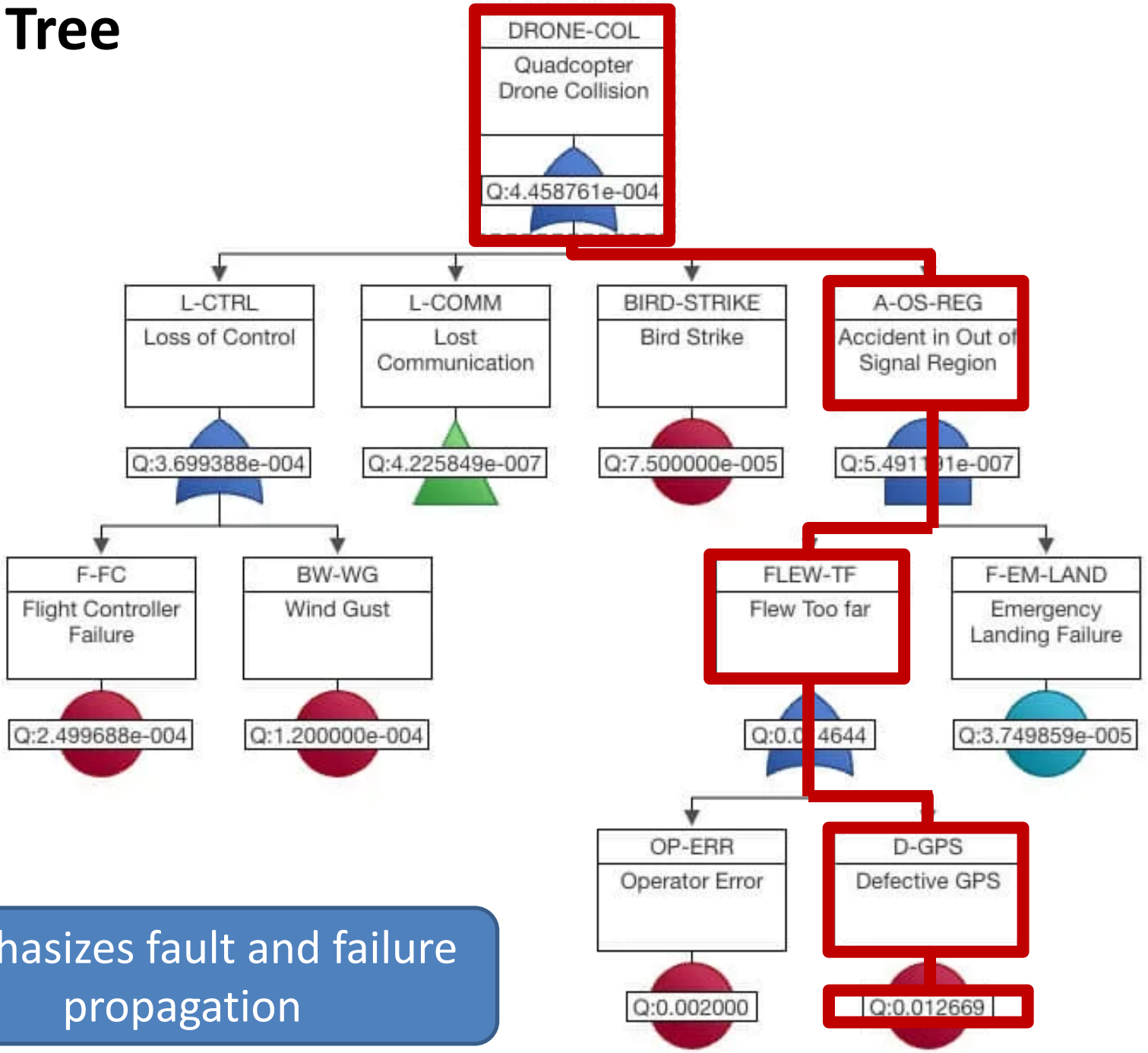
Emphasizes redundancy, fault propagation
Often used in Fault Tree Analysis

Fault Tree



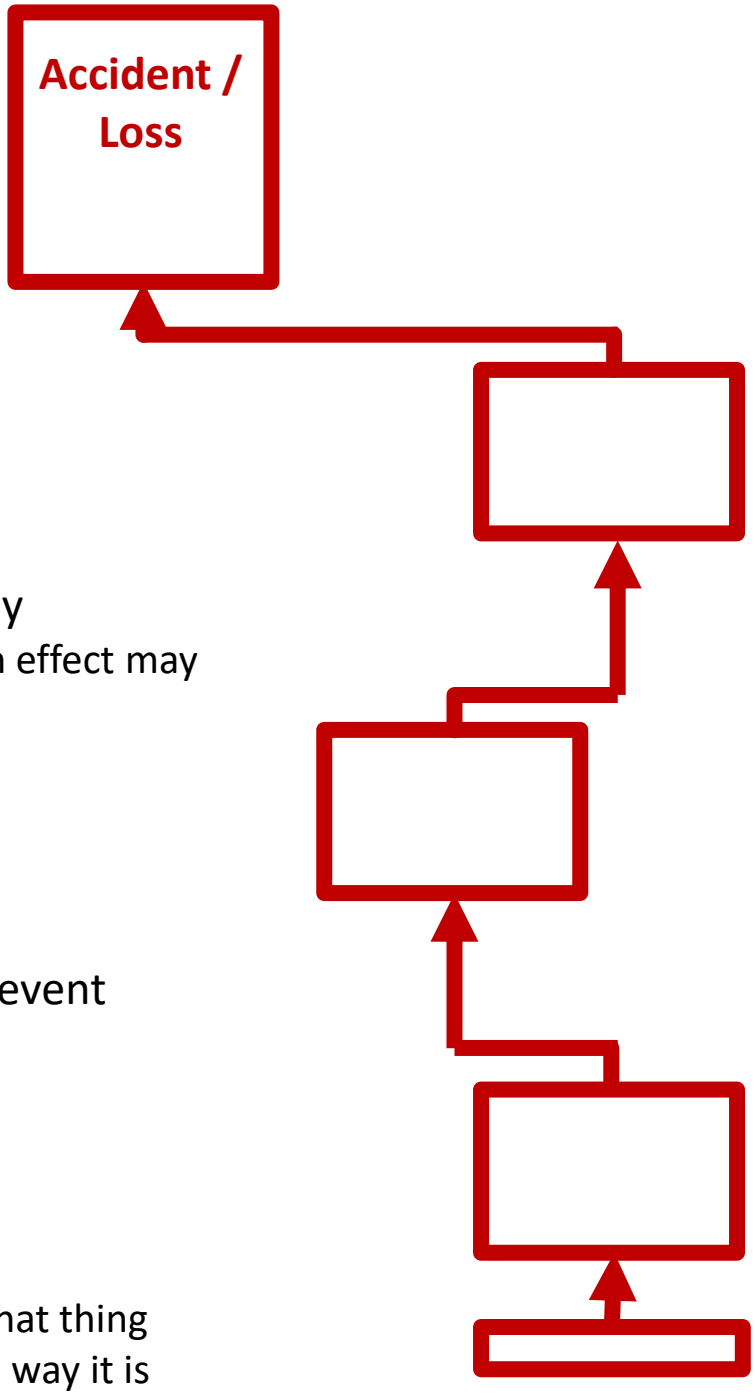
Example: https://relyence.com/2019/12/04/fault-tree-gates-events-explained/

Fault Tree



Emphasizes fault and failure propagation

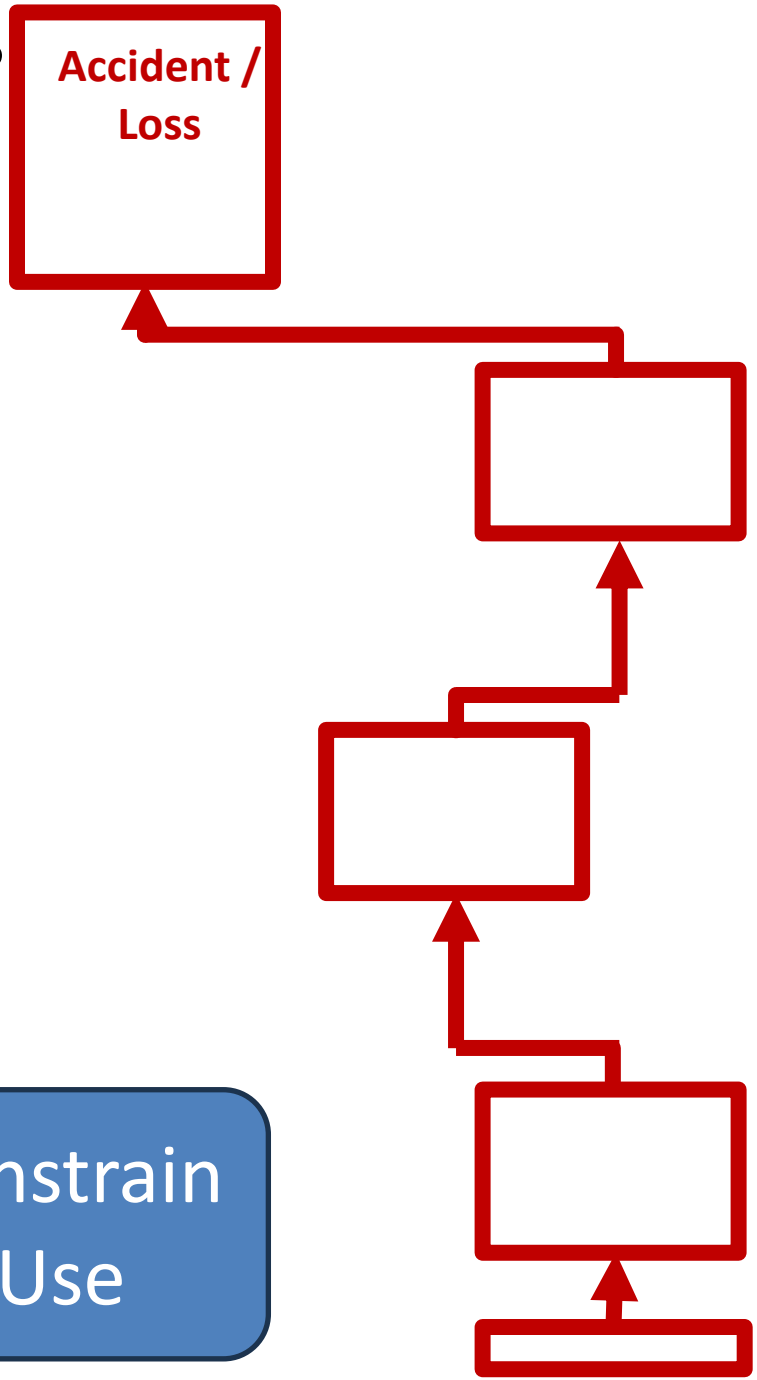
Chain of Failure Events Accident Model



Properties of this accident model:

- Events are defined as faults / failures
  - Deviations from intended/specified behavior
  - Excludes intended / specified behaviors
- Events are binary
  - Must resolve as true or false
- Event sequence usually modeled deterministically
  - Influences that influence but do not guarantee an effect may not be modeled
- One-to-one or many-to-one propagation
  - Not many-to-many
- Linear propagation in one direction
- Loops (circular causality) not modeled
- Events may not be caused by the same identical event previously
- Does not model reasoning and decision-making
  - E.g., beliefs, past experiences
- Models events, not the reasons for them
  - Often assumes the cause is random
  - Not intended to explain *why* a person would do that thing
  - Not intended to explain *why* a design is made the way it is

Chain of Failure Events Accident Model



Accident Models Constrain the Methods We Use

Swiss Cheese Accident Model

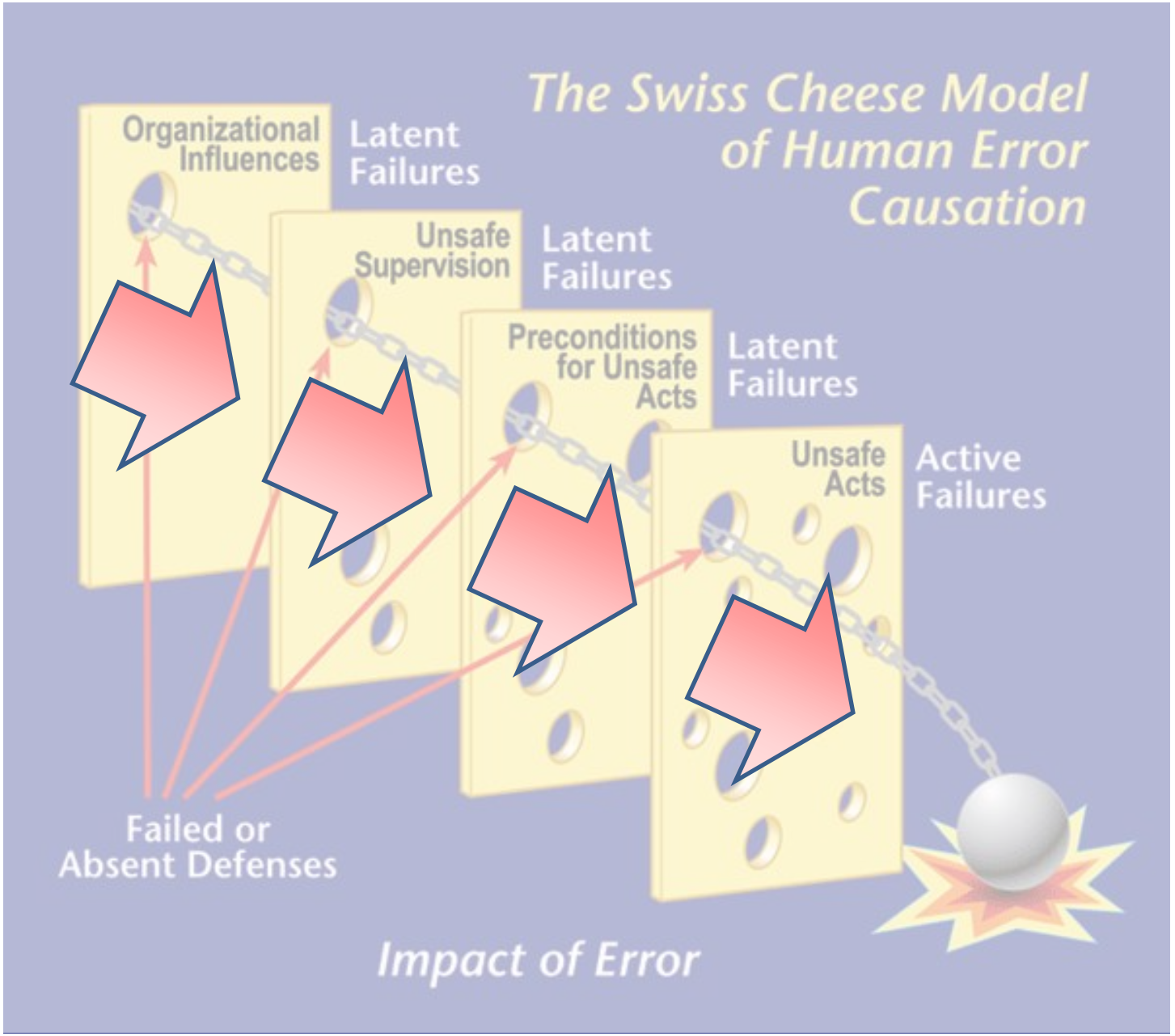
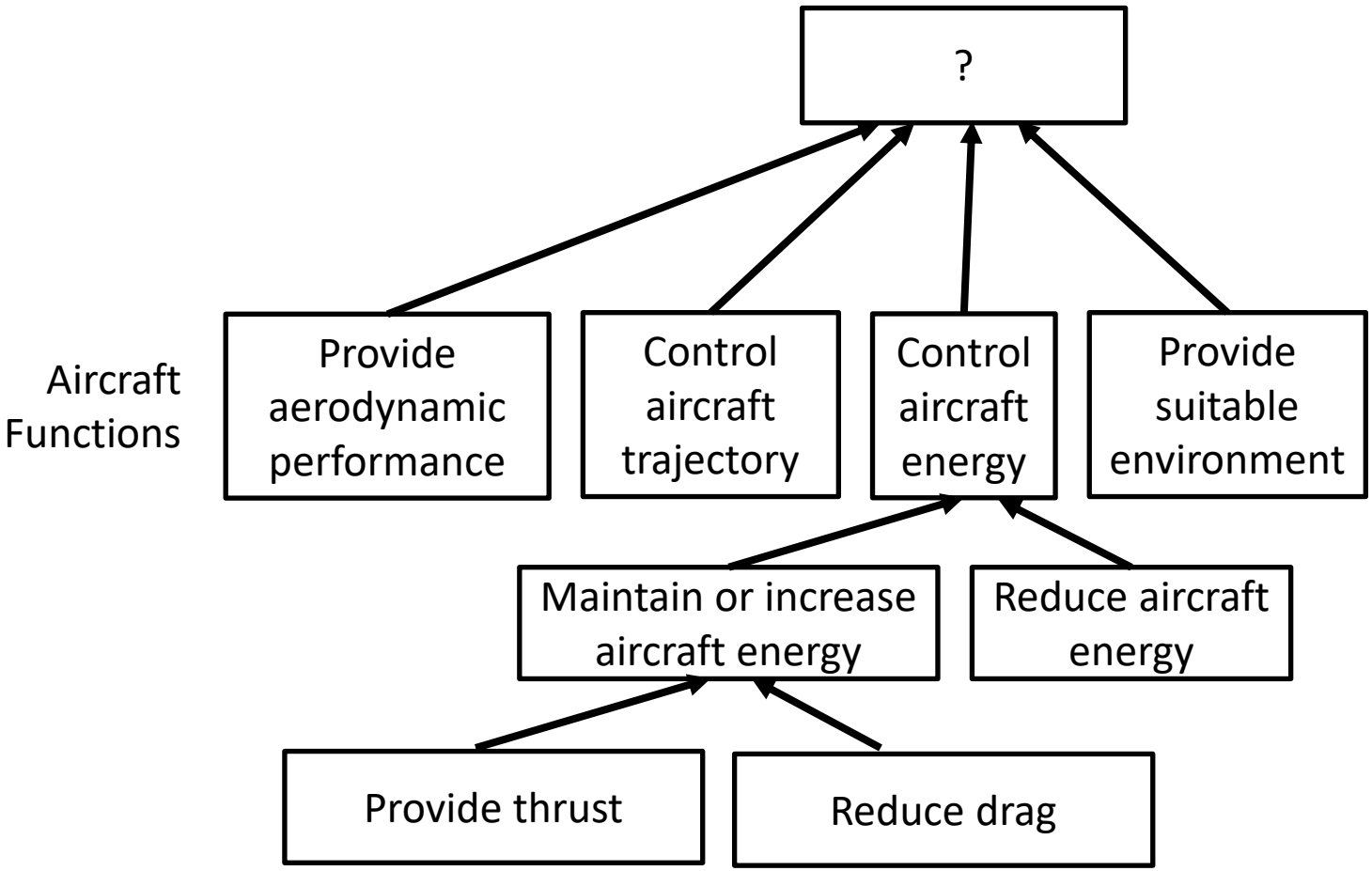


Image from: http://www.fireengineering.com/articles/print/volume-163/issue-3/features/managing-fireground-errors.html

System Models

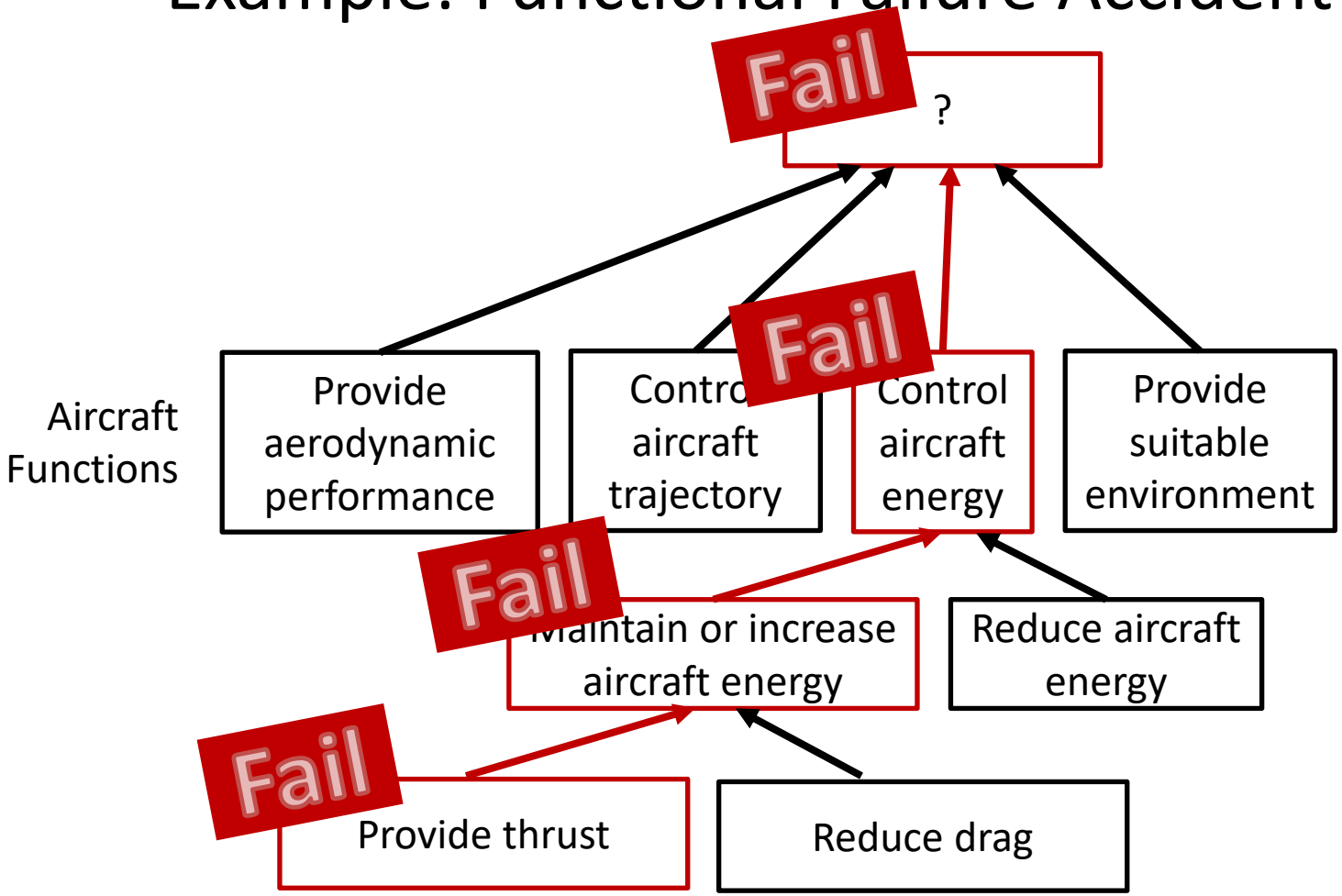
Example: Functional Decomposition



Emphasizes individual functions
Used in Functional Hazard Assessment (FHA), PFMEA

Accident Models

Example: Functional Failure Accident Model



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System Models

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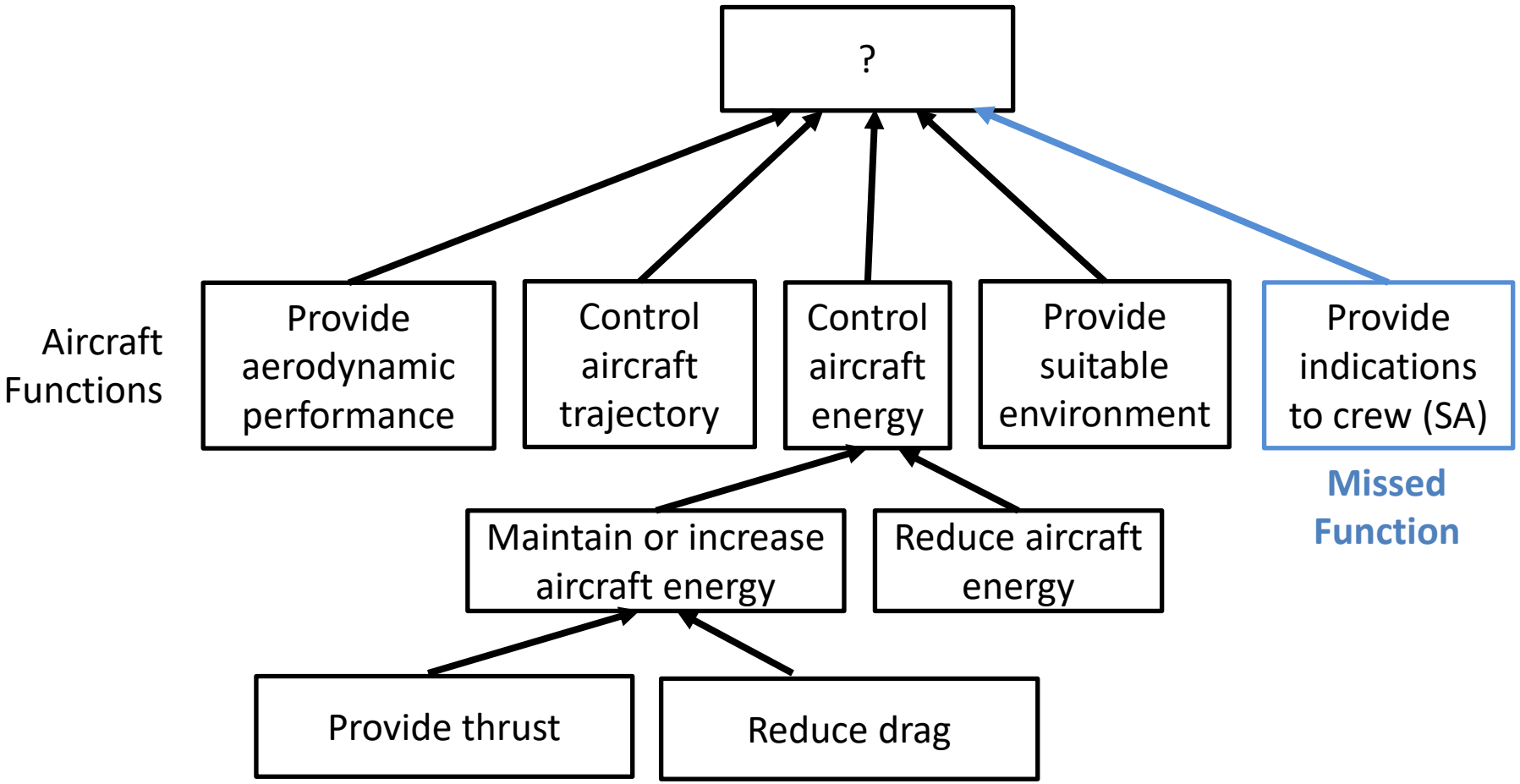
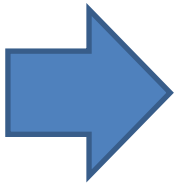


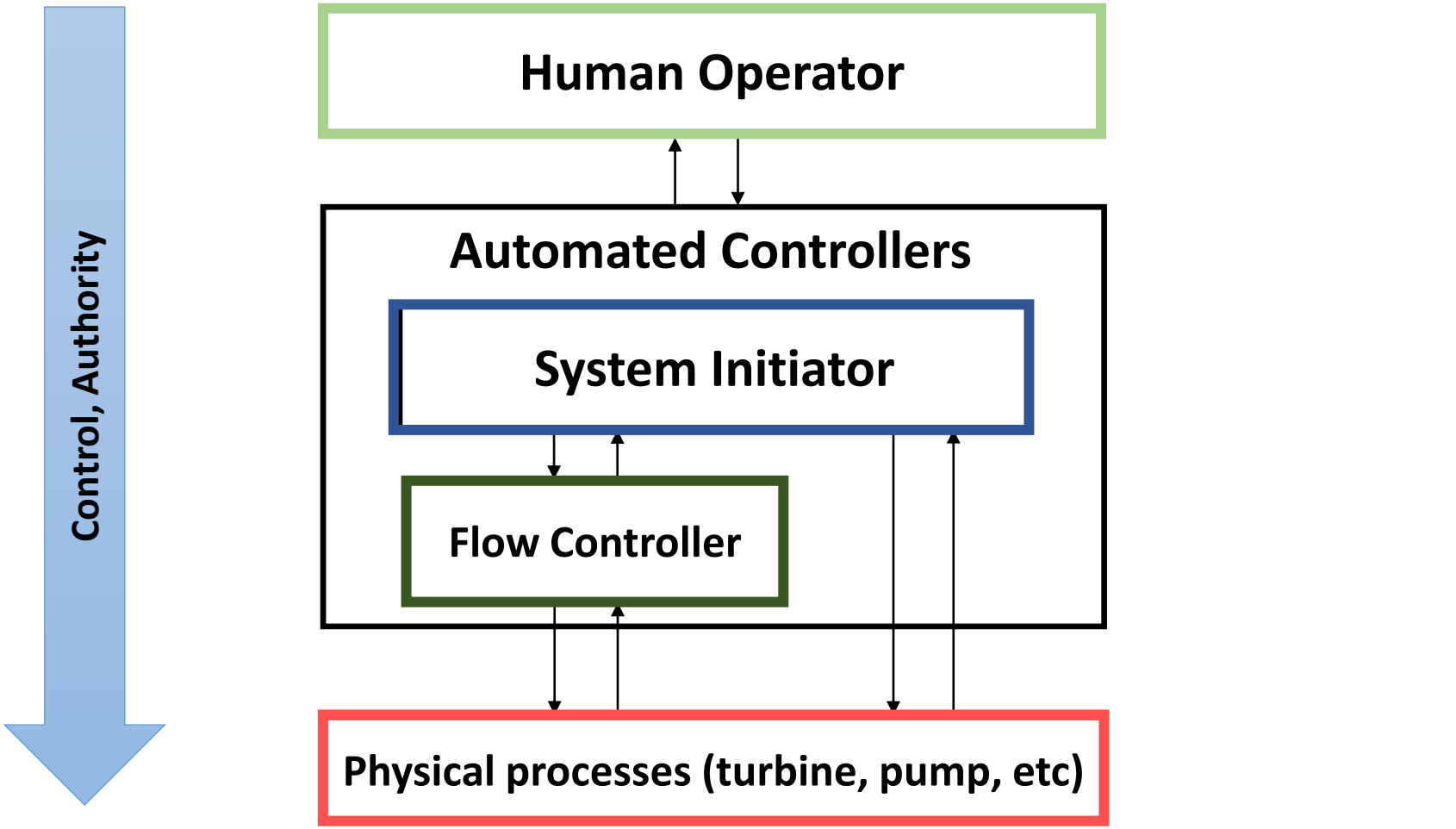
Doesn't help identify missing functions that are needed or functions that may be unsafe as designed



- What is an accident model?
- What is STAMP?
- What is STPA?

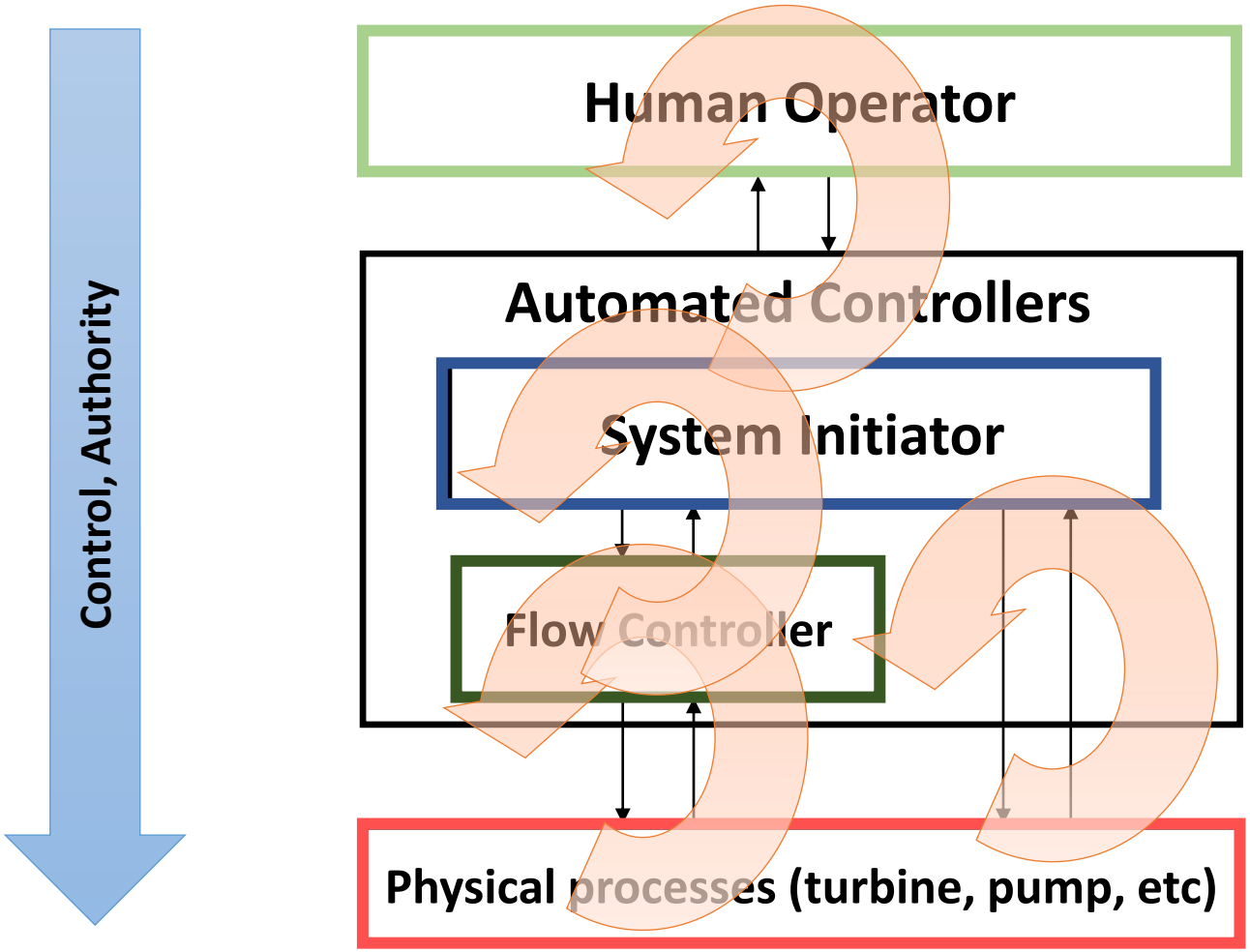
System Models

Example: Control Structure



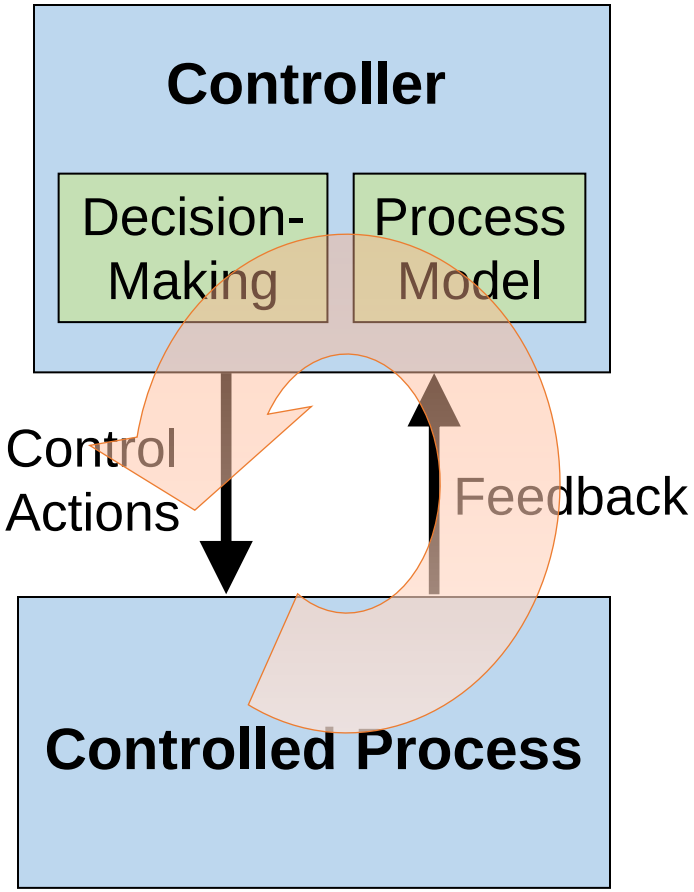
Emphasizes control relationships
Used in STAMP / STPA

Accident Causation in STAMP



Emphasizes control relationships
Used in STAMP / STPA

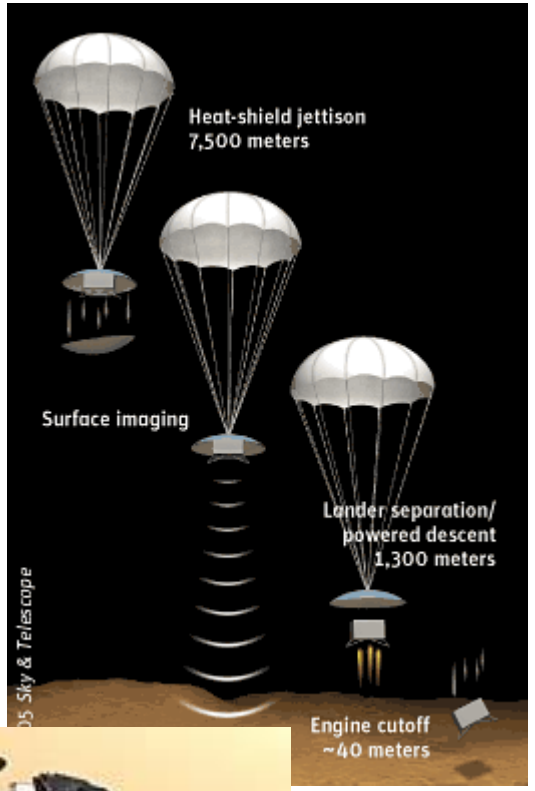
Basic control loop



- **Control actions** are provided to affect a controlled process
- **Feedback** may be used to monitor the process
- **Process model** (beliefs) formed based on feedback and other information
- **Decision-making** determines appropriate control actions given current beliefs

Mars Polar Lander

- During descent to Mars, legs deployed (as planned)
- Footpad sensors detected vibration (within design spec)
- Momentary signal sent to computer (as required)
- Computer shut down the descent engines (as specified)
- The vehicle free-fell, fell to surface at 50 mph (80 kph), destroyed

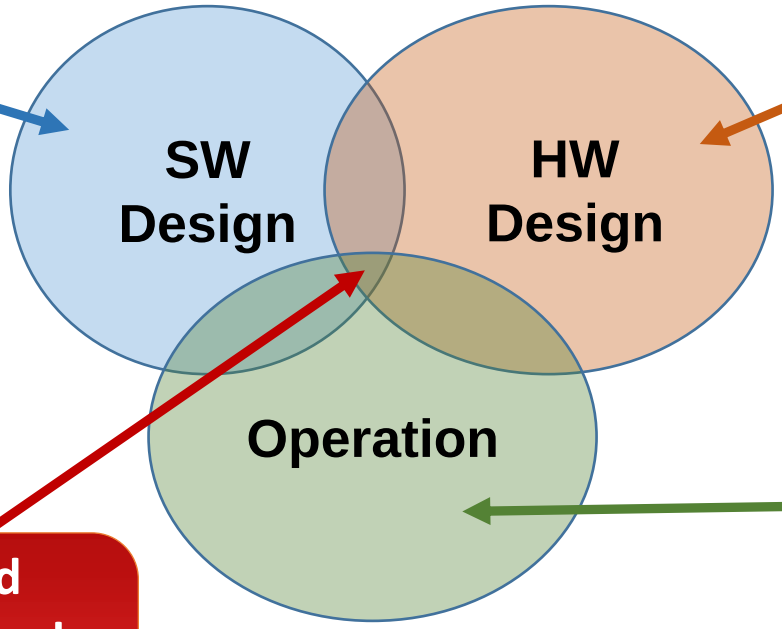


All components performed exactly as designed!
No single component failed!

MPL: How was this overlooked?

SW worked as designed! Operation did not match any defined SW component failure behaviors.

HW worked as designed! Operation did not match any defined HW component failure behaviors.

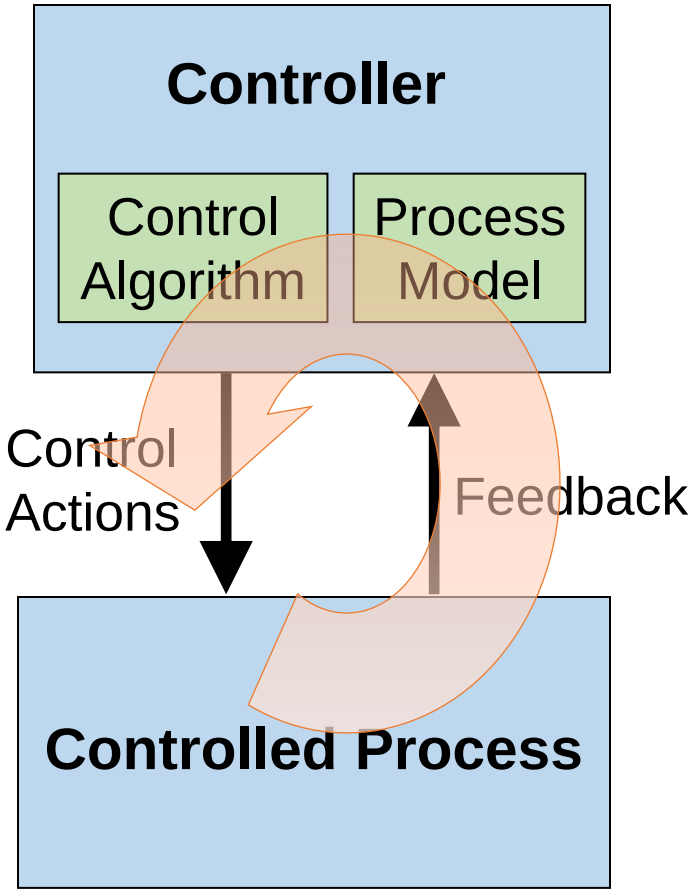


Operation sequence matched design intent. Operation sequence did not match any defined sequences of failure.

New, unplanned interaction emerged among whole *system* of components!

Easy to overlook the system problem by looking at individual component failures

Basic control loop



- **Control actions** are provided to affect a controlled process
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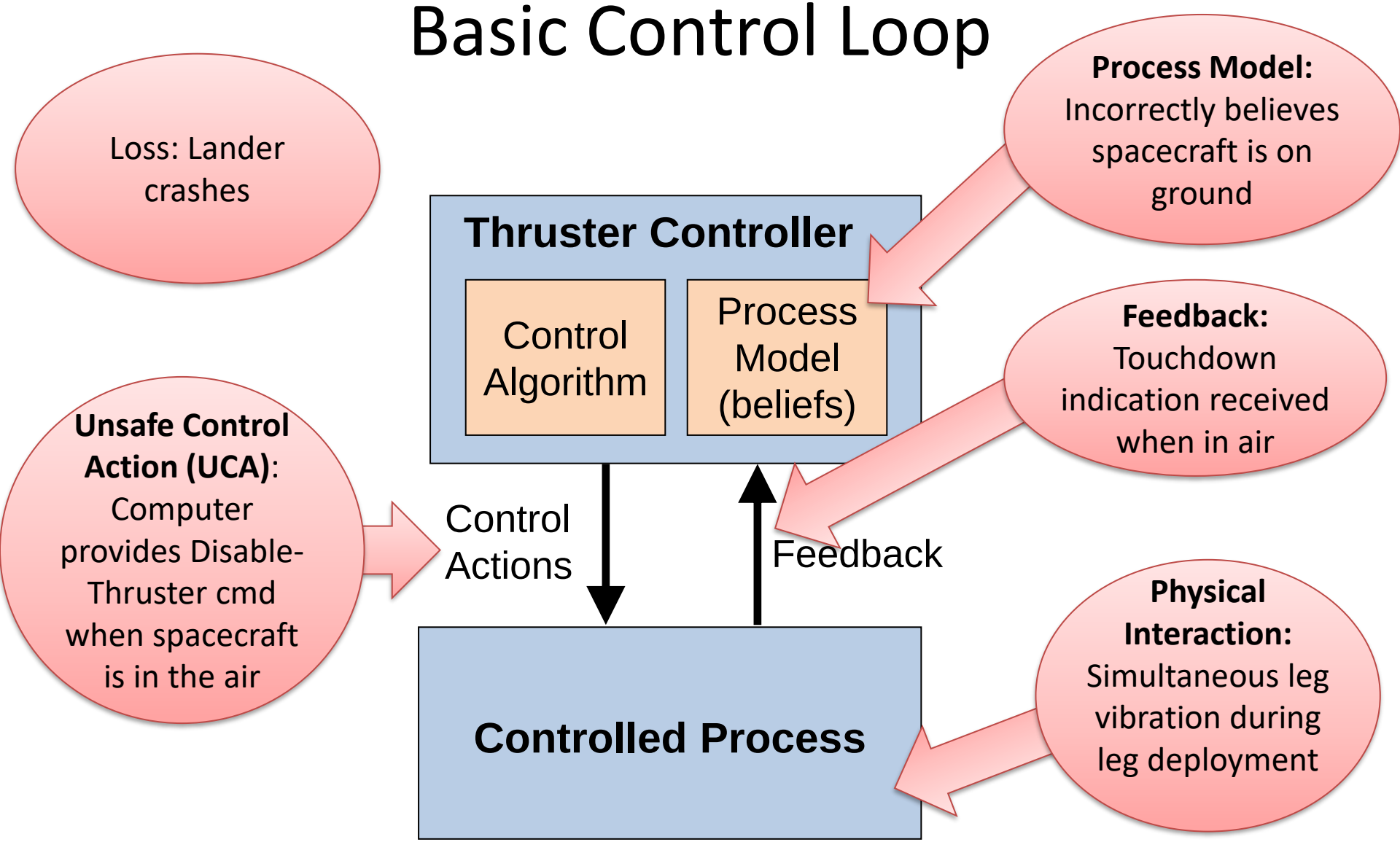
- **Control algorithm** determines appropriate control actions given current beliefs

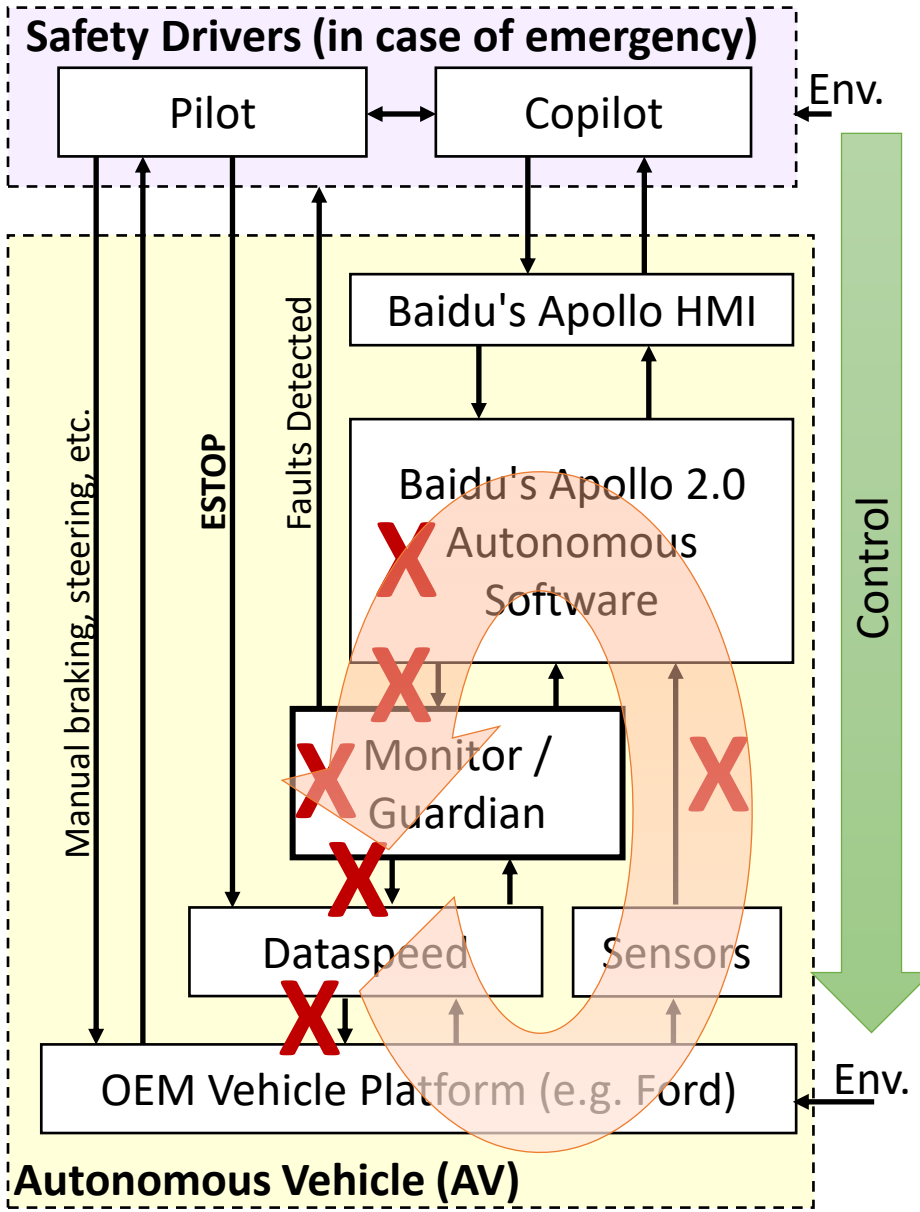
Basic Control Loop



This framework works with or without component failures!

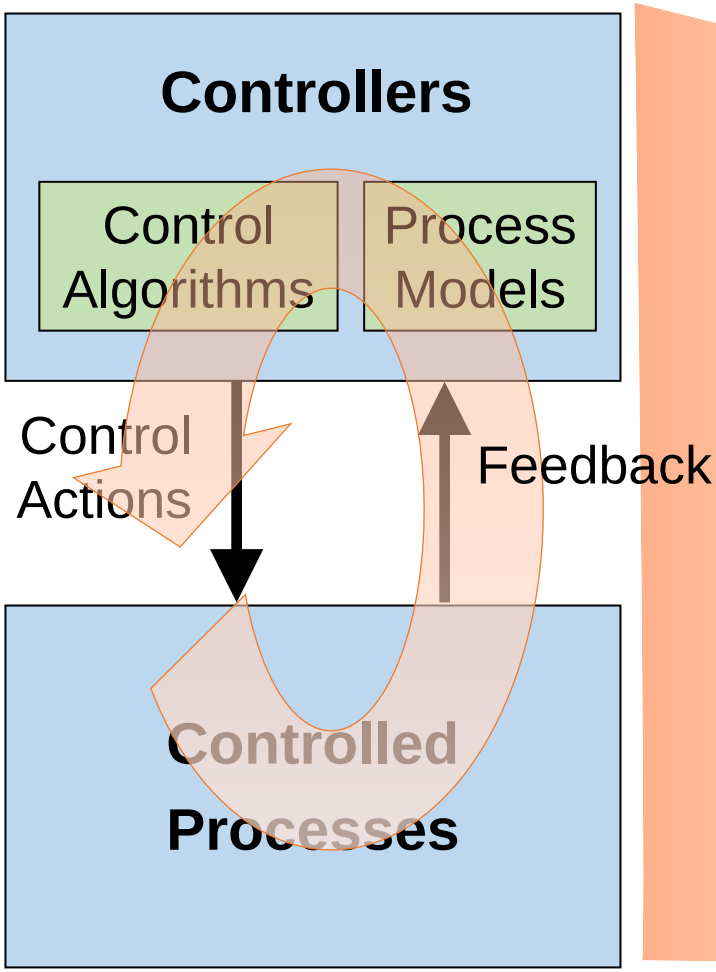
A Systems Approach to Safety

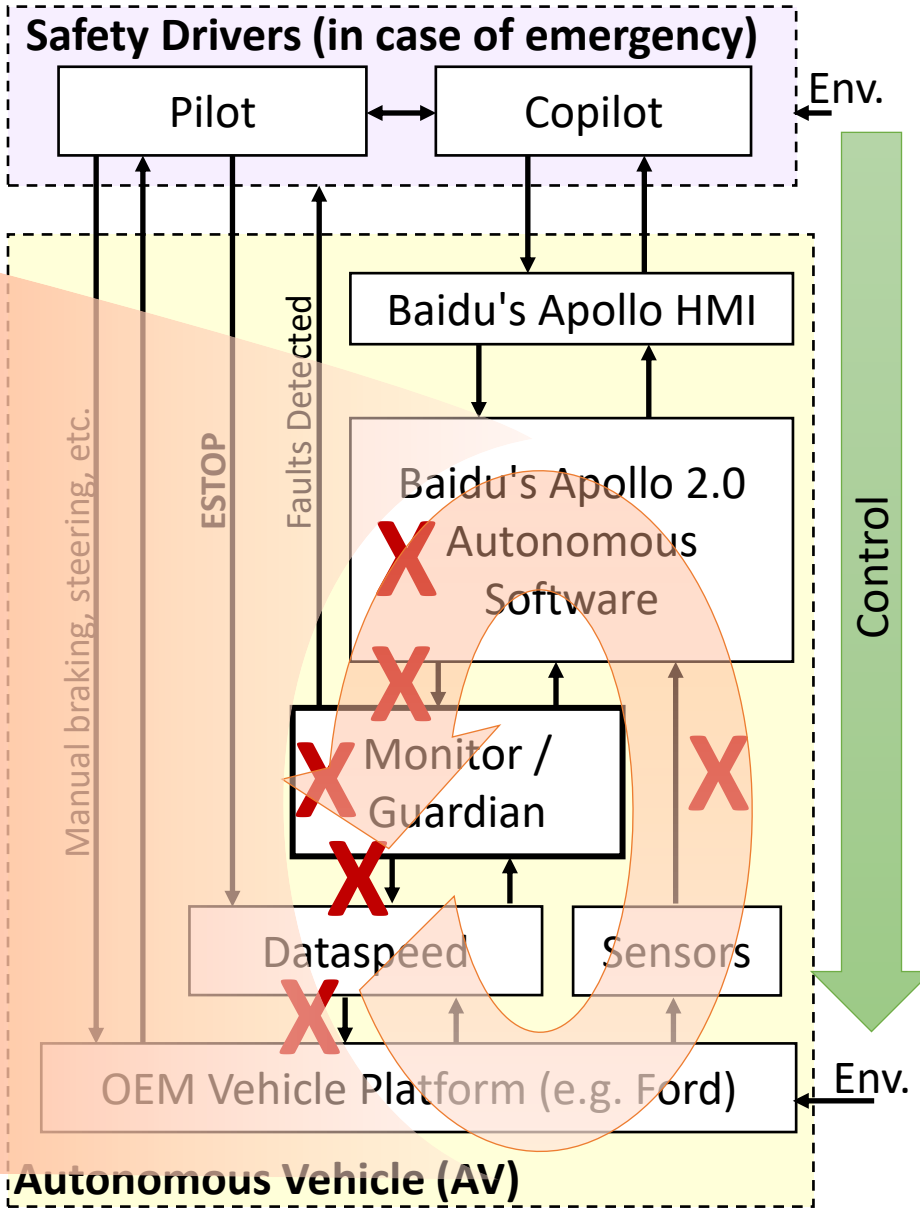
Treat safety as a
control problem



A Systems Approach to Safety

Basic Control Loop





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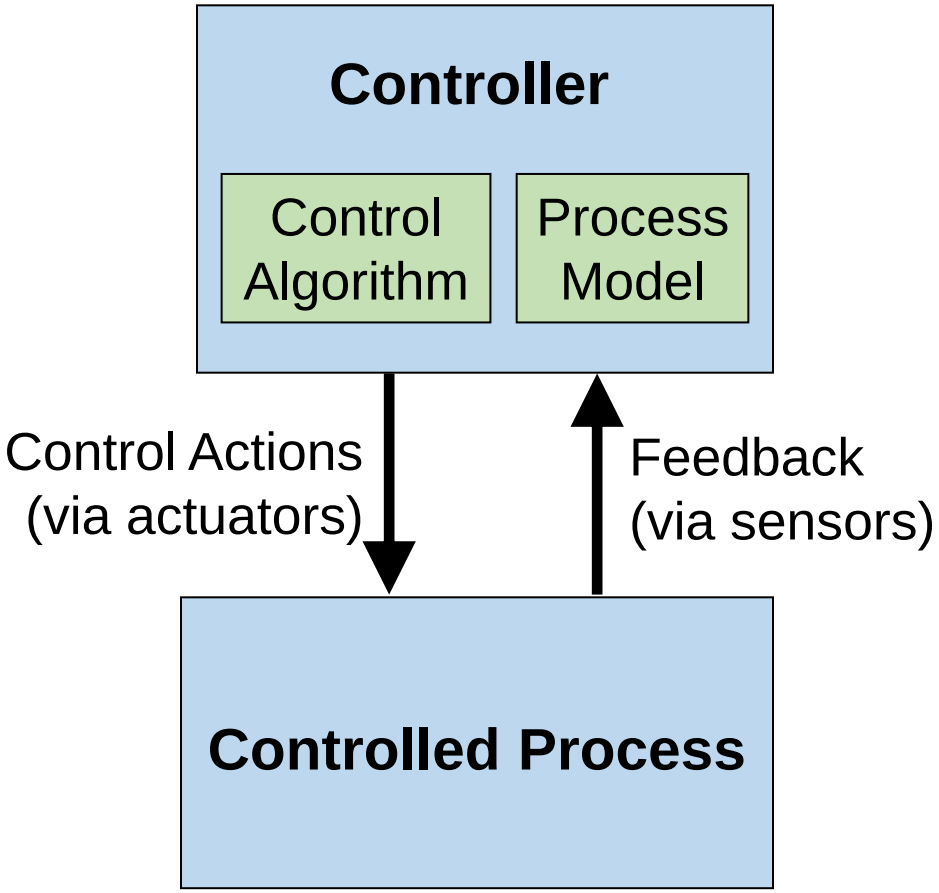

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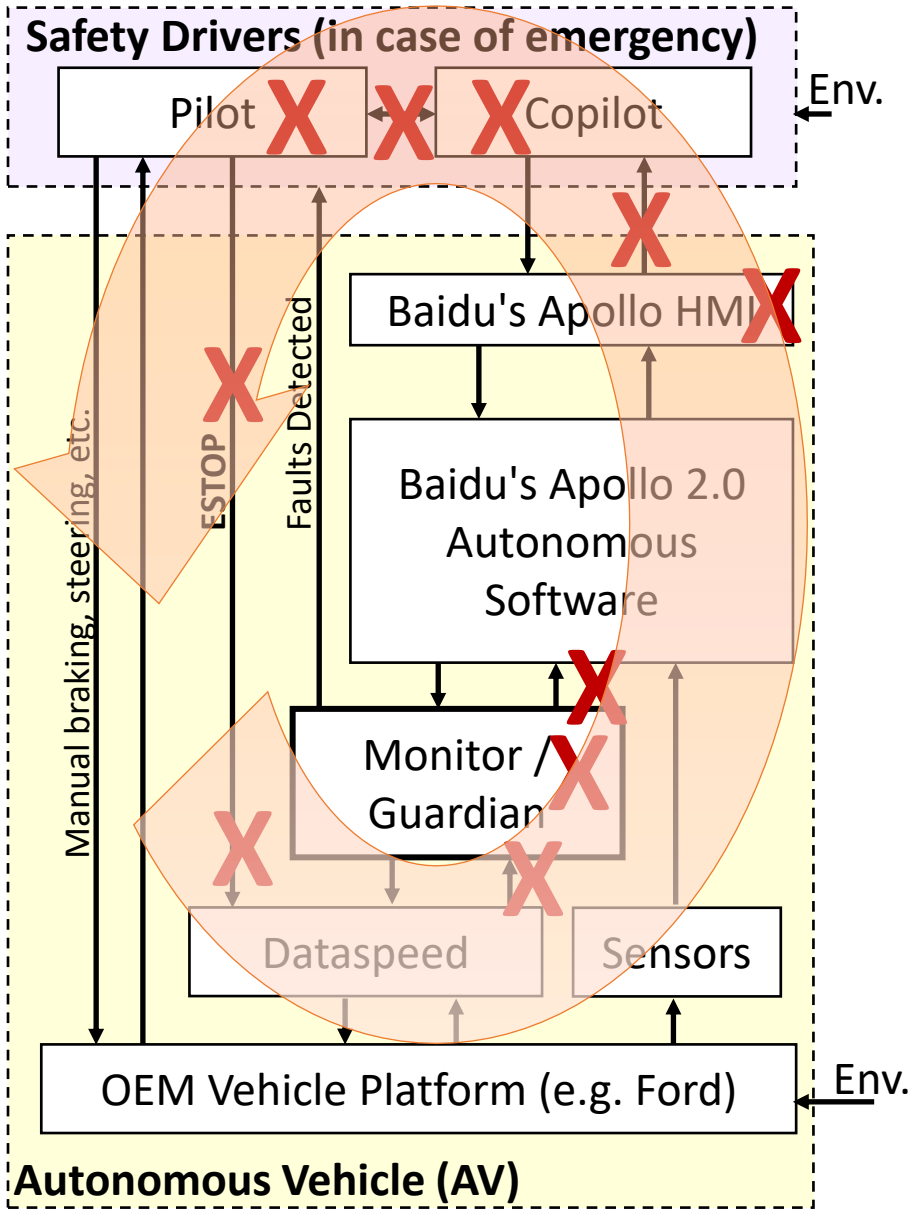
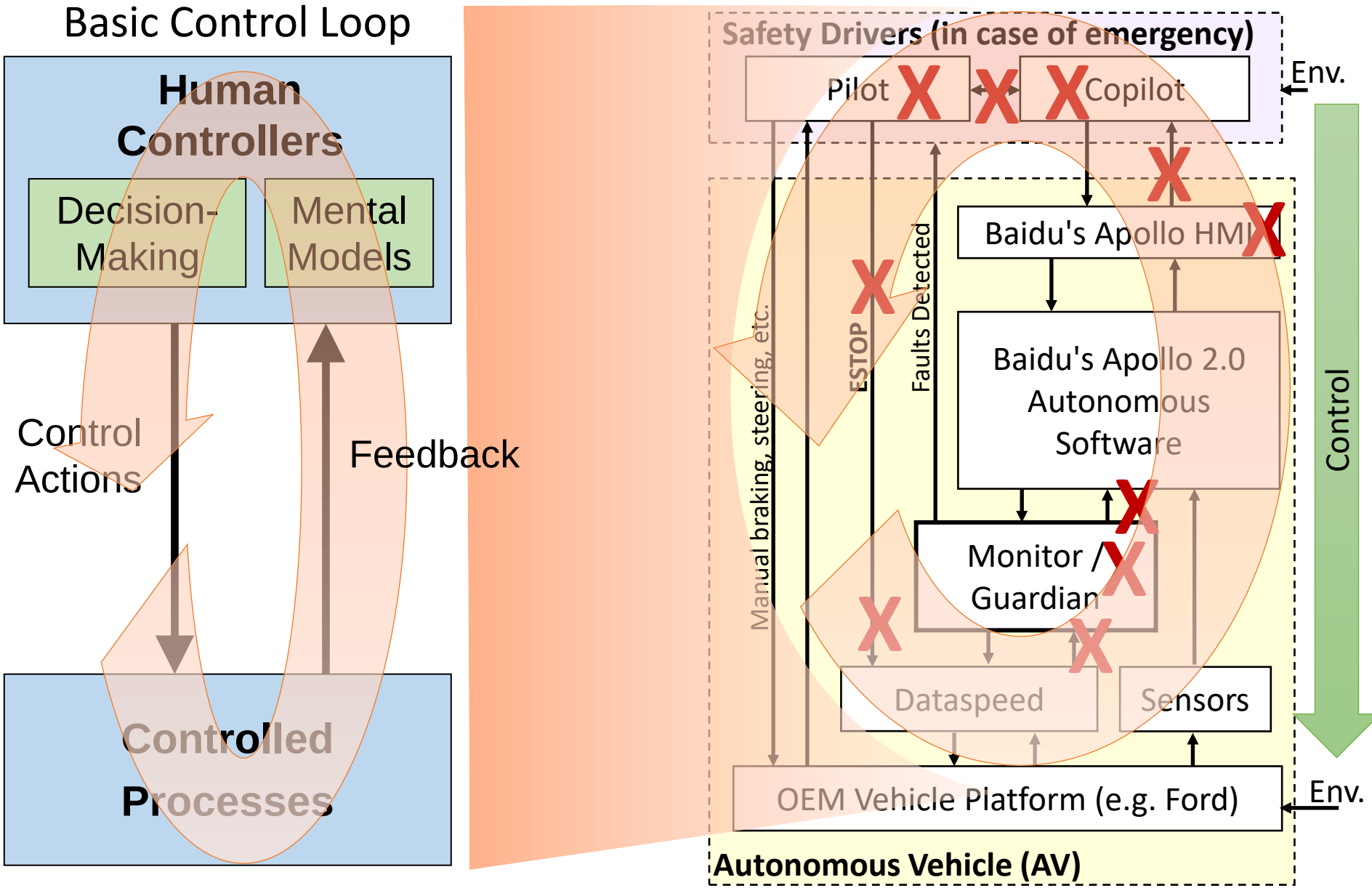


HMI = Human-Machine Interface
ESTOP = Emergency Stop

A Systems Approach to Safety

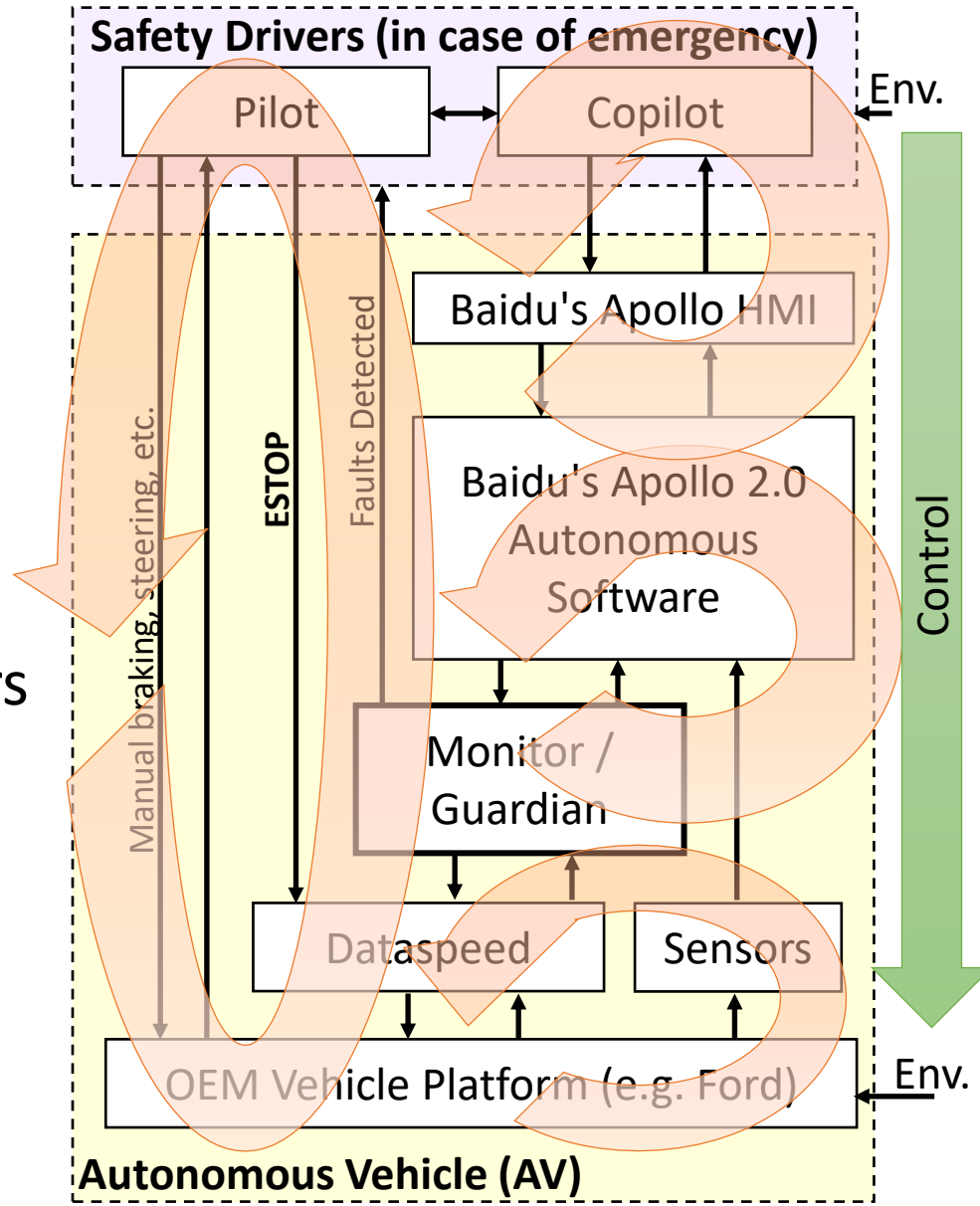


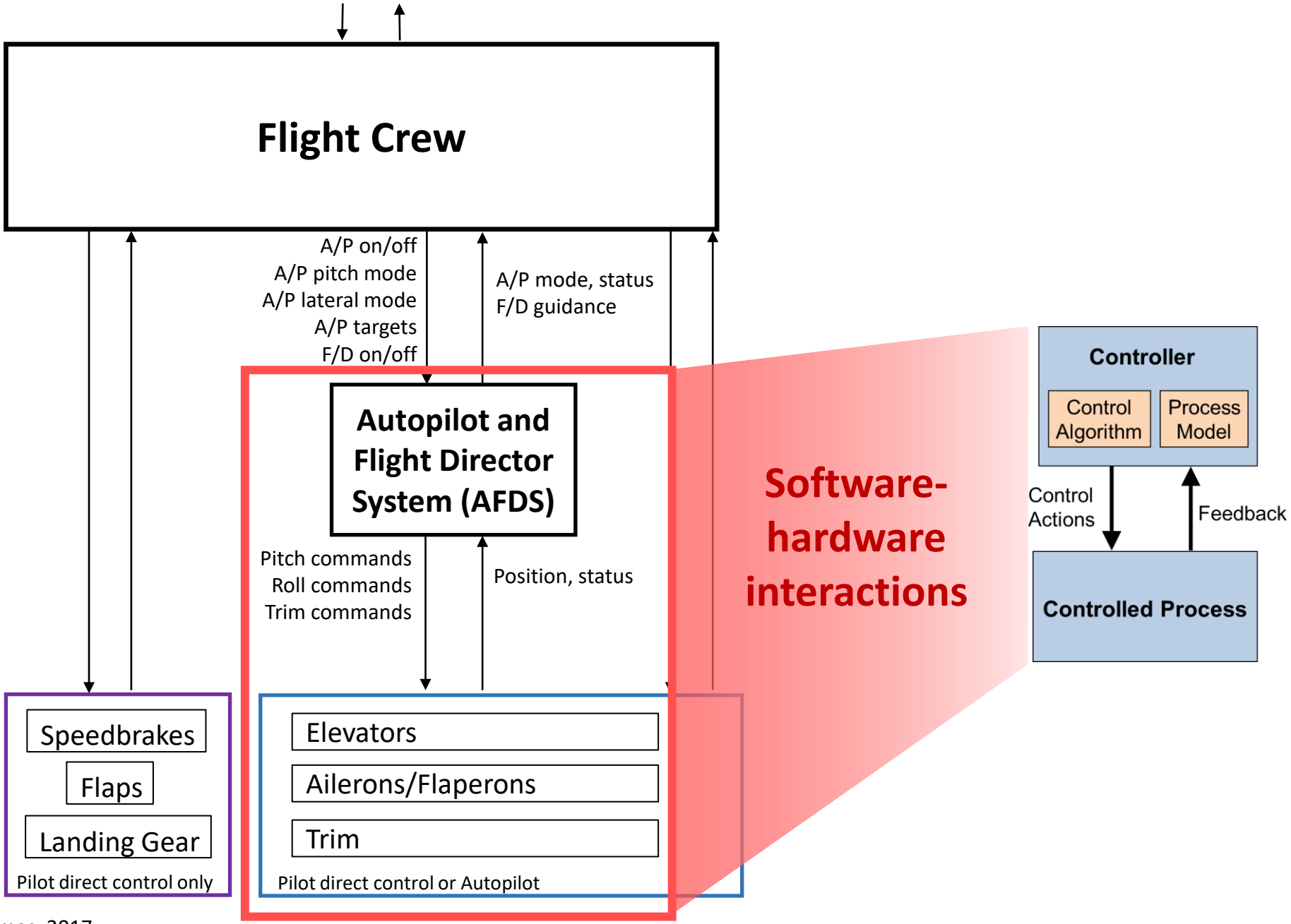
A Systems Approach to Safety

Treat accidents as a **control problem**

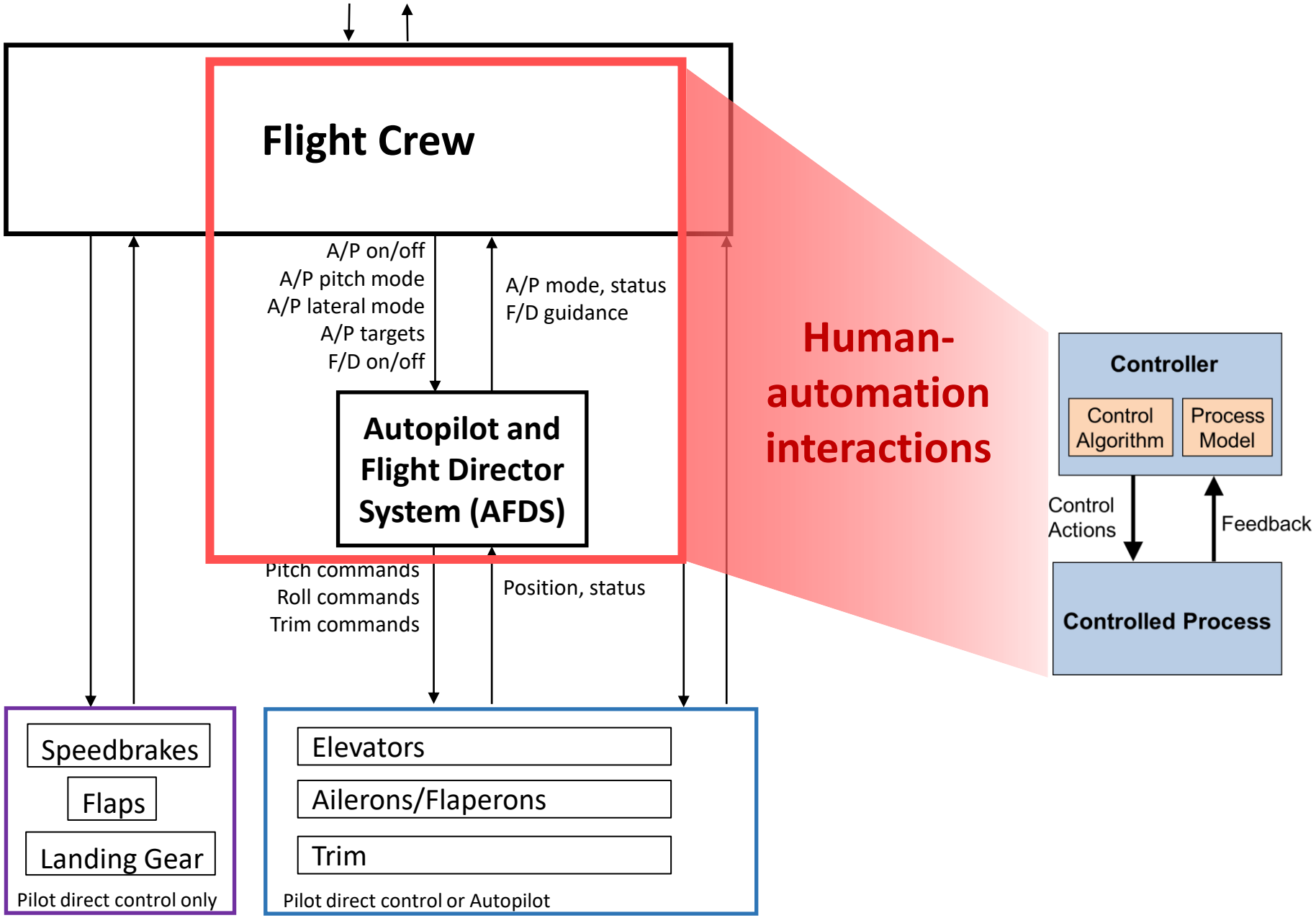
Works well to anticipate:

- **Interactions** between new functions and features
- Complex **Automated** behaviors
- Complex **Human** behaviors
- **"unknown unknowns"** in engineering
- Engineering **Assumptions**





Thomas, 2017



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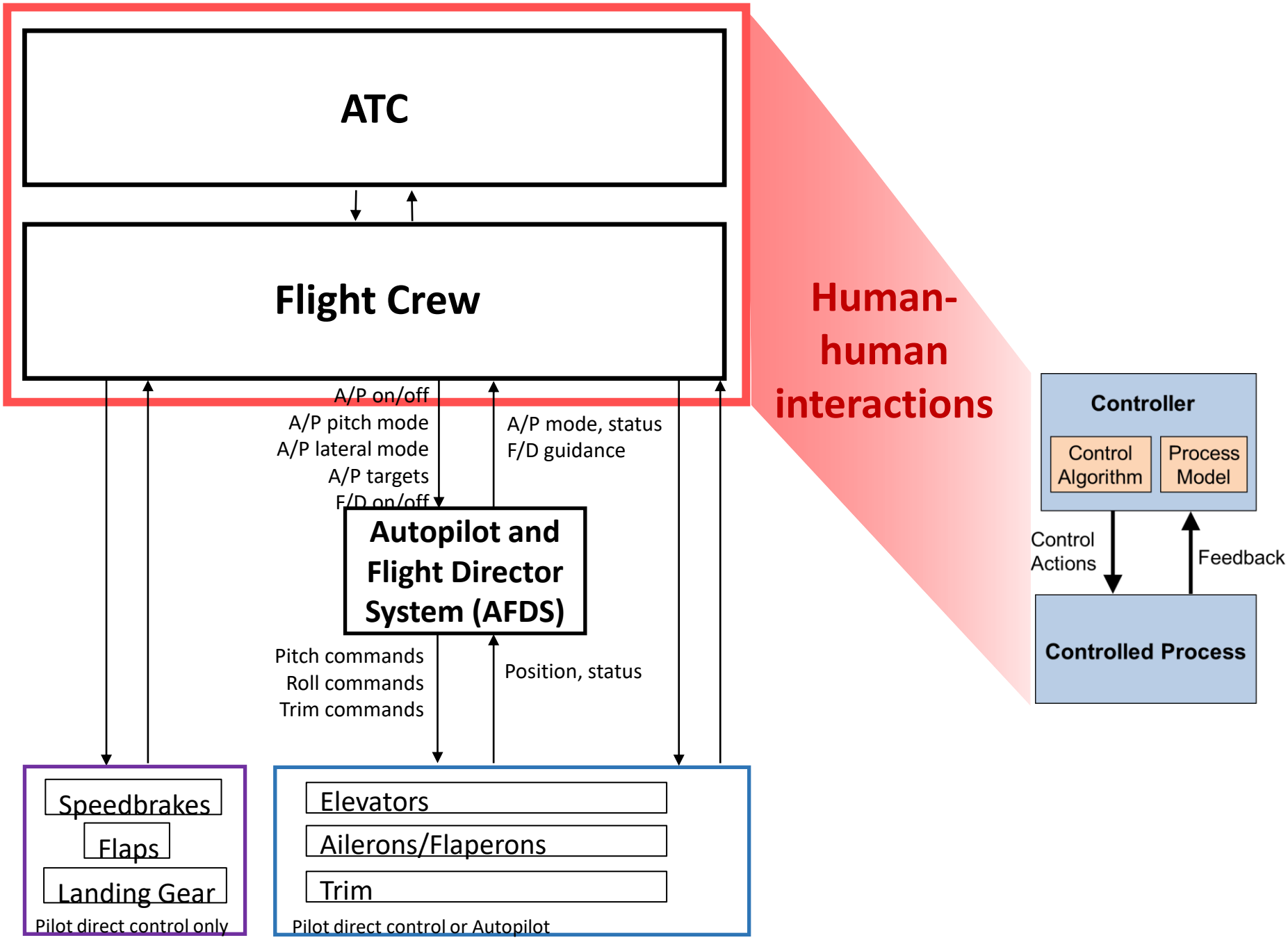
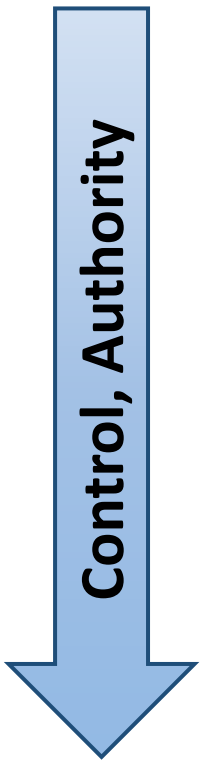
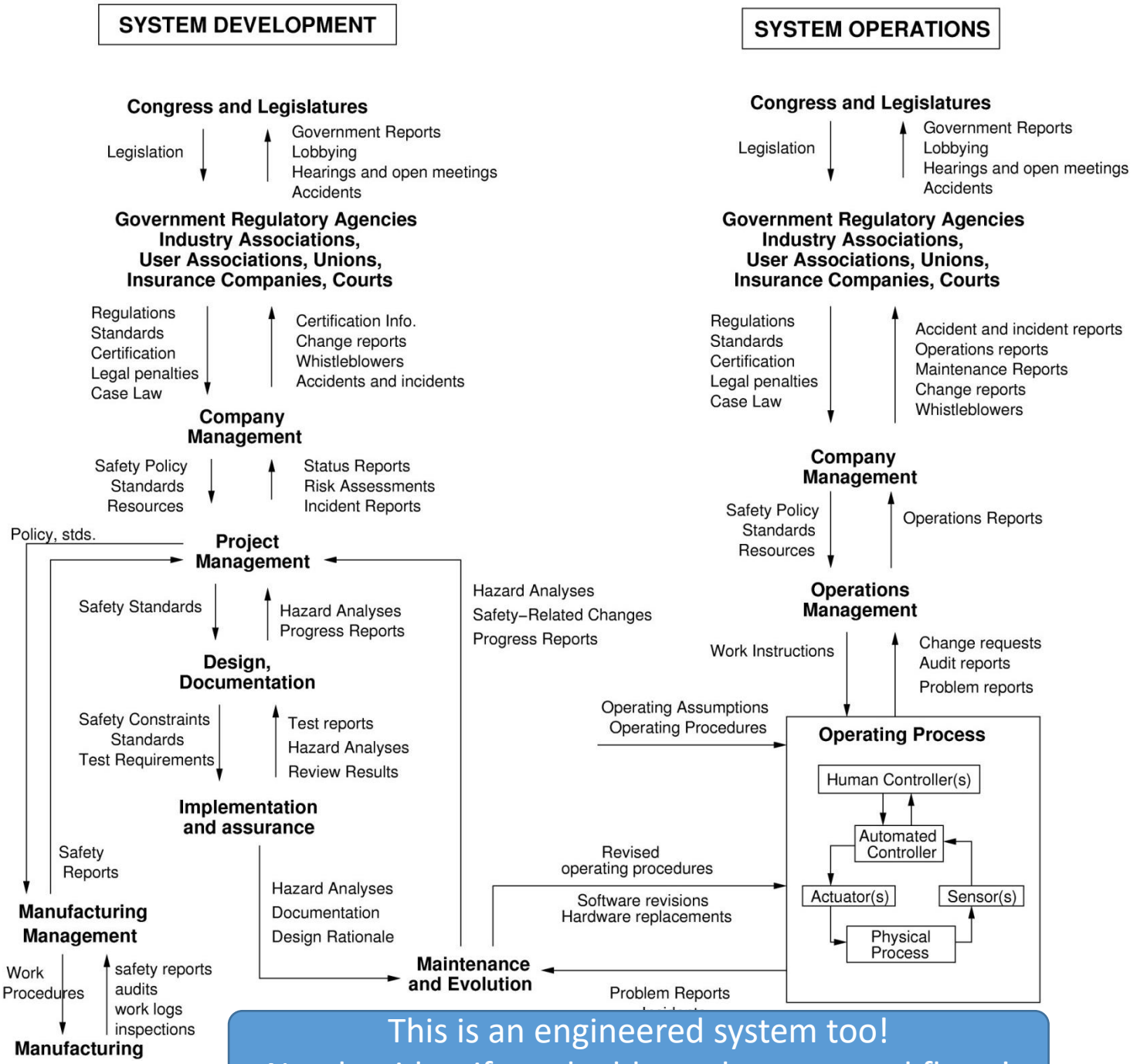


Thomas, 2017

Example Safety Control Structure





This is an engineered system too!
Need to identify and address the structural flaws!

(Leveson, 2012)

Classification of Causal Factors in STAMP

Principles from Control Theory

Four conditions required to effect control over a system:

Goal Condition: The controller must have a goal or goals (e.g., to maintain a setpoint)

Action Condition: The controller must be able to affect the system state

Observability Condition: The controller must be able to ascertain the state of the system.

Model Condition: The controller must have (or contain) a model of the system

These conditions must be met for effective management of safety (and security!)

Ashby, 1957

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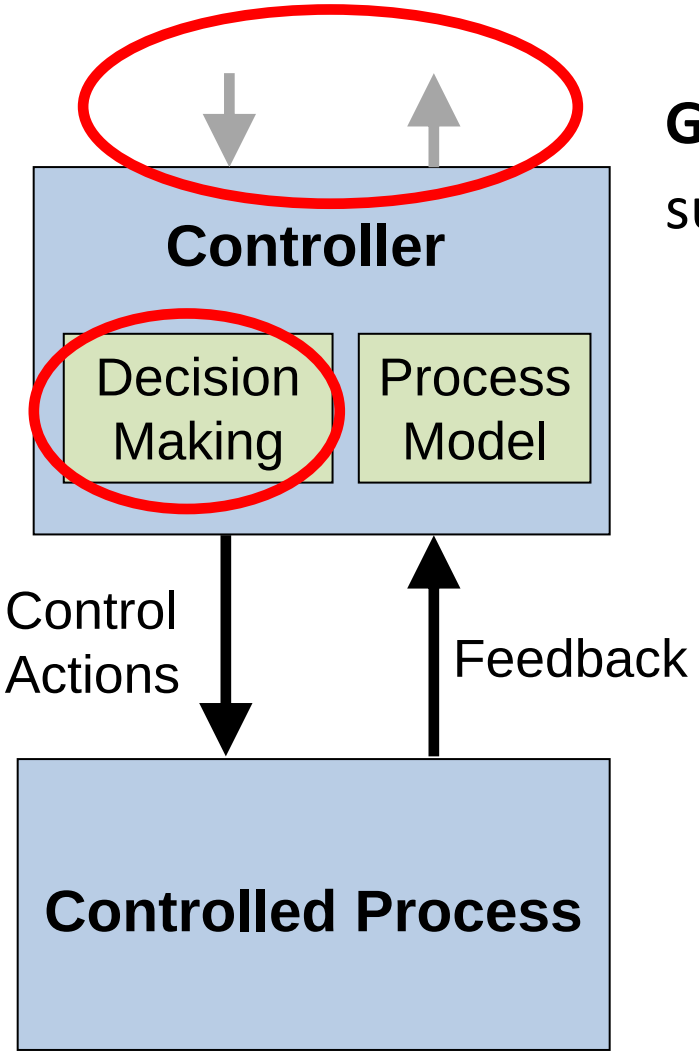
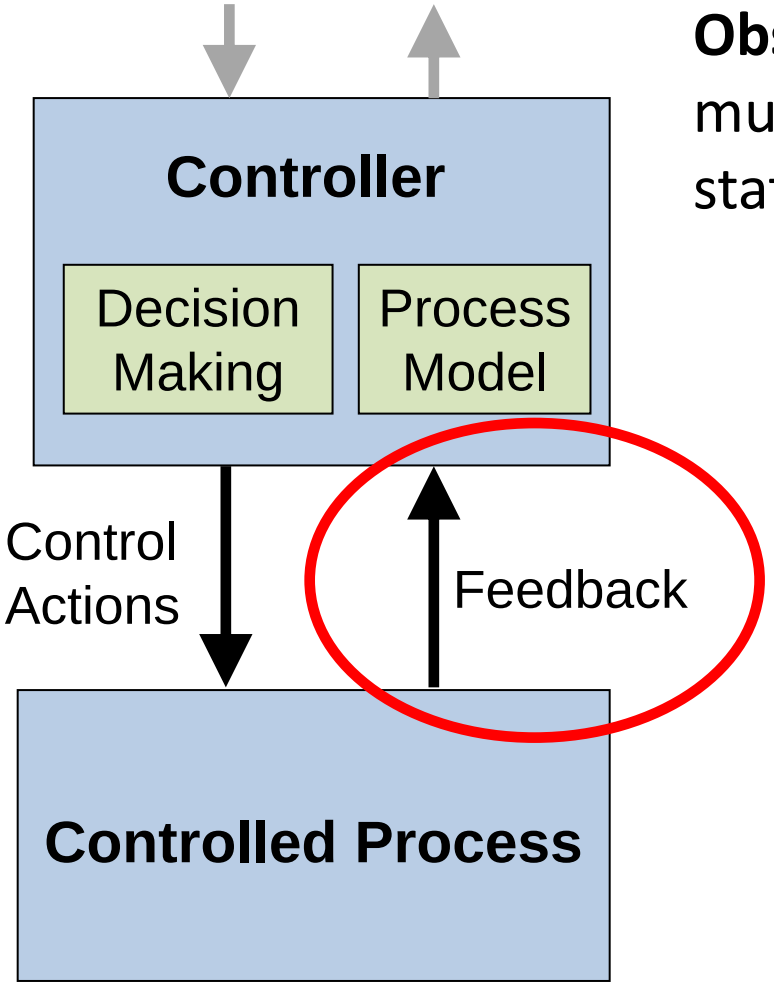
Potential targets for an adversary!

Ashby, 1957



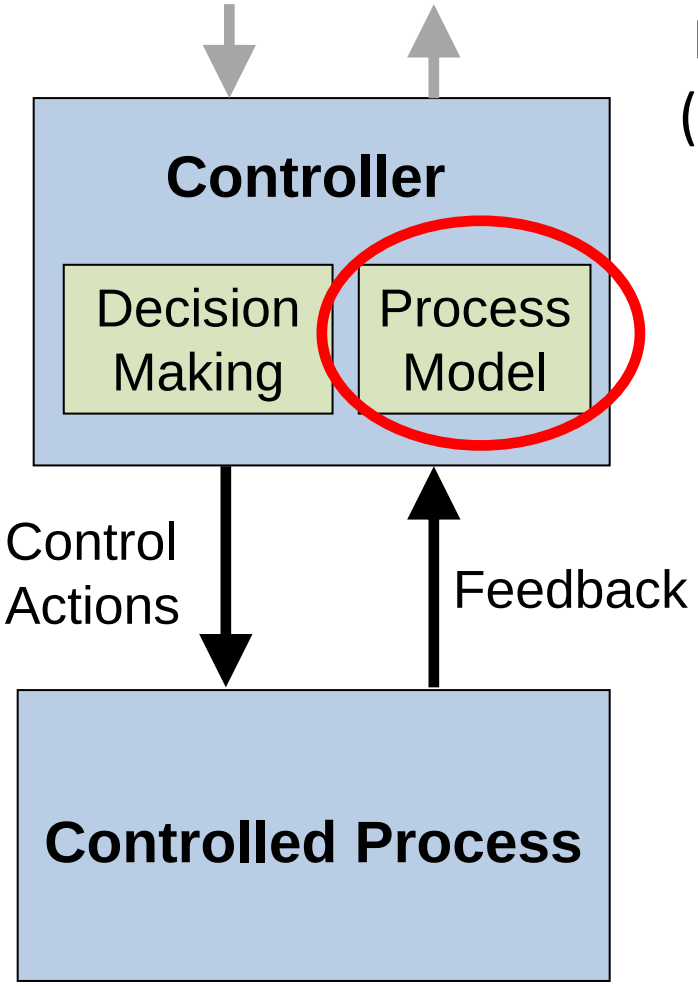
Goal Condition: The controller must have suitable goals (e.g., to maintain a setpoint)

(Leveson, 2012)



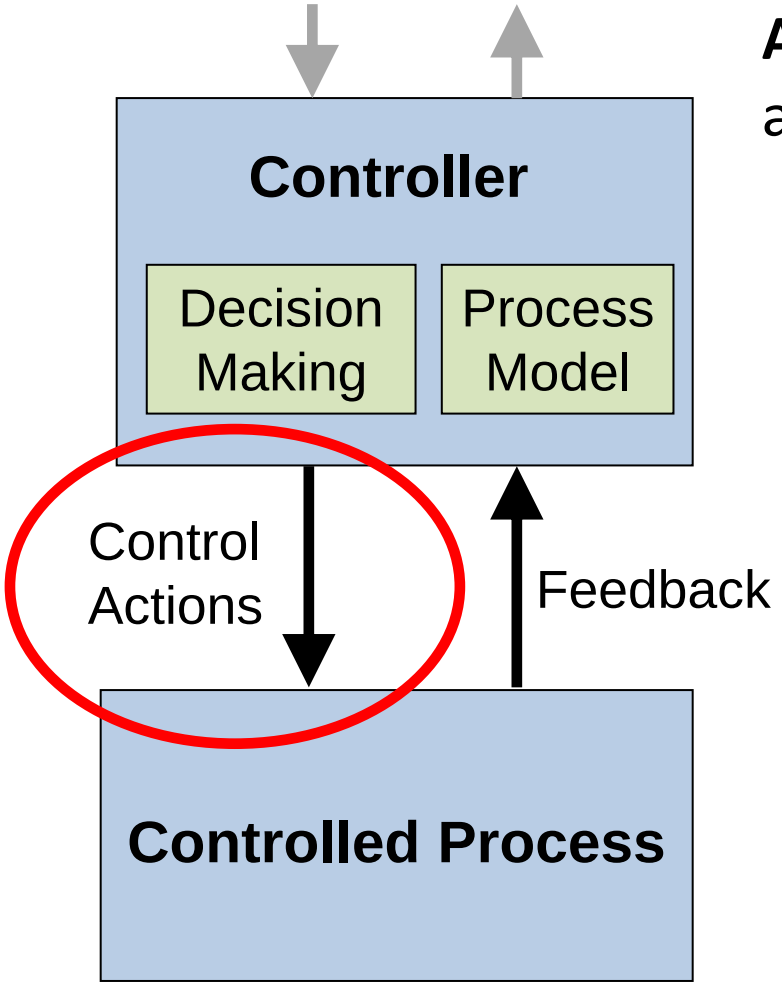
Observability Condition: The controller must be able to ascertain the relevant states of the system.

(Leveson, 2012)



Model Condition: The controller must have (or contain) a model of the system

(Leveson, 2012)

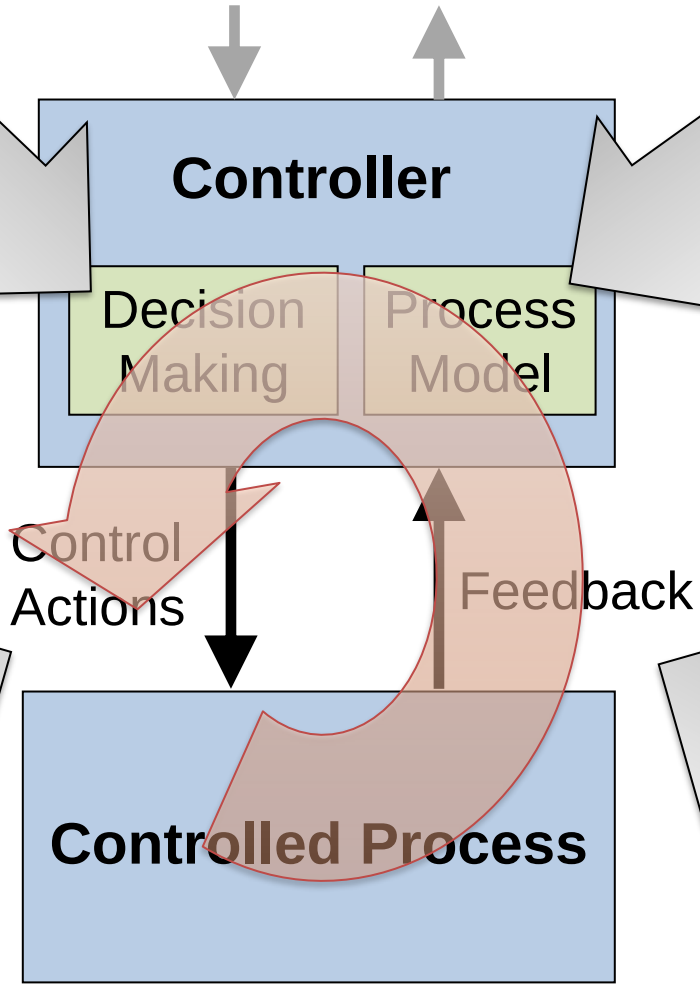


Action Condition: The controller must be able to affect the system state

(Leveson, 2012)

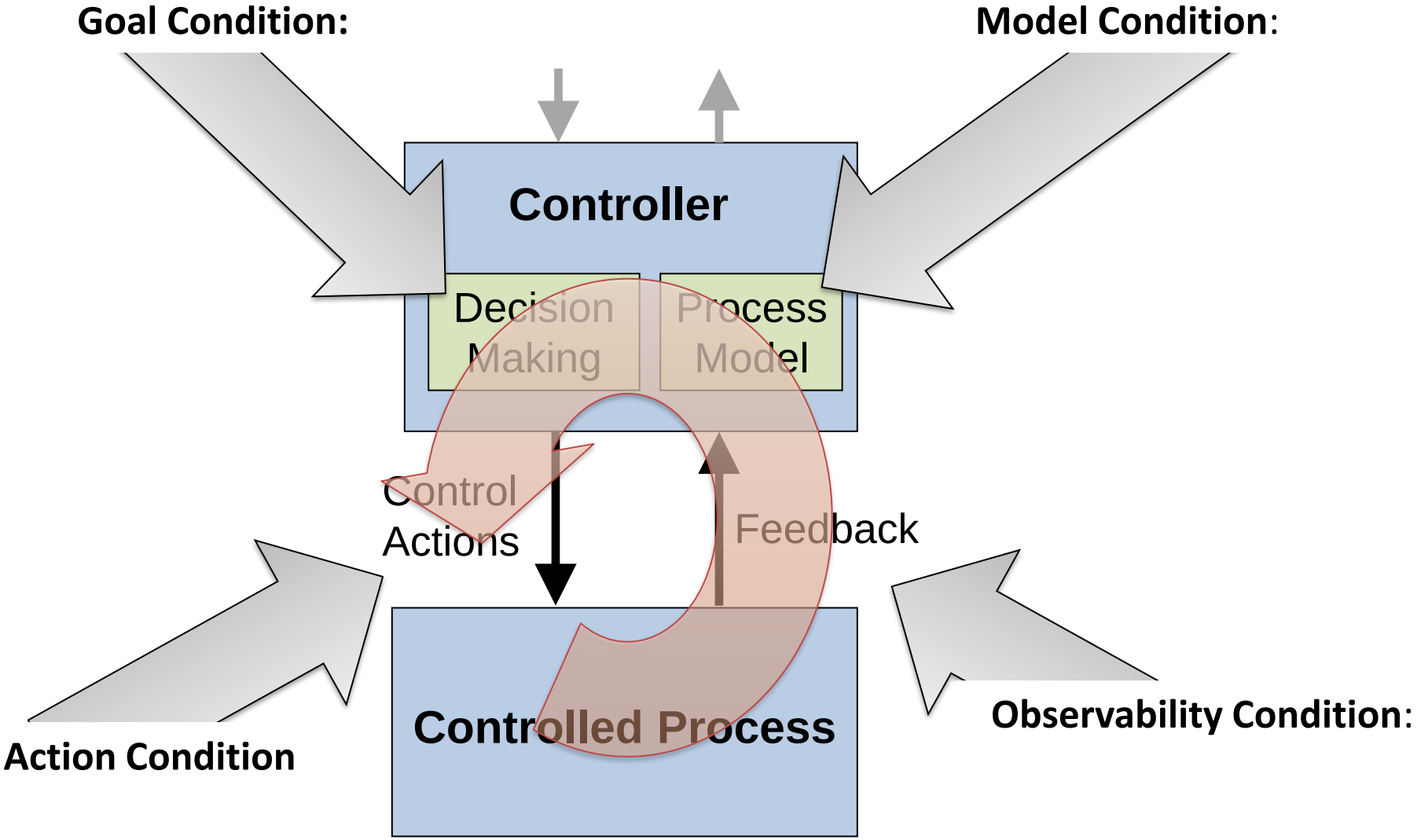
Goal Condition: The controller must have and prioritize appropriate goals

Model Condition: The controller must have a model of the system state and how it can change

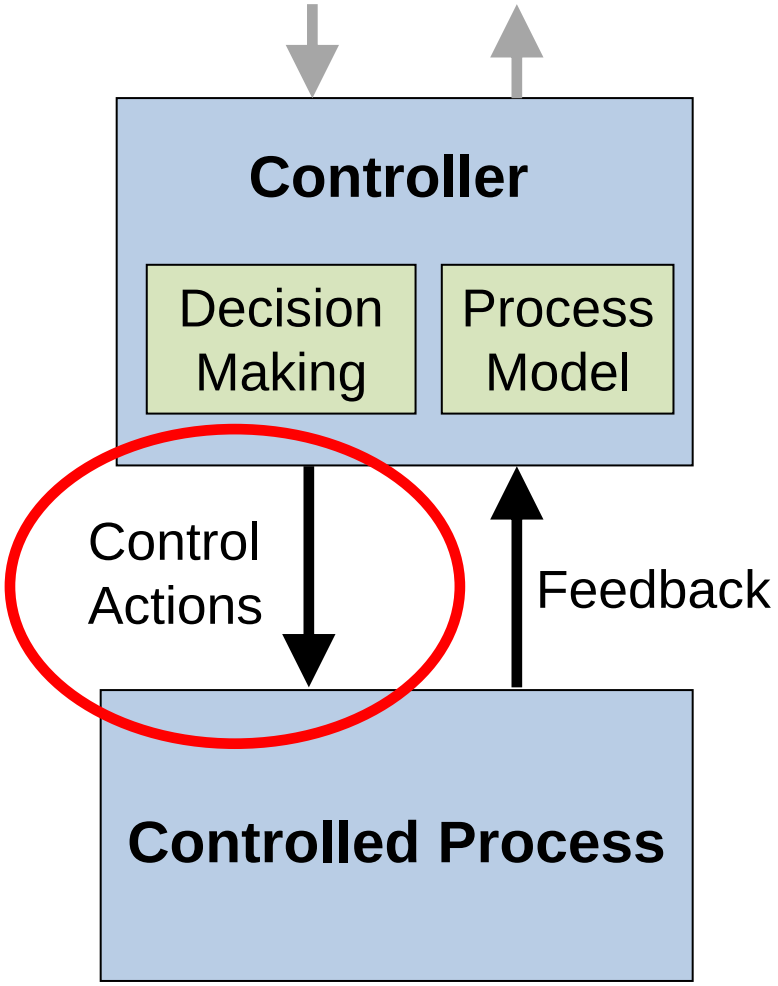


Action Condition: The controller must have appropriate authority and control to achieve the goals

Observability Condition: The controller must be able to ascertain the state of the system.



Accidents & incidents events occur because these conditions were broken!



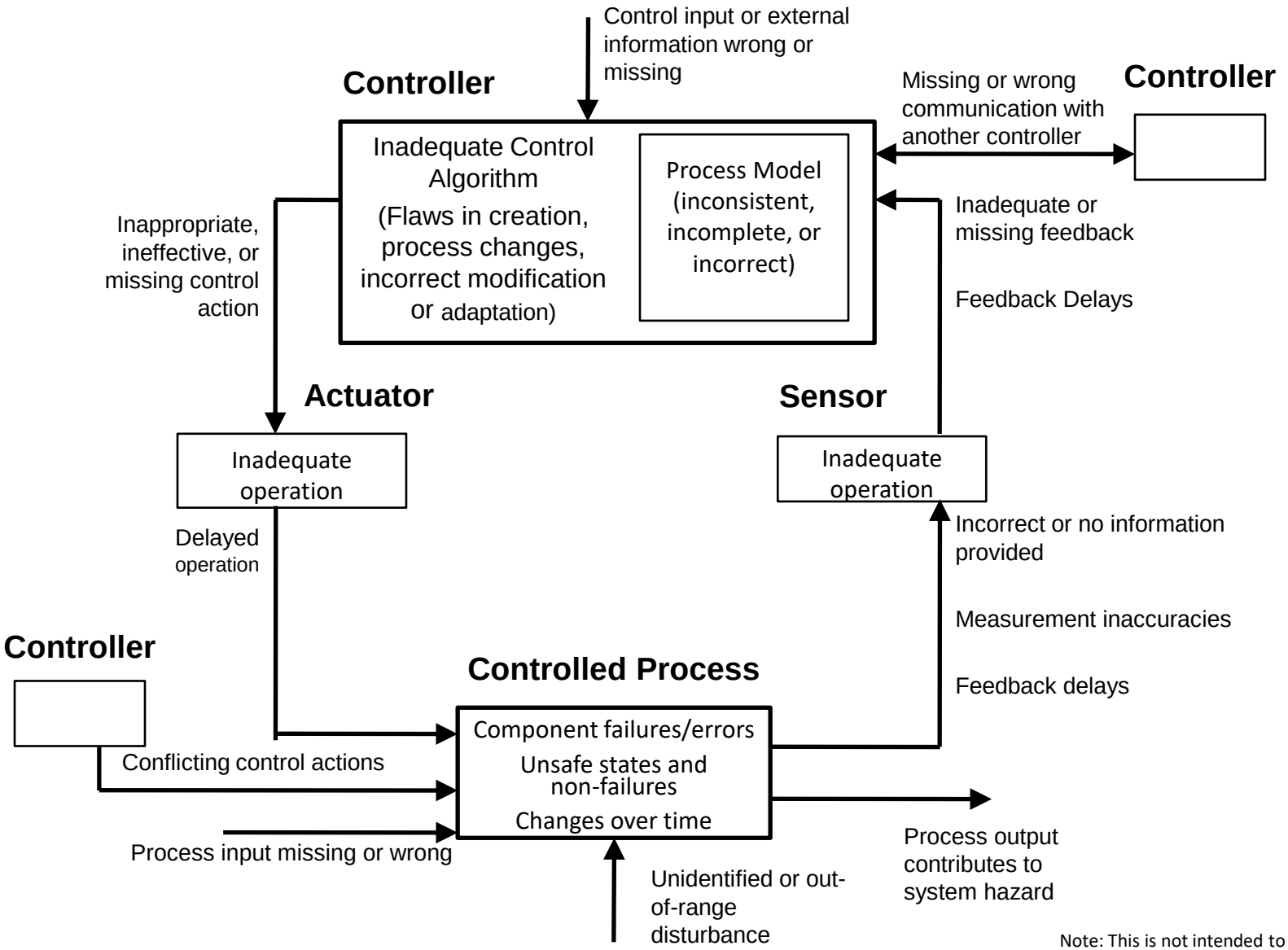
Unsafe Control Actions (UCAs)

Control Actions may be Unsafe in 4 ways:

1) Control actions required for safety are not given
2) Unsafe actions are given
3) Potentially safe control actions but given too early, too late (timing)
4) Control action stops too soon or applied too long (duration)

(Leveson, 2012)

Some Factors in Causal Scenarios



(Leveson, 2012)

Note: This is not intended to be complete, but it provides a starting point. You will need to tailor the specific factors relevant to your application.

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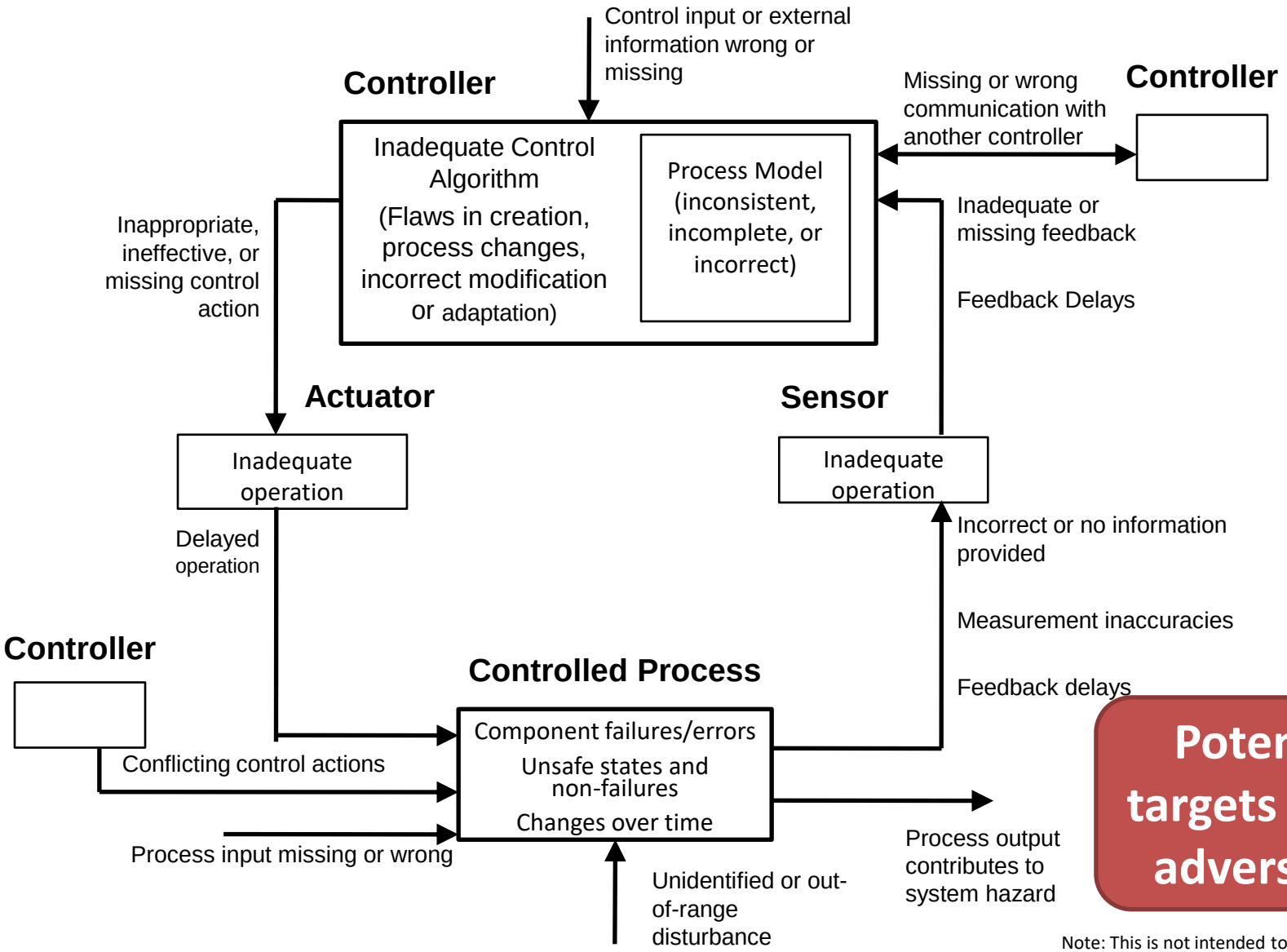

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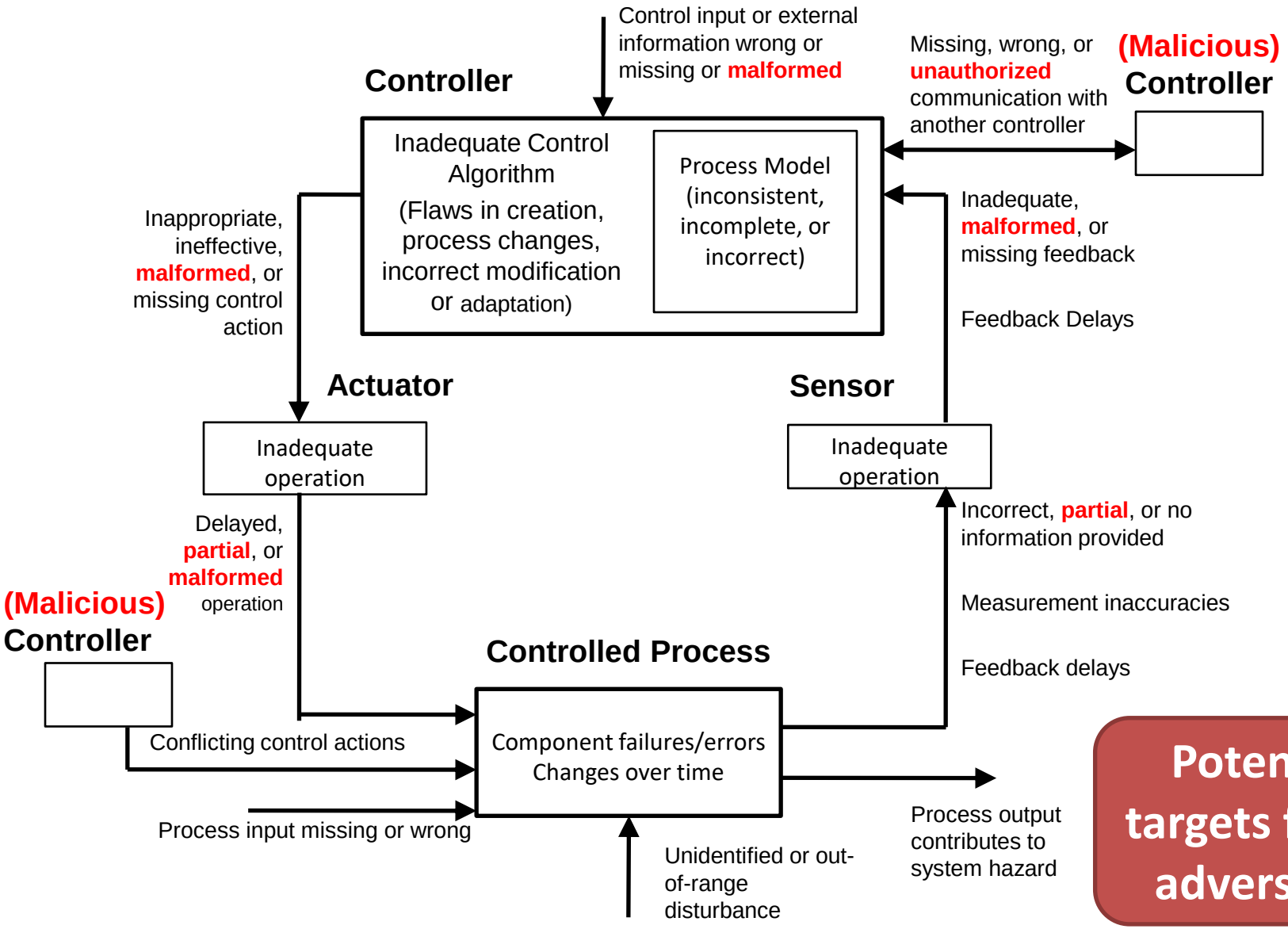

(Young, 2014)

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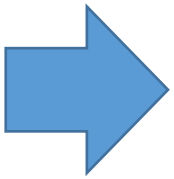
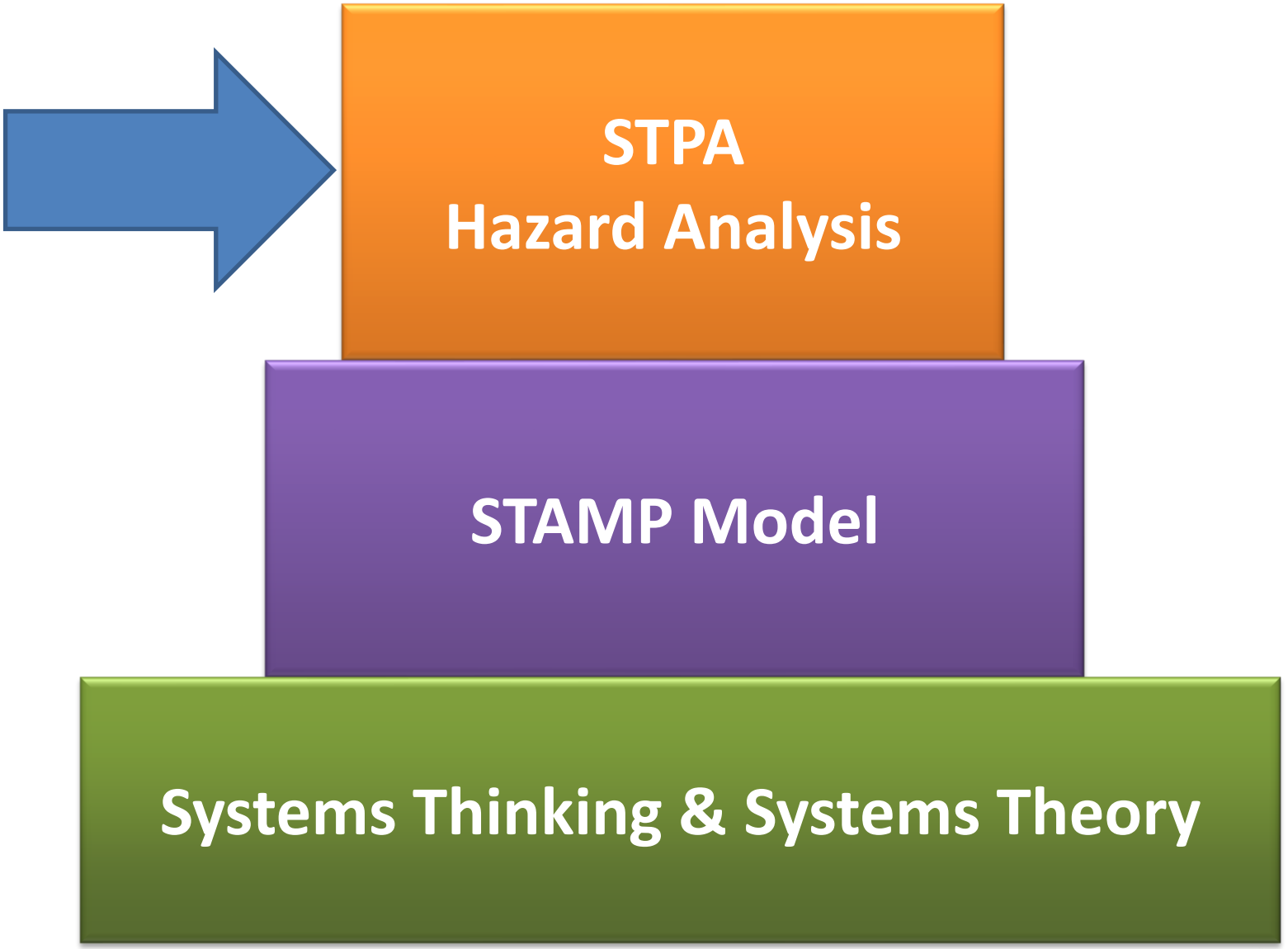
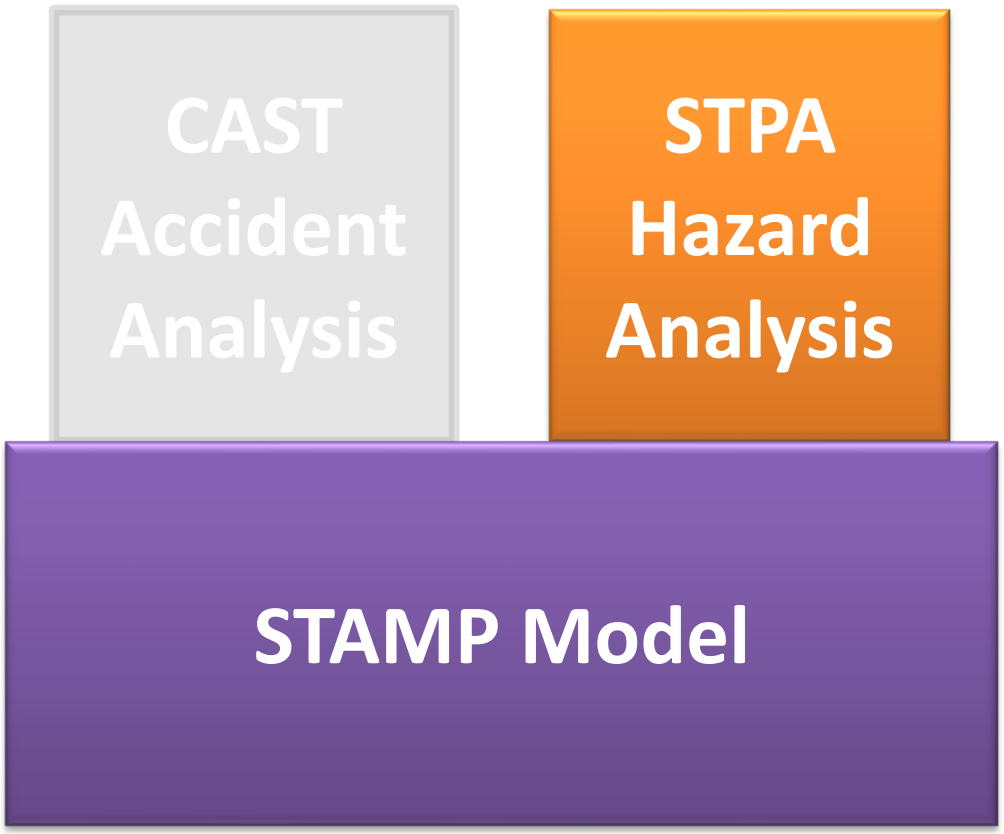


System Theory, STAMP, STPA



(Leveson, 2012)

STAMP, STPA, and CAST

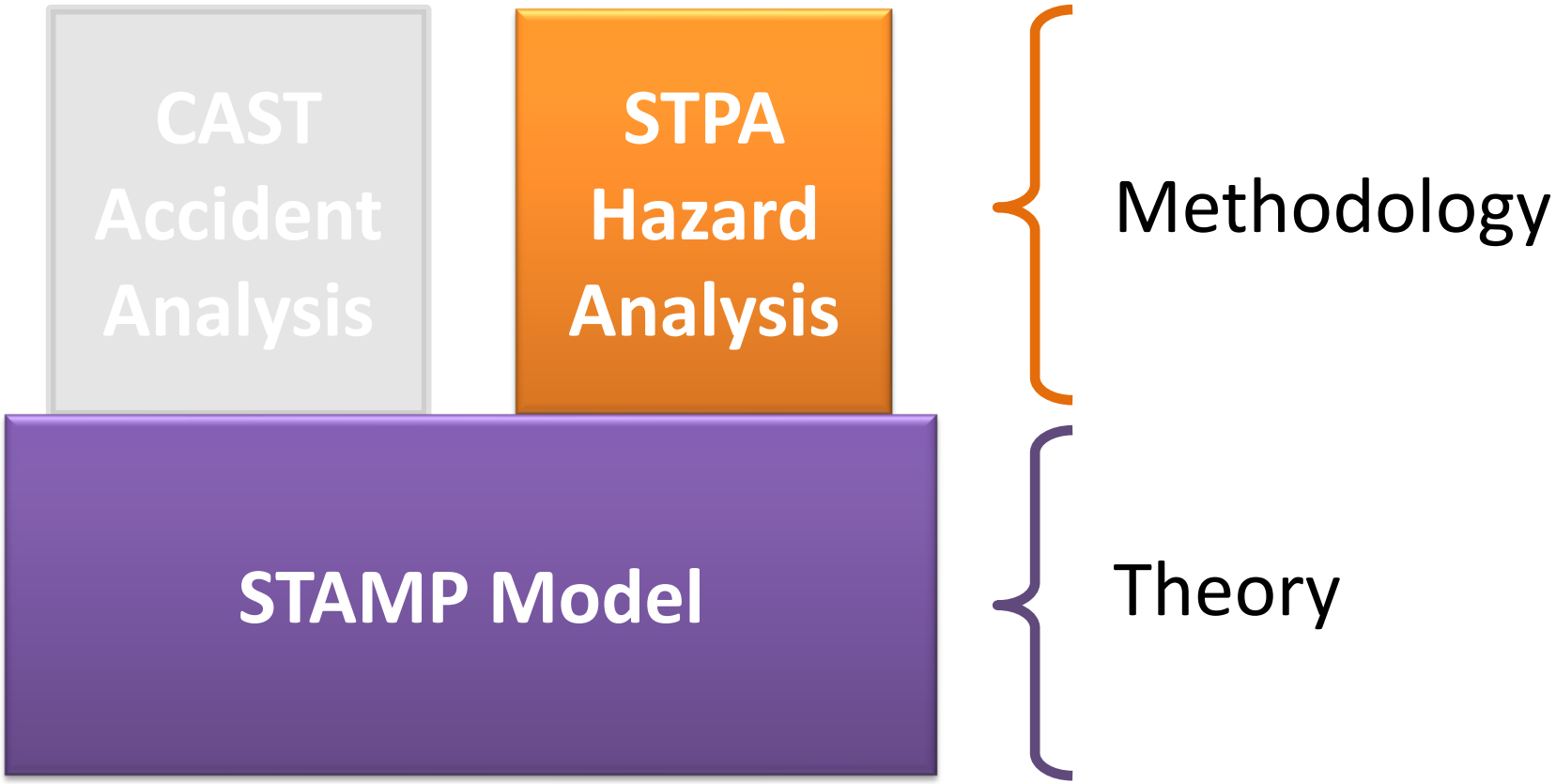


How do we find inadequate control in a design?

Losses are caused by inadequate control

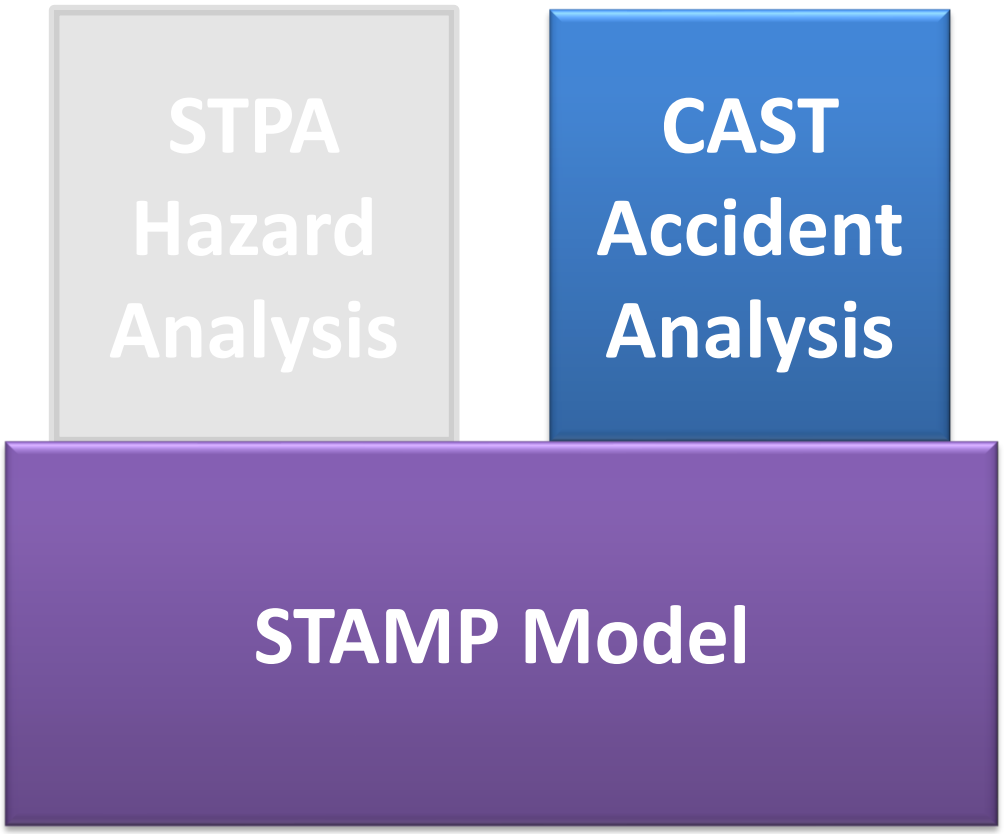
(Leveson, 2012)

STAMP, STPA, and CAST



(Leveson, 2012)

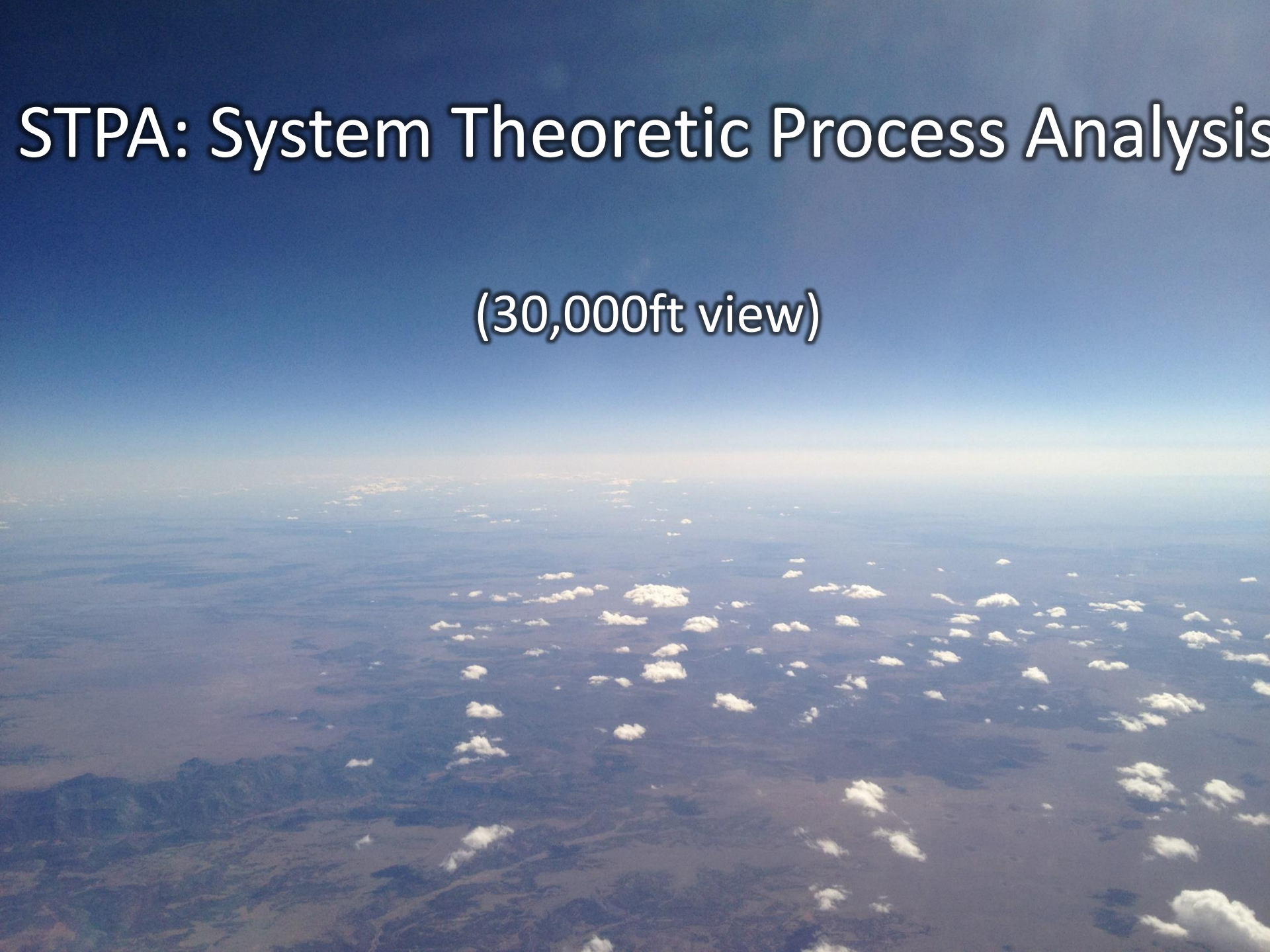
STAMP, STPA, and CAST



How do we find all causes of a past loss event?

Losses are caused by inadequate control

(Leveson, 2012)

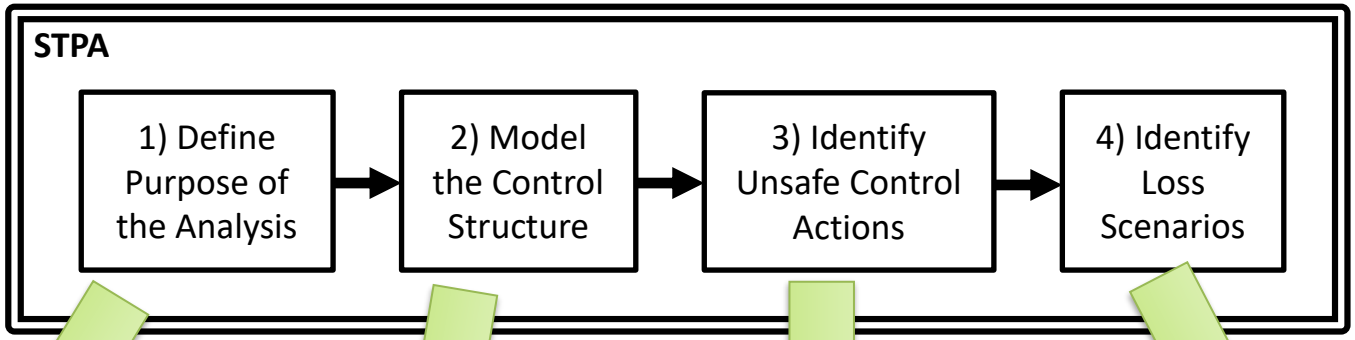

STPA: System Theoretic Process Analysis
(30,000ft view)

System-Theoretic Process Analysis (STPA)

STPA is a technique for safety-driven development and assessment

STPA anticipates hazardous scenarios caused by:

- Unsafe decision-making
- Software, computers, and automation
- Human error/confusion
- Flawed assumptions
- Missing design requirements
- Interactions between systems
- Etc.

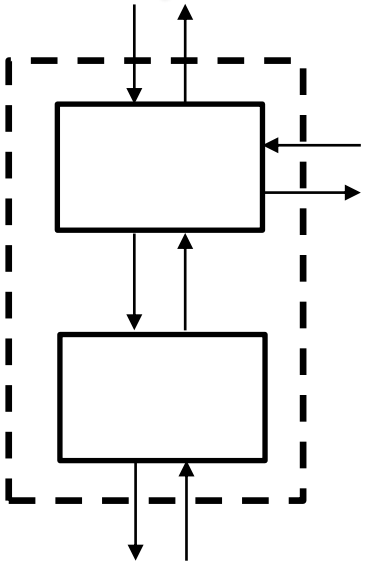


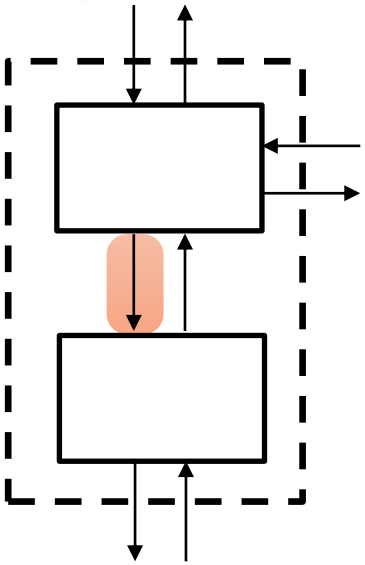
Identify Goals, Losses, Hazards

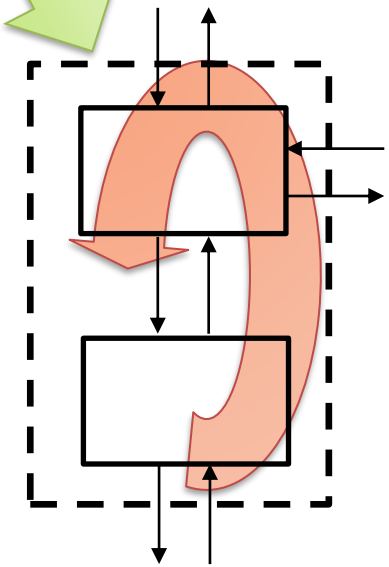
Define System boundary

Environment

System





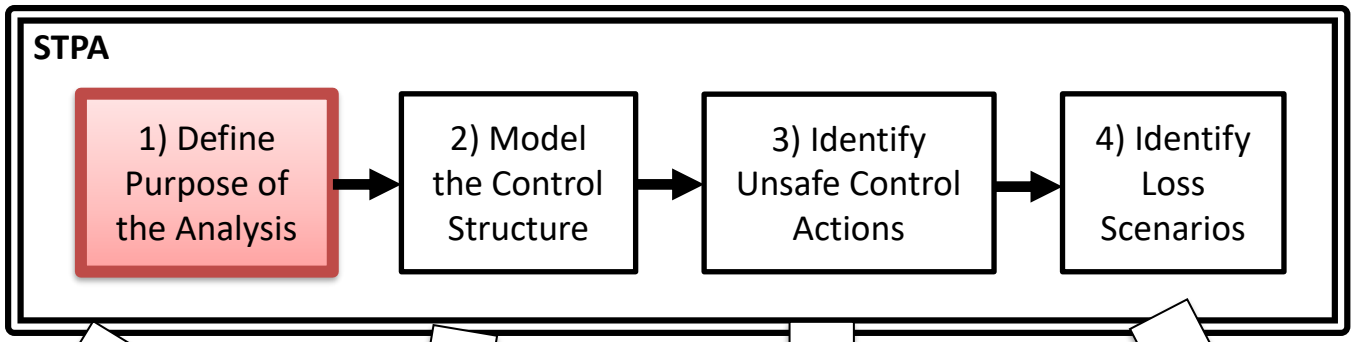


Losses to prevent **Model** **Behavior to prevent** **How could behavior occur**

(Leveson and Thomas, 2018)


STPA: System Theoretic Process Analysis
(10,000ft view)

STPA

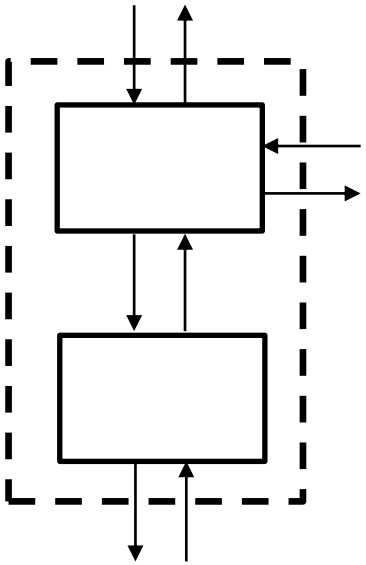


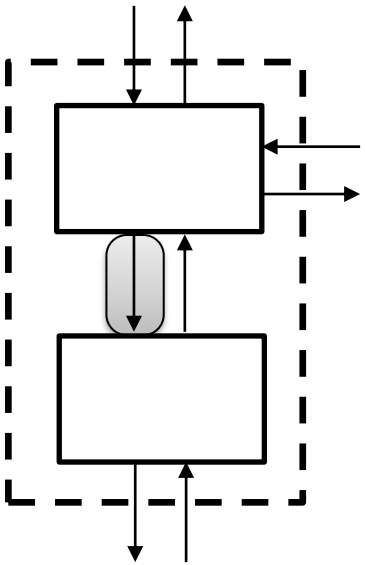
Identify Goals, Losses, Hazards

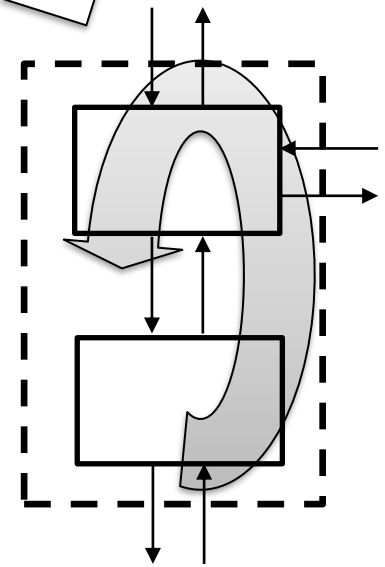
Define System boundary

Environment

System







(Leveson and Thomas, 2018)

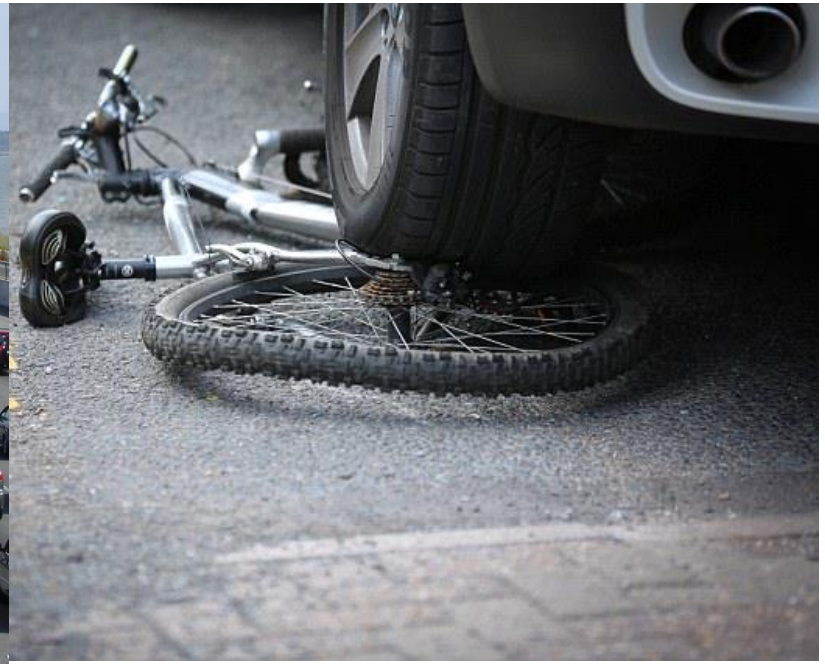
Automotive Example

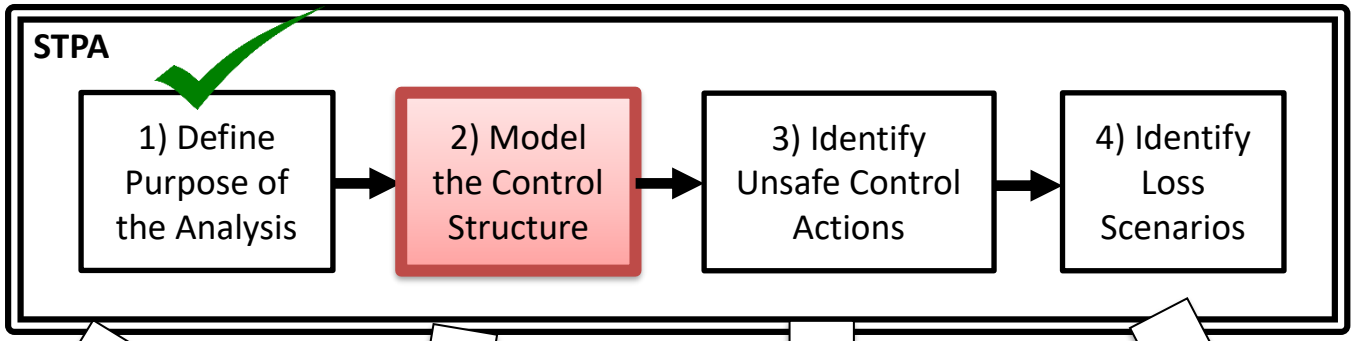
- Stakeholder Losses to prevent
  - L-1. Loss of life or serious injury to people
  - L-2. Damage to the vehicle or objects outside the vehicle

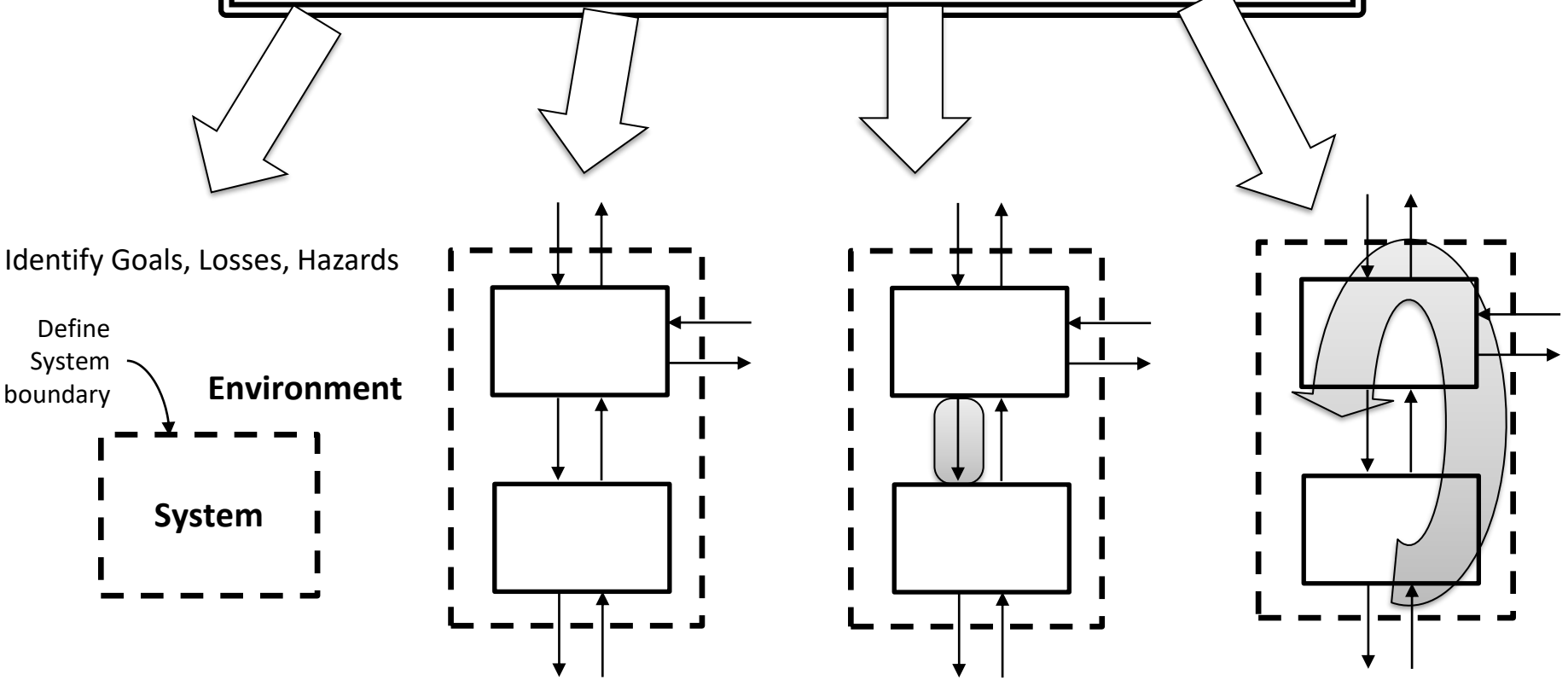
A Stakeholder Loss ("Loss") involves something of value to stakeholders. It is a loss that is unacceptable to stakeholders.

Automotive Example

- Stakeholder Losses
  - L-1. Loss of life or serious injury to people
  - L-2. Damage to the vehicle or objects outside the vehicle
  - L-3: Loss of mission (transportation)
  - L-4: Loss of customer satisfaction
  - Etc.

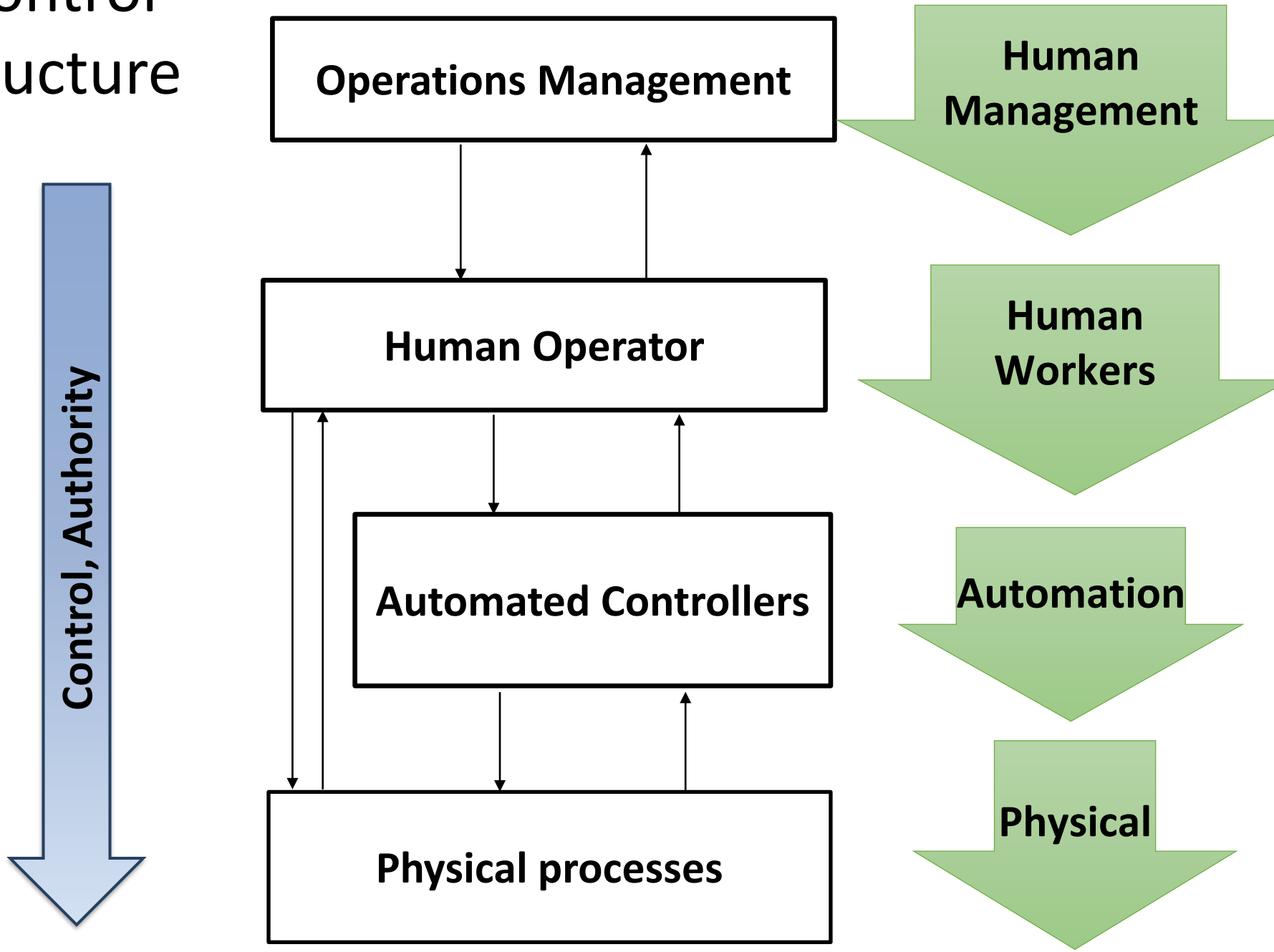




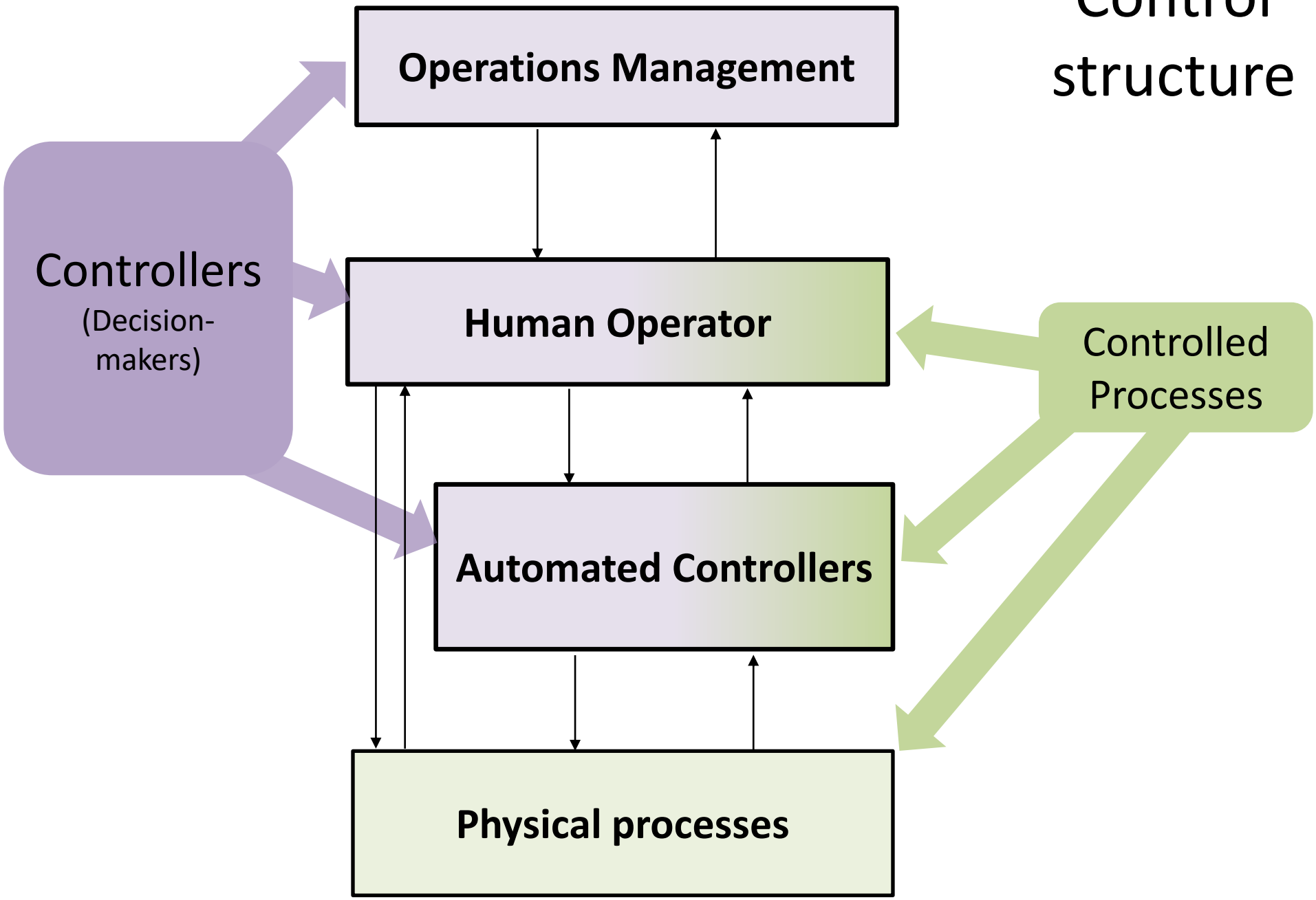


(Leveson and Thomas, 2018)

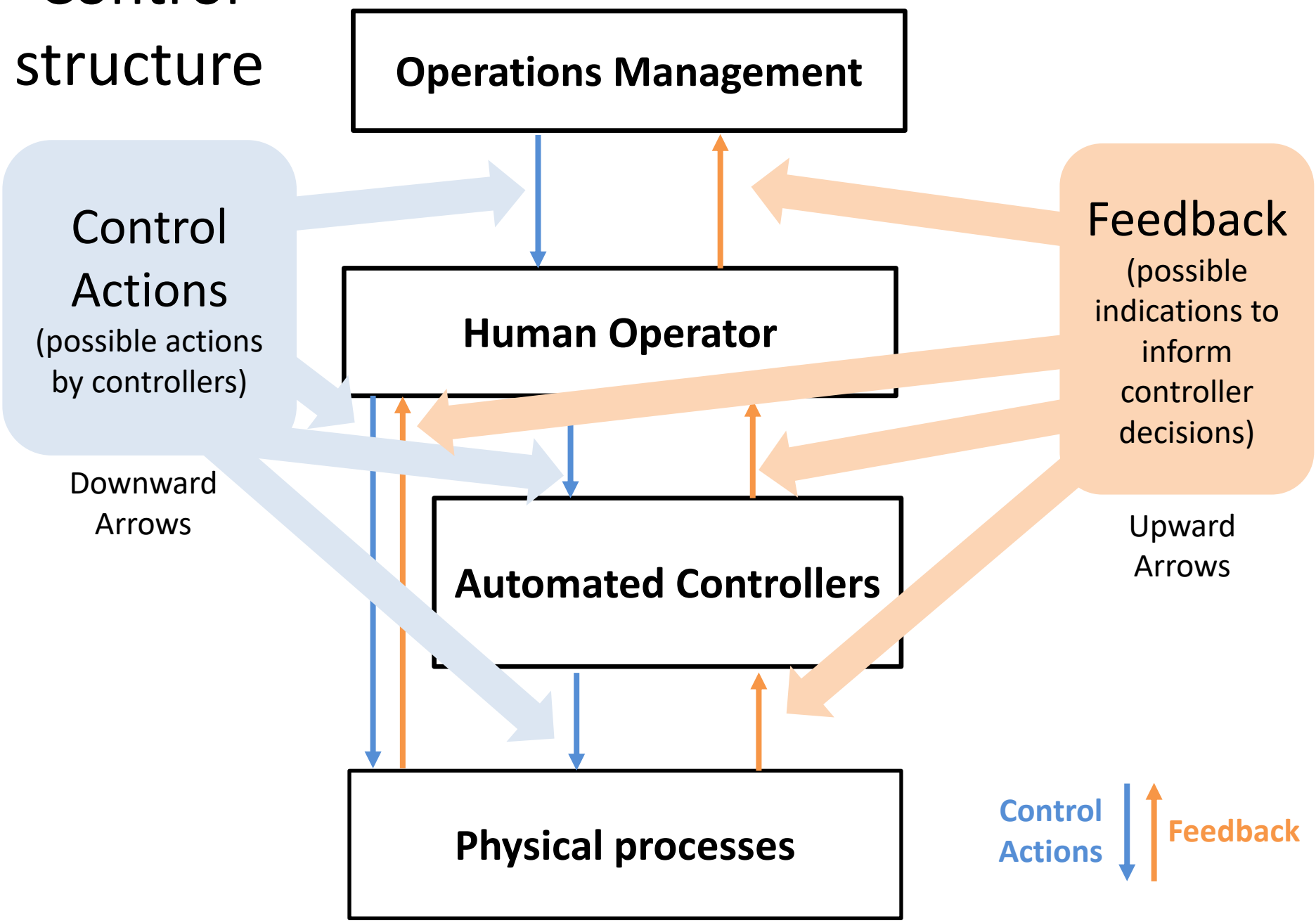
Control structure



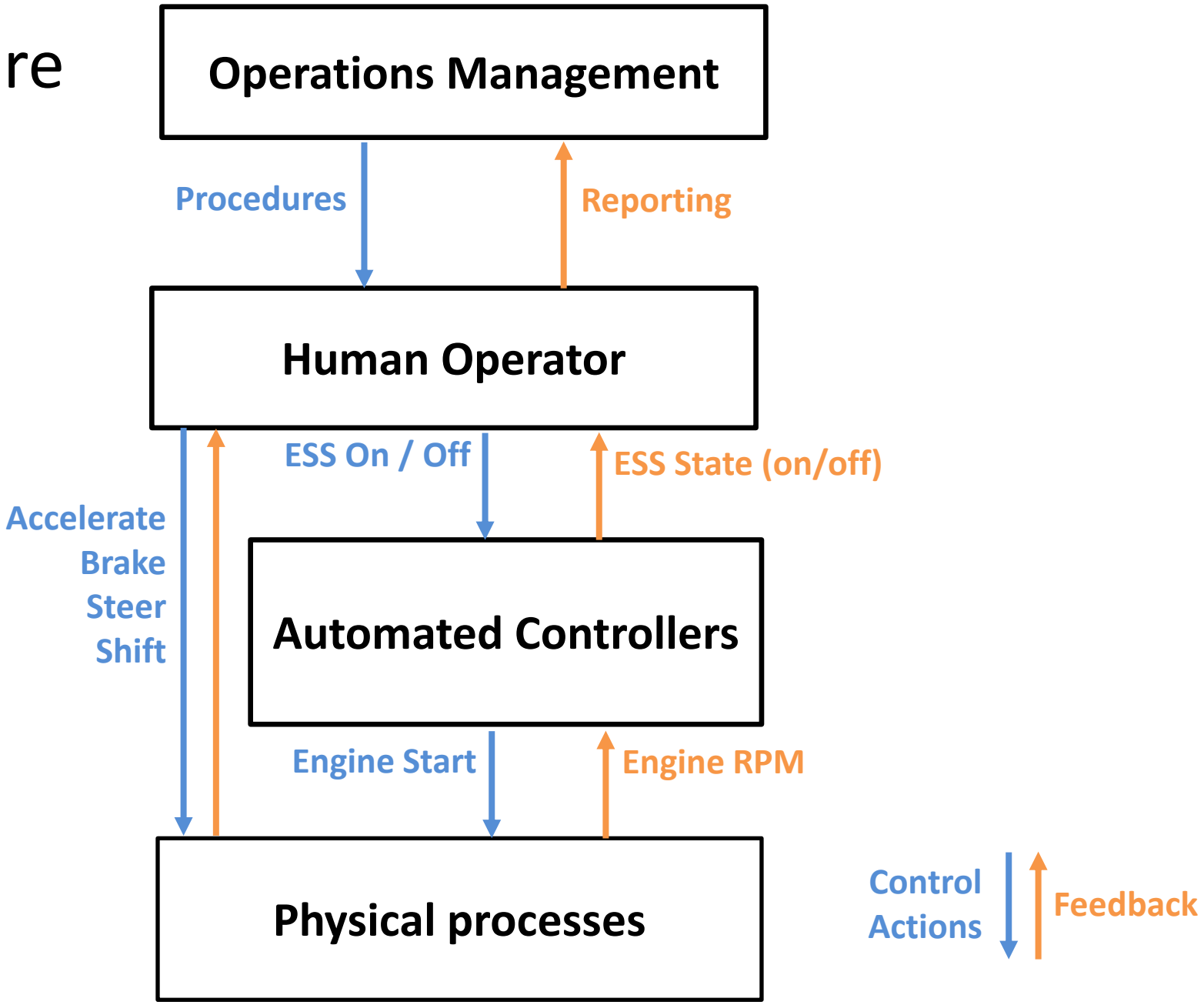
Control structure



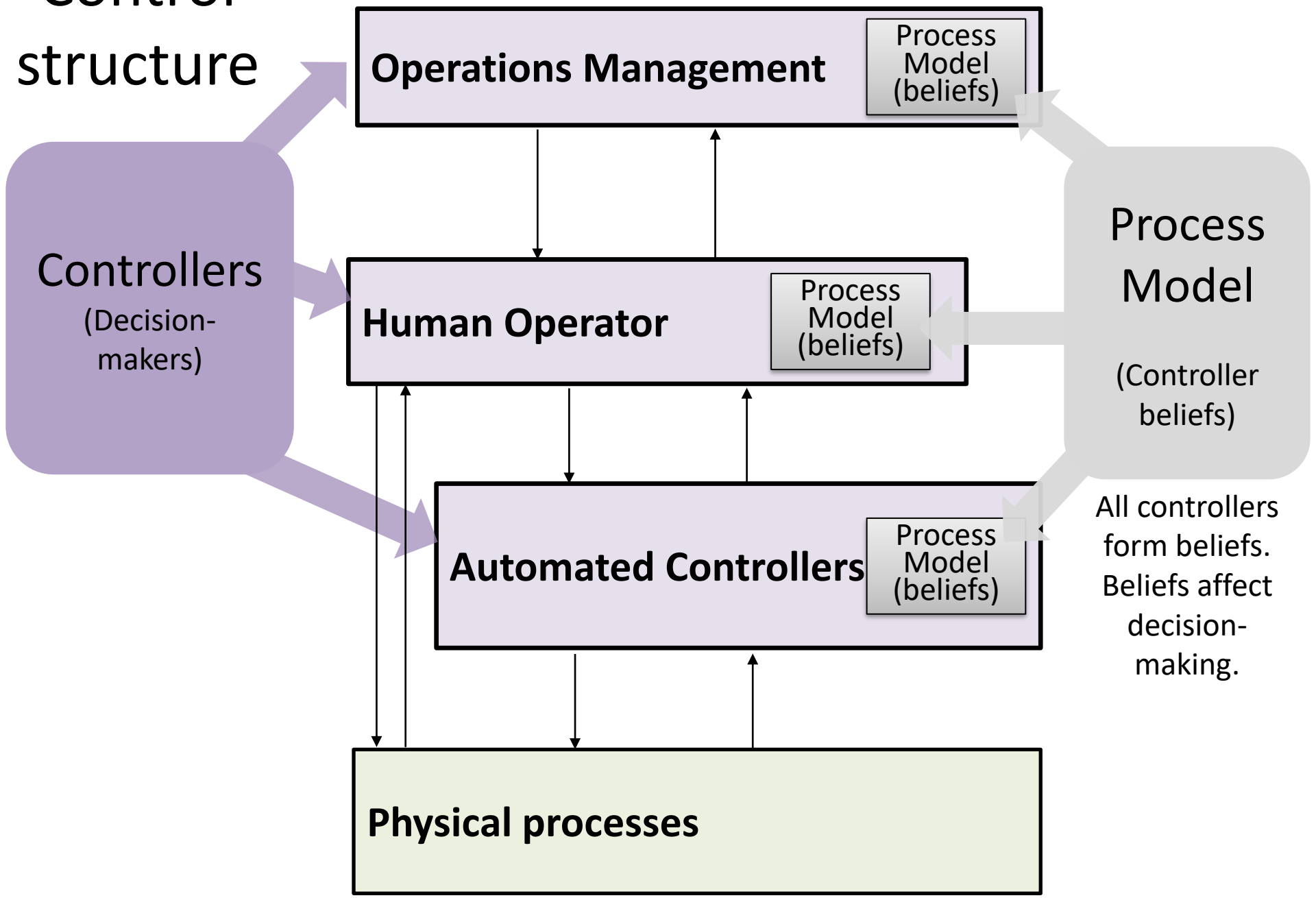
Control structure



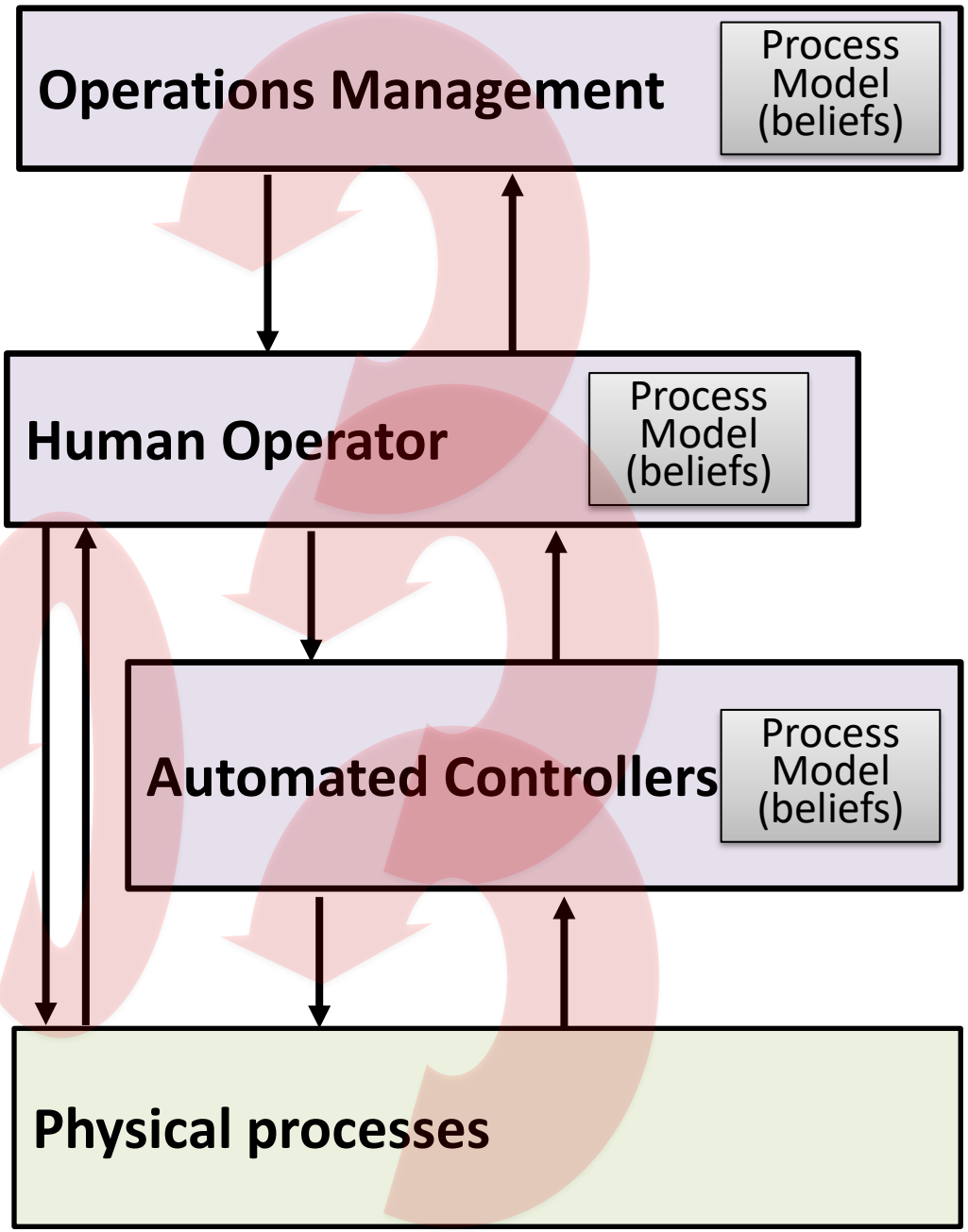
Control structure



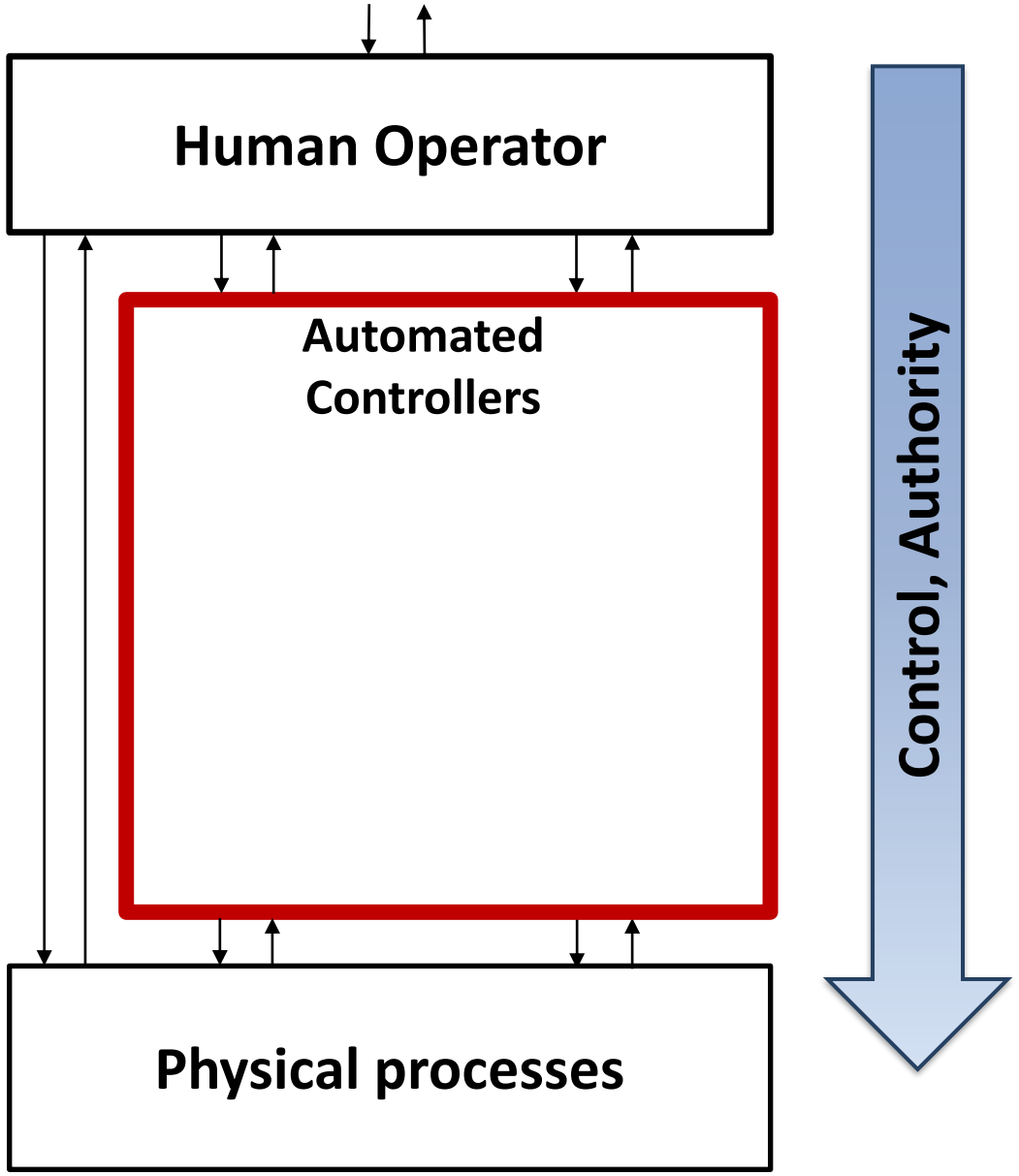
Control structure



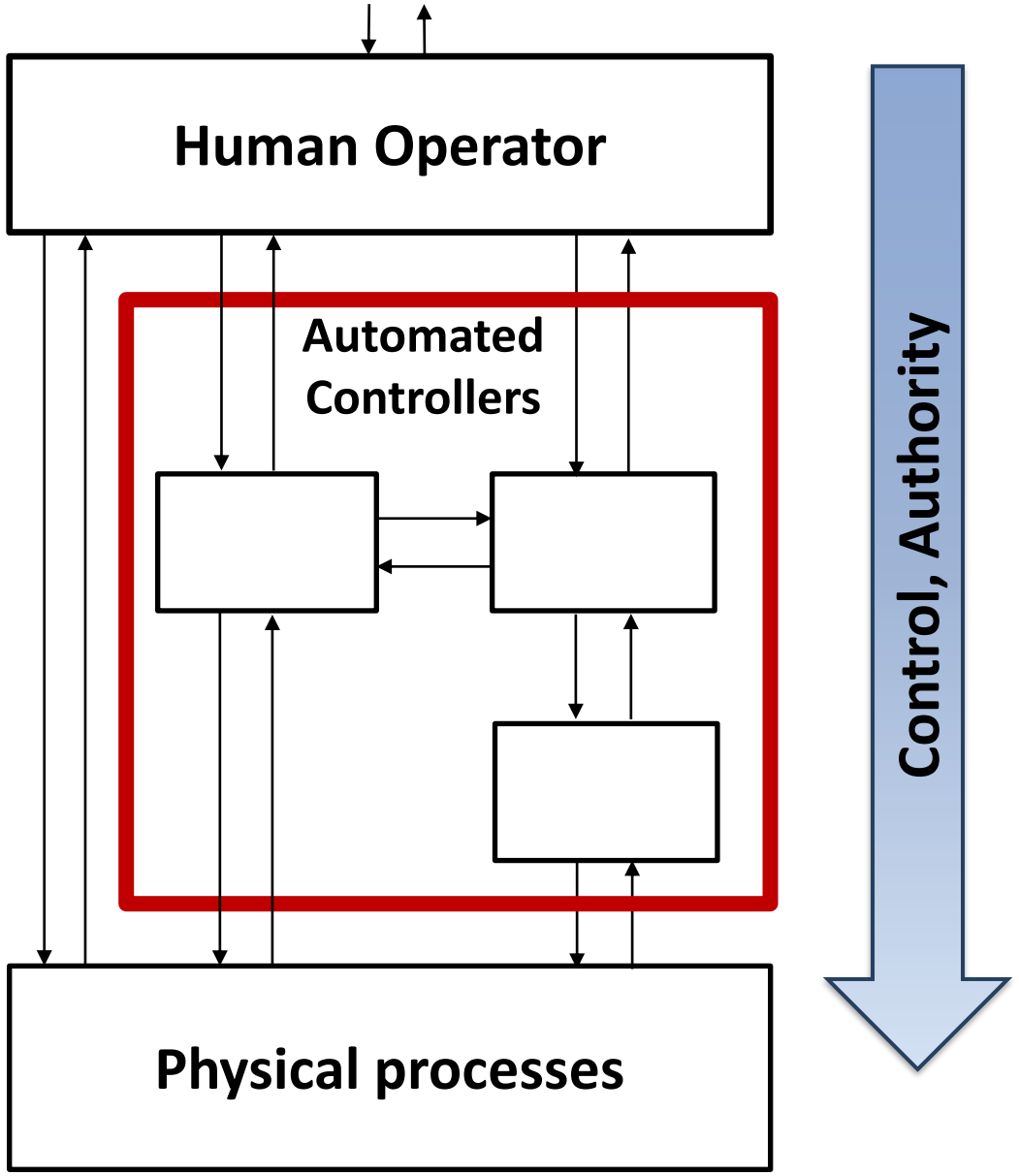
Control structure

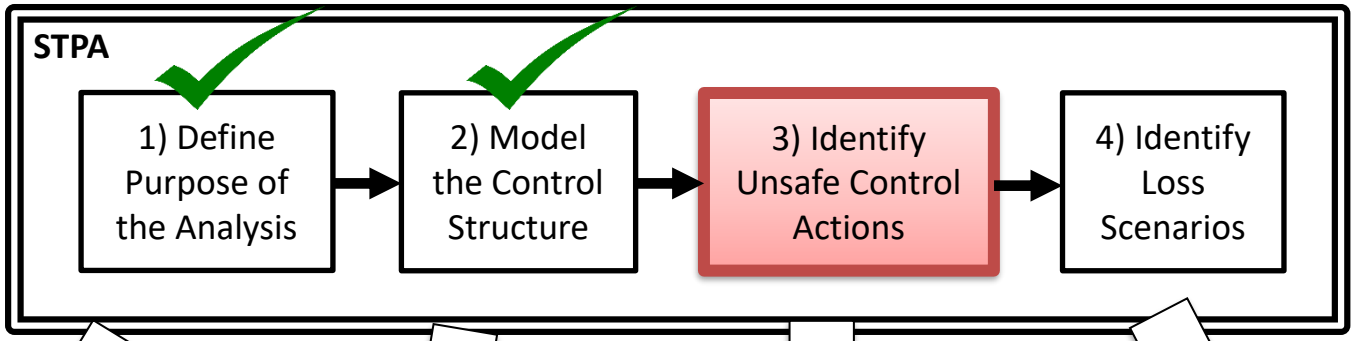


"Zooming in" to create more detailed control structure



"Zooming in" to create more detailed control structure



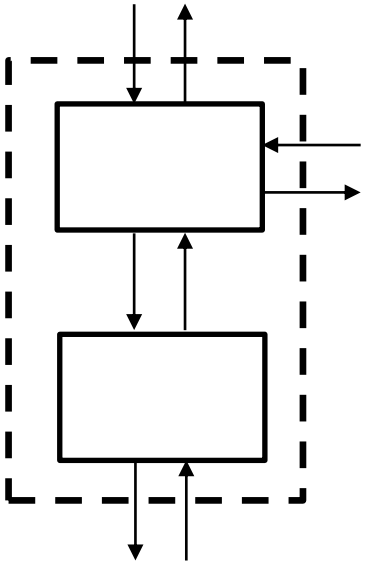


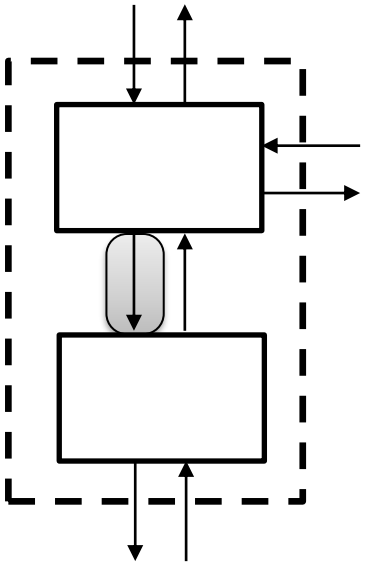
Identify Losses, Hazards

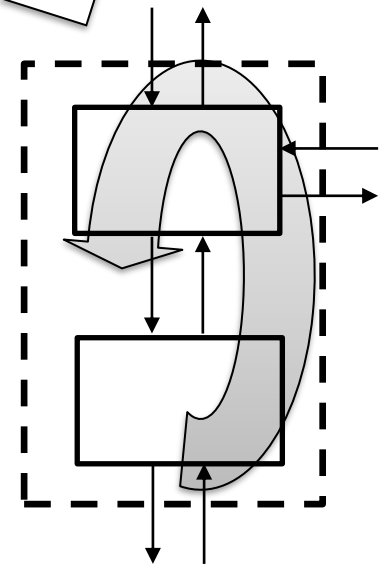
Define System boundary

Environment

System

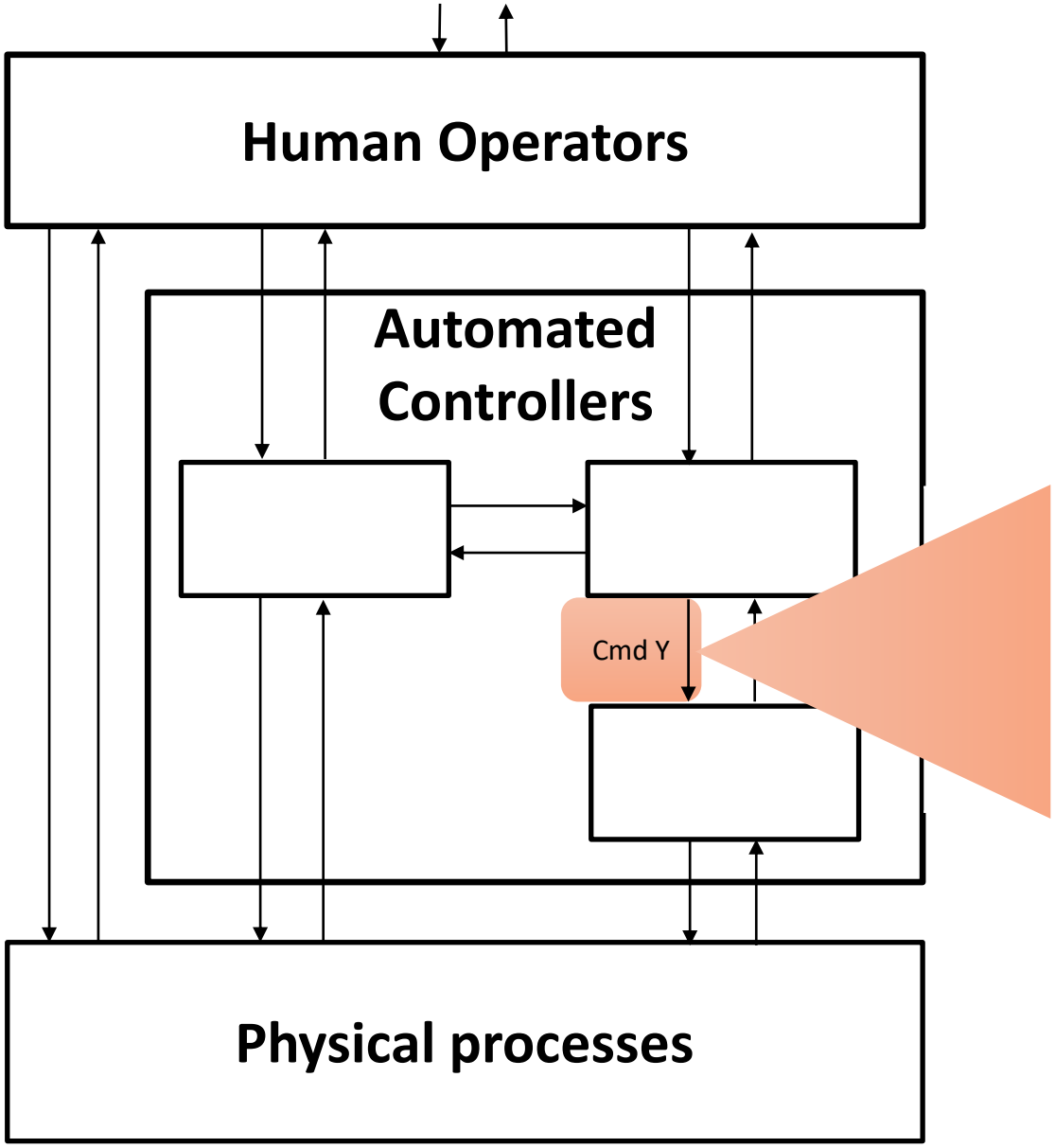






(Leveson and Thomas, 2018)

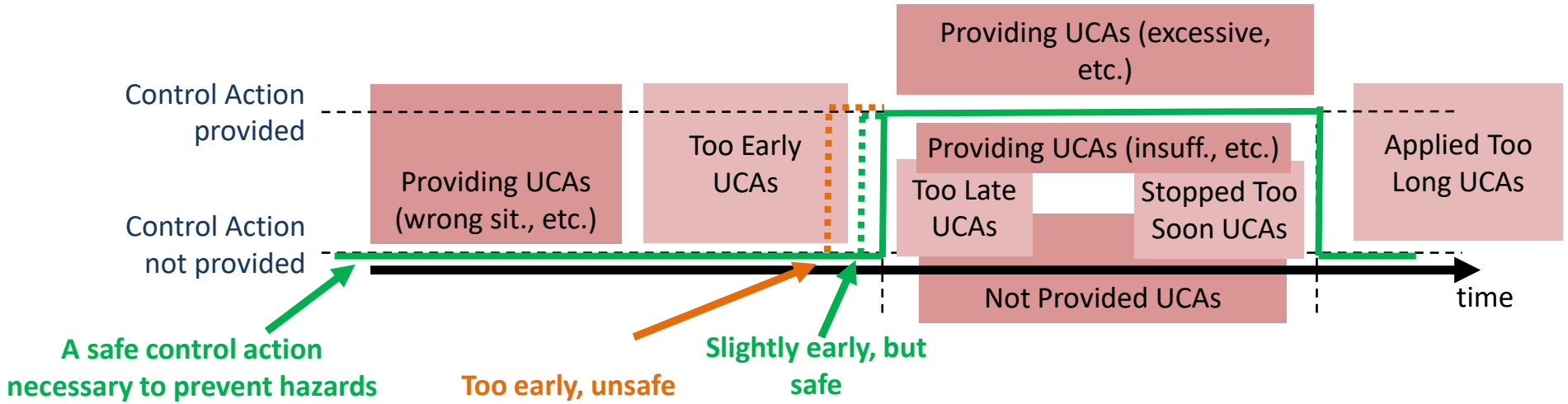
STPA: Identify Unsafe Control Actions (UCA)



Not provided causes hazard	Providing causes hazard	Too early, too late, out of order	Stopped too soon, applied too long

(Thomas, 2017)

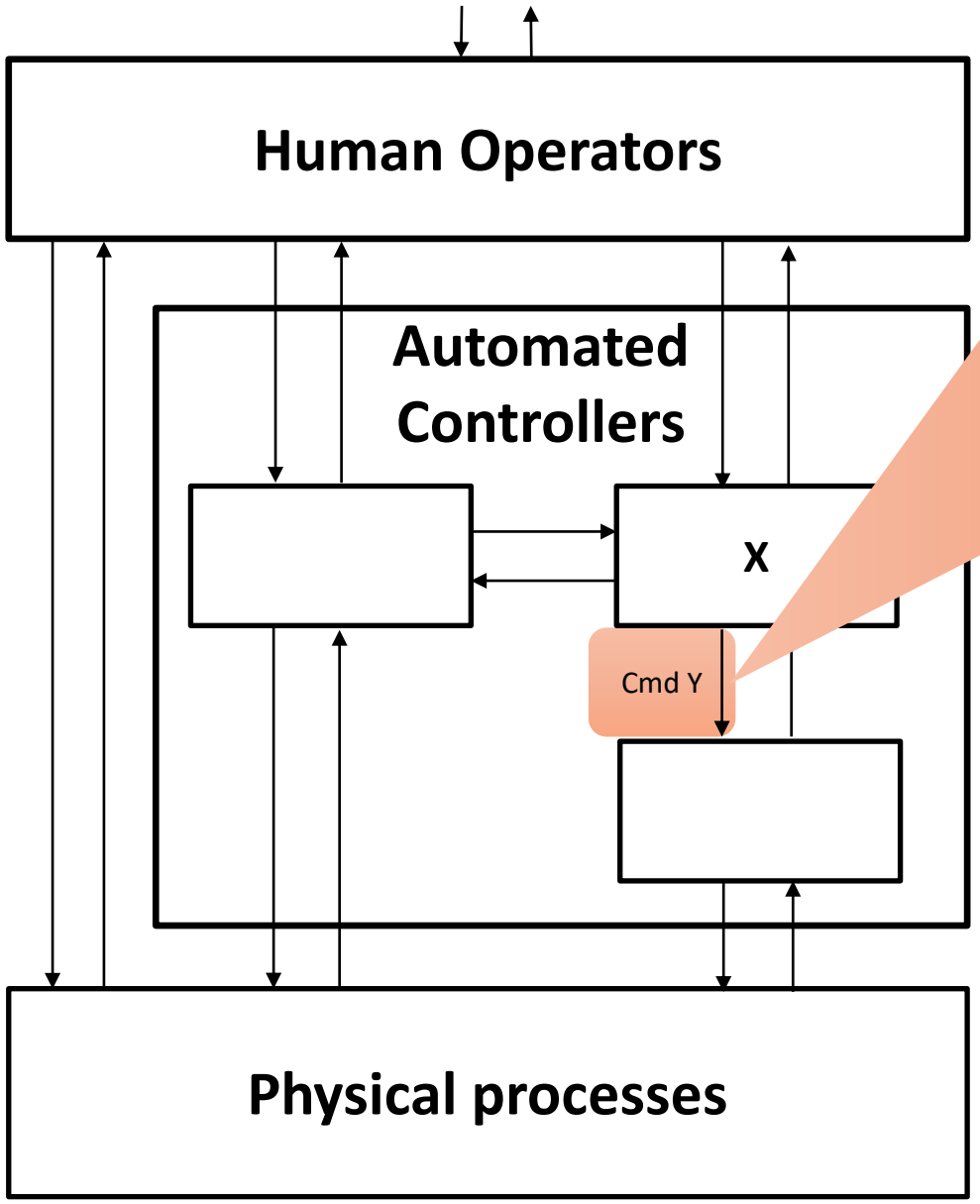
STPA UCA Bounding



	Not providing causes hazard	Providing causes hazard *[in wrong situation, excessive, insufficient, repetitive, wrong direction, etc.]*	Too early, too late, Order	Stopped Too Soon / Applied too long
Control Actions	?	?	?	?

The complete set of UCAs will fully bound the necessary safe behavior

STPA: Identify Unsafe Control Actions (UCA)



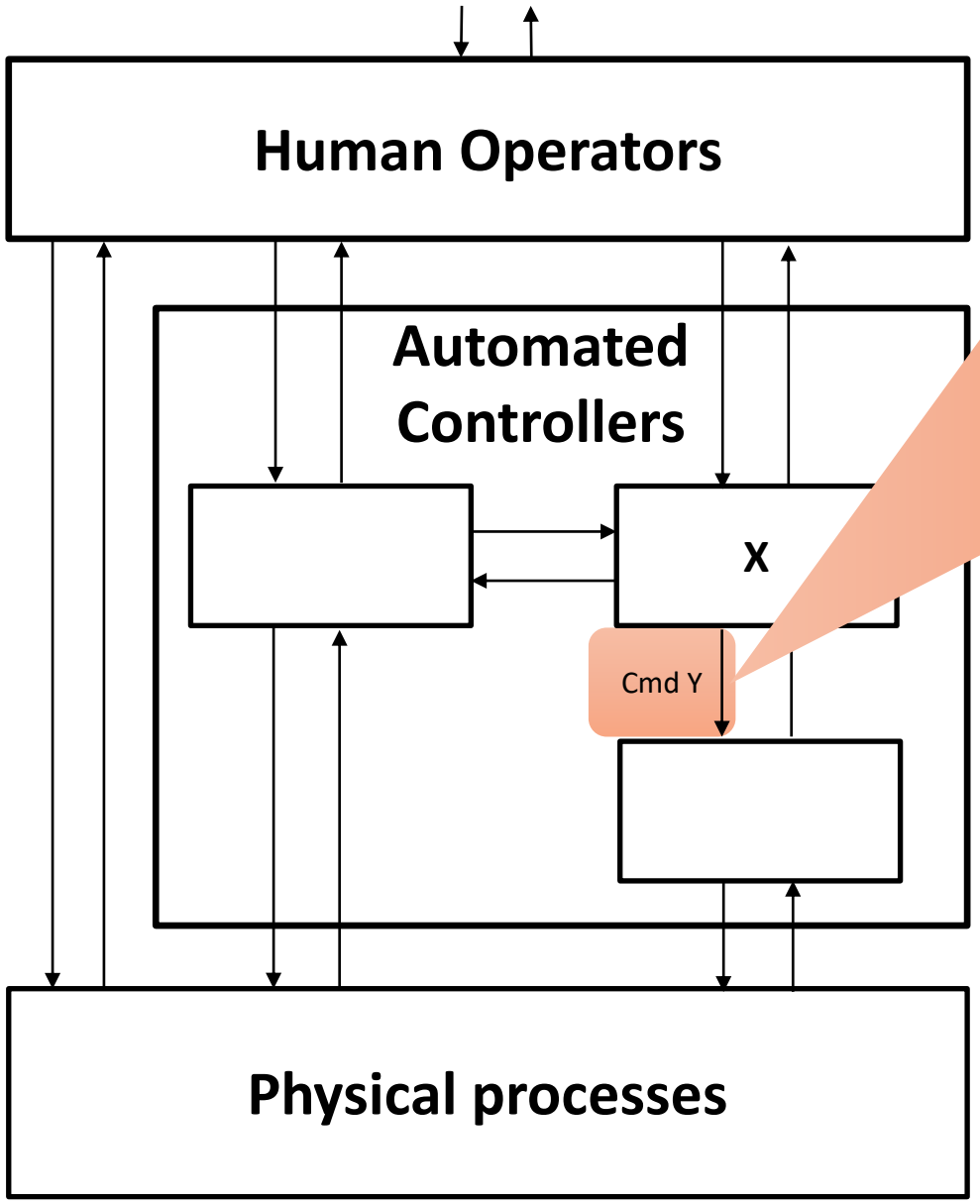
Not provided causes hazard	Providing causes hazard	Too early, too late, out of order	Stopped too soon, applied too long

Example UCA:

Controller X does not provide Cmd Y when Z [H-1]

(Thomas, 2017)

STPA: Identify Unsafe Control Actions (UCA)



Not provided causes hazard	Providing causes hazard	Too early, too late, out of order	Stopped too soon, applied too long

Example UCA:

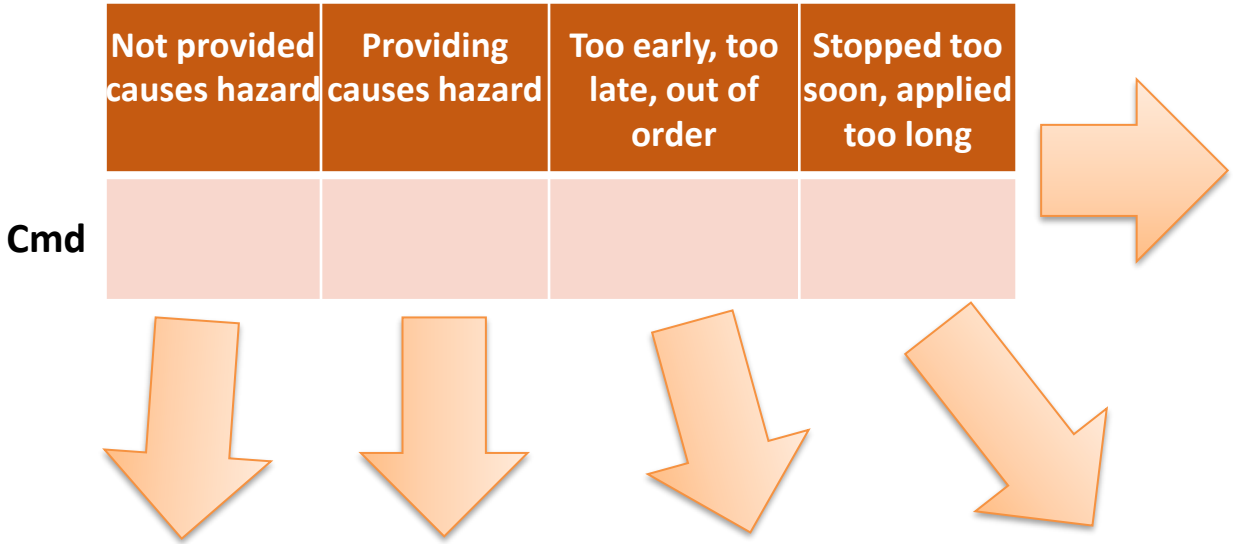
Controller X
does not provide
Cmd Y
when Z
[H-1]

UCA Syntax:

- Source Cont.
- UCA Type
- Control Action
- Context
- Traceability

(Thomas, 2017)

Generating constraints and requirements



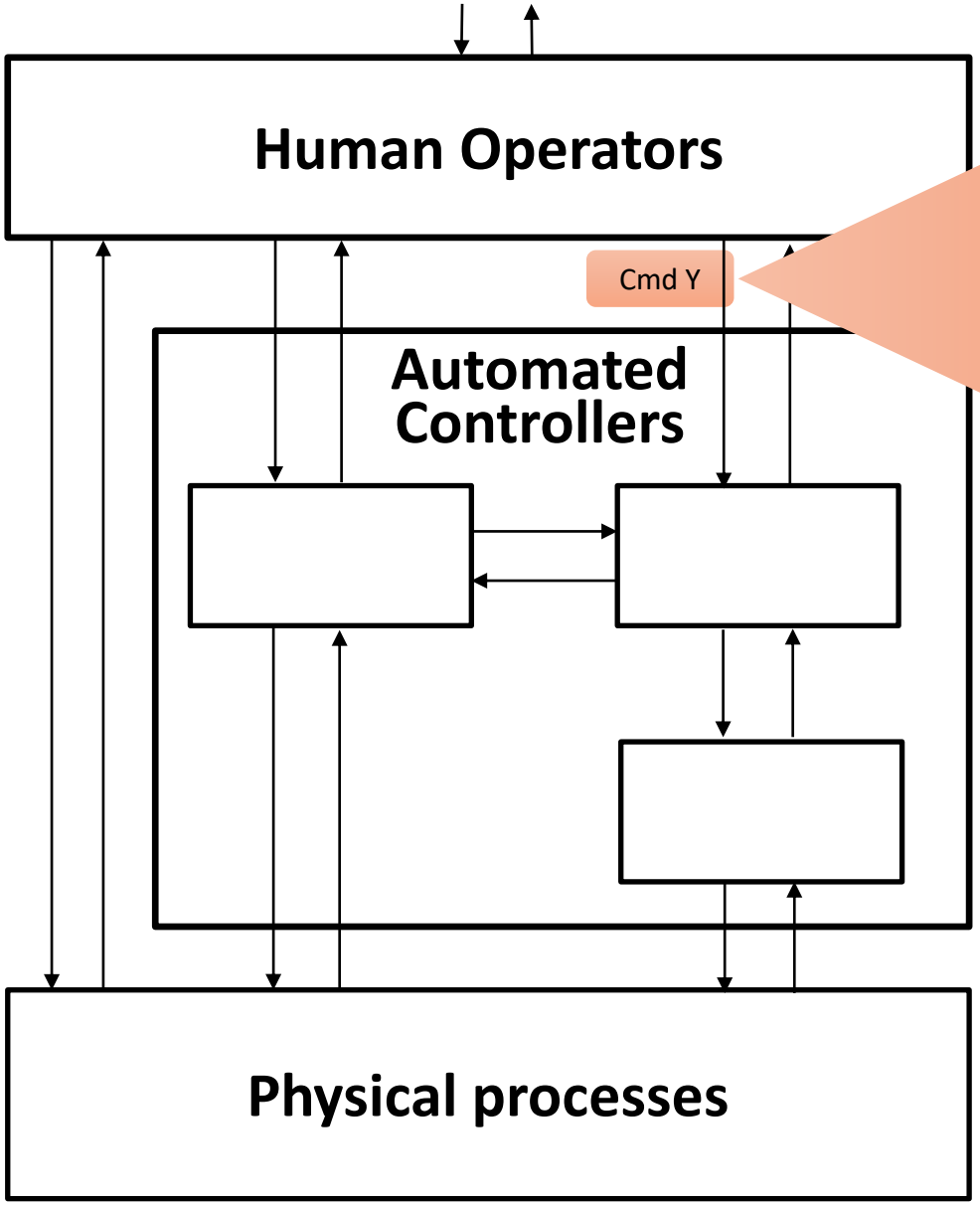
High-level safety constraints
Controller X should not allow A
Controller X shall enforce B
Etc.

Controller X shall provide CMD Y when D	Controller X should not provide CMD Y when E	Controller X shall provide CMD Y within F seconds of G	Controller X shall stop providing CMD Y within H seconds of J
Controller functional safety requirements			

(Thomas, 2017)

What about human interactions?

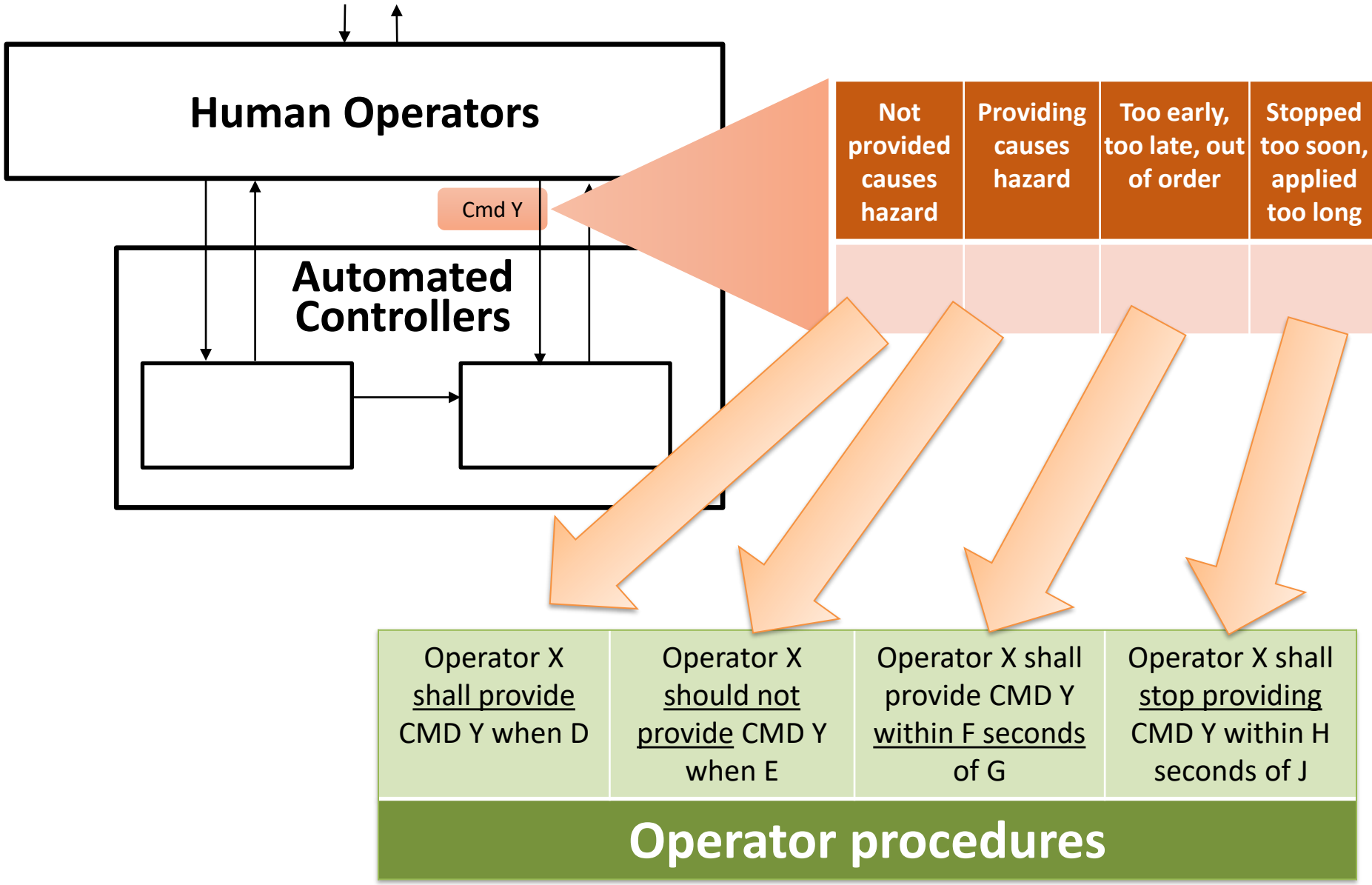
Unsafe Control Actions (UCA)



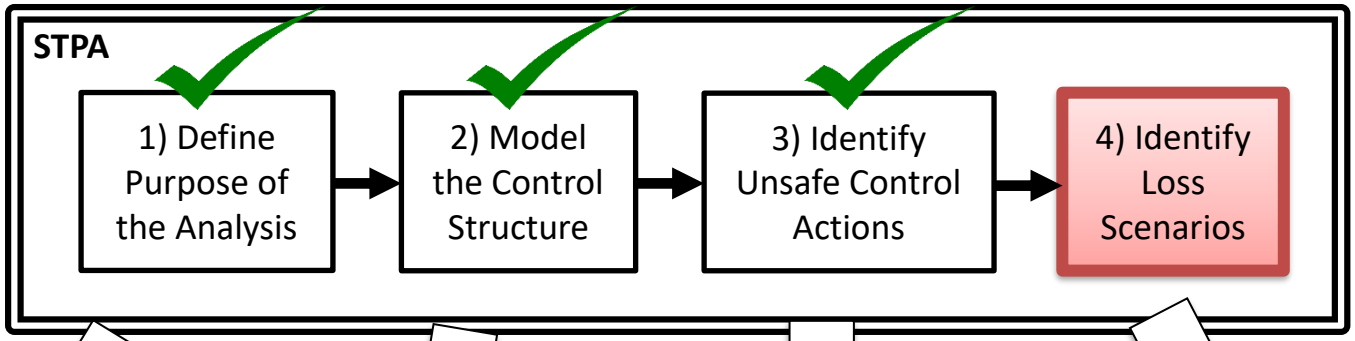
Not provided causes hazard	Providing causes hazard	Too early, too late, out of order	Stopped too soon, applied too long

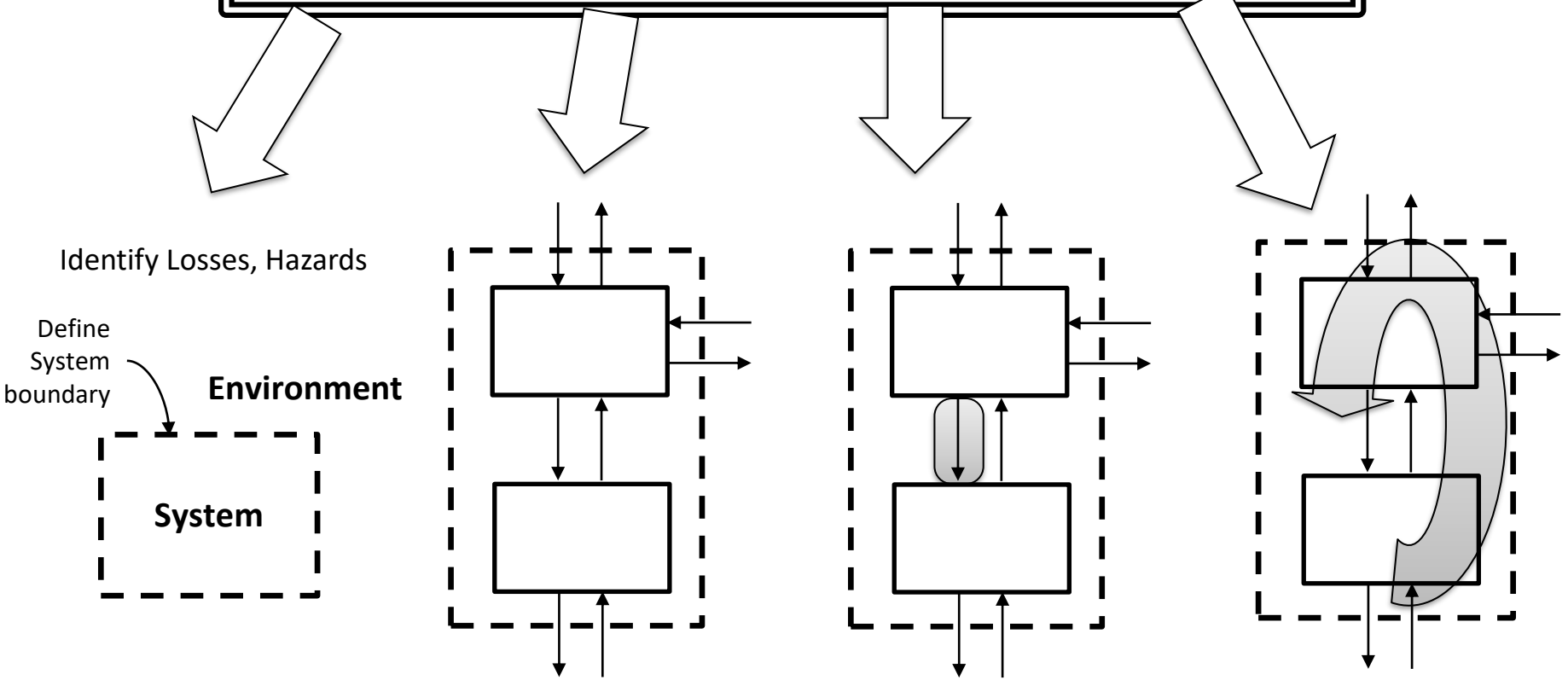
(Thomas, 2017)

Generating & validating operator procedures



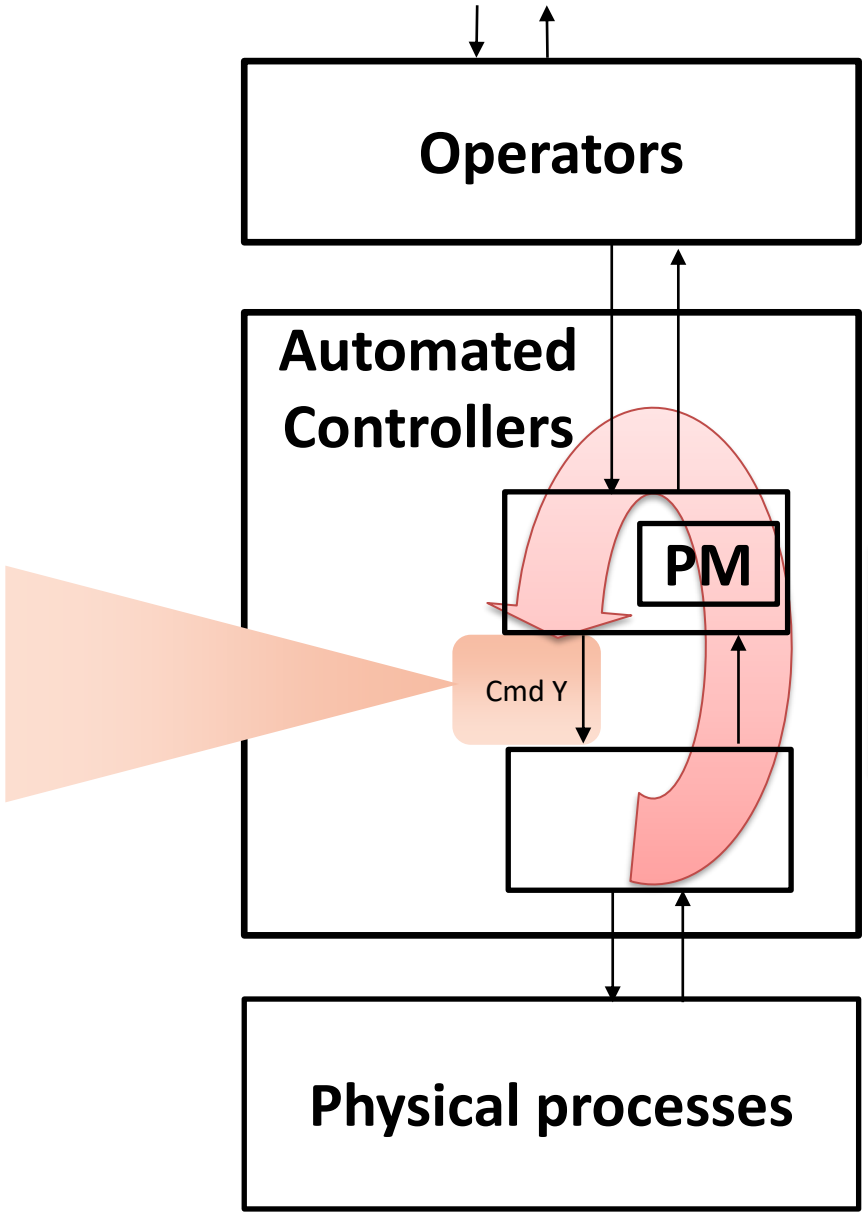
(John Thomas, 2017)





(Leveson and Thomas, 2018)

Identify loss scenarios



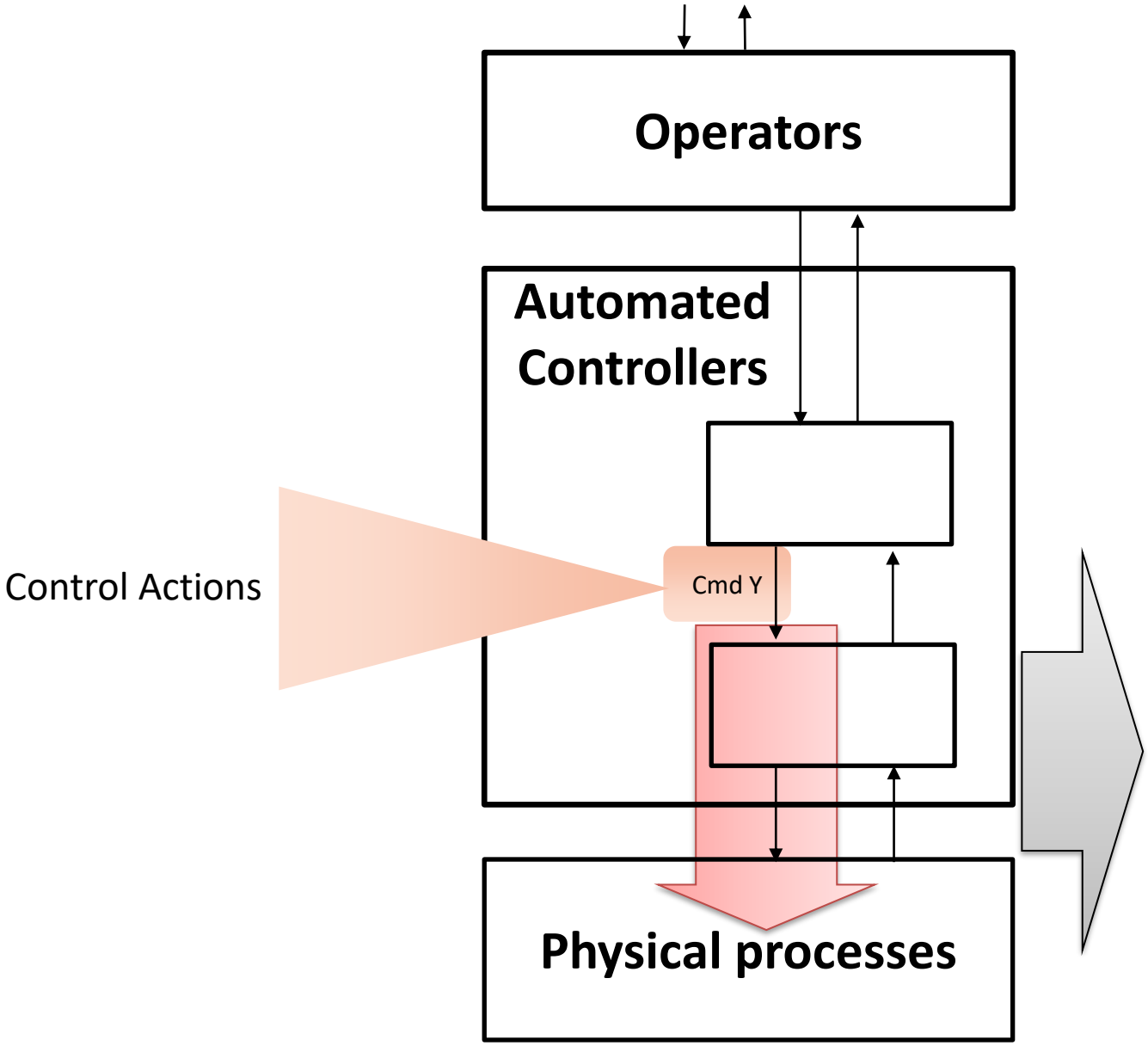
Unsafe Control Actions (UCAs)

What could cause Unsafe Control Actions?

Scenarios
Controller incorrectly believes A because …
Controller control algorithm does not enforce B because …
Incorrect feedback C received because …
Sensor failure causes…
Etc.

(John Thomas, 2017)

Identify loss scenarios



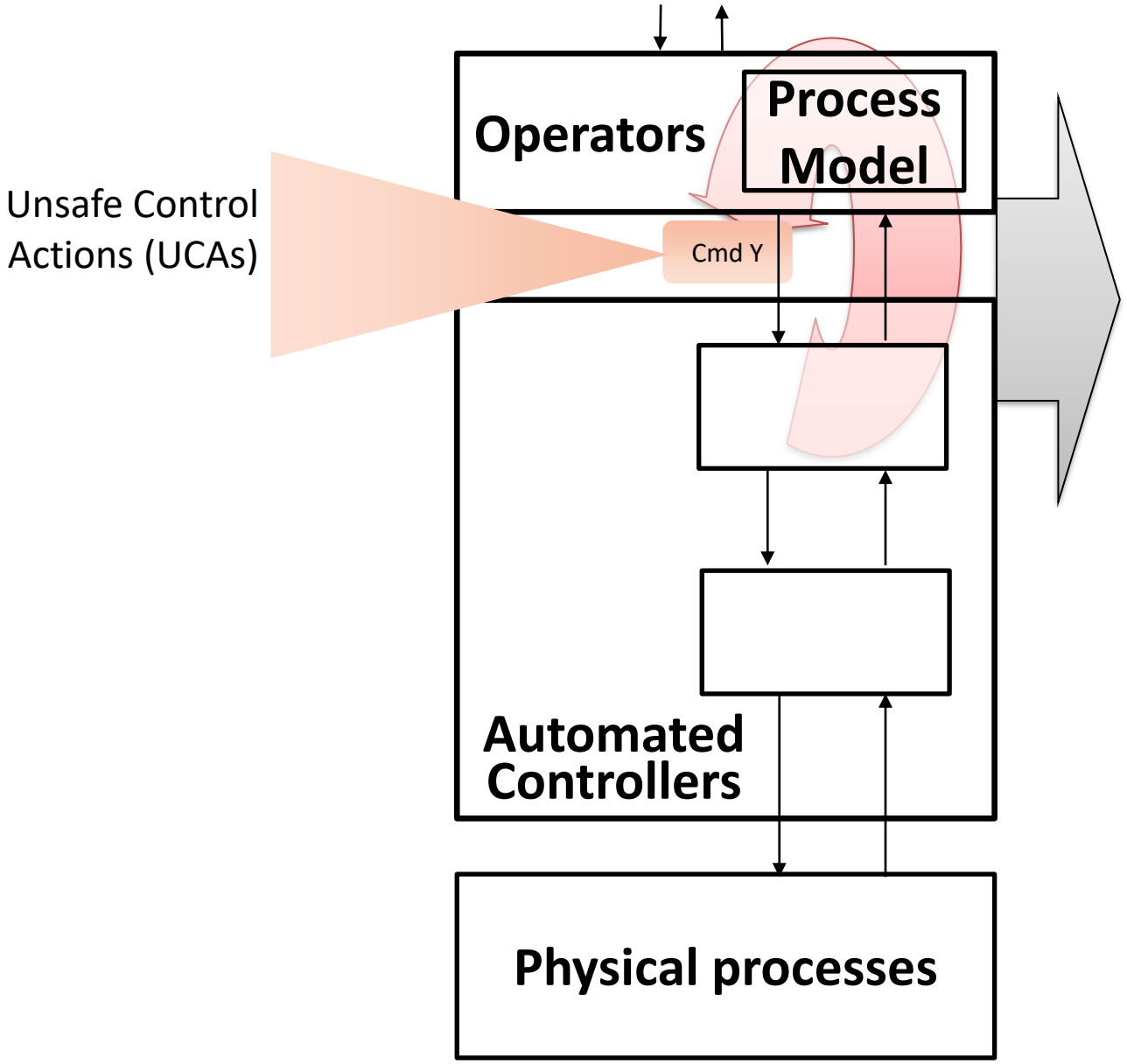
How could control actions not be executed or followed properly?

Scenarios
Cmd sent but not received because…
Cmd received but ignored because…
Actuator failure causes…

(Thomas, 2017)

What about human interactions?

Identify loss scenarios

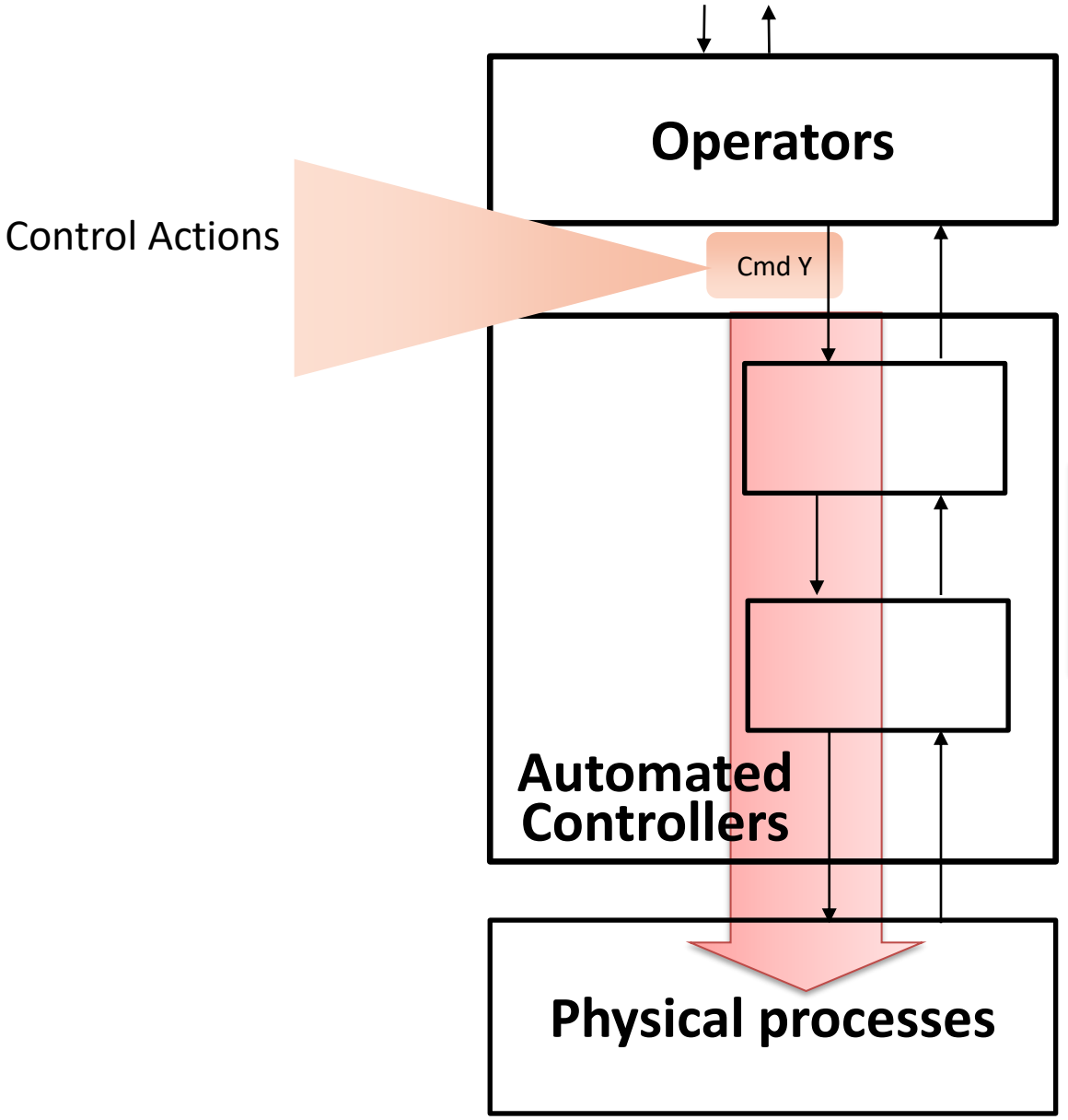


What could cause Unsafe Control Actions?

Scenarios
Op responded to failure in A by …
Op incorrectly believes B because …
Op does not perform C because …
Op received incorrect feedback D because …
Etc.

(John Thomas, 2017)

Identify loss scenarios



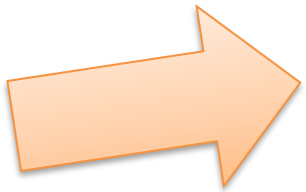
How could control actions not be executed or followed properly?

Scenarios
Op cmd sent but not received because…
Op cmd received but ignored because…
Actuator failure causes…

(Thomas, 2017)

Provide Solutions

Scenarios



Solutions
Component A must be able to respond within B seconds to avoid C
Controller X must provide D when E to prevent F
Component G shall automatically operate within H seconds when J
Operator must provide K and L together when M to prevent N (assumption)
Etc.

Rationale and assumptions identified

Every recommendation and requirement is traceable

(Thomas, 2017)

Provide Solutions

Scenarios

Solutions
Design Decisions
Requirements & Constraints
Alternative Control Structure
Responsibilities

Rationale and assumptions identified

Every recommendation and decision is traceable

(Thomas, 2017)

Provide Solutions

Scenarios

Solutions
Design Decisions
Requirements & Constraints
Alternative Control Structure
Responsibilities
Leading Indicators
Audits & Intervention Plans
Test cases
Procedures
Operator Training
Etc.

Rationale and assumptions identified

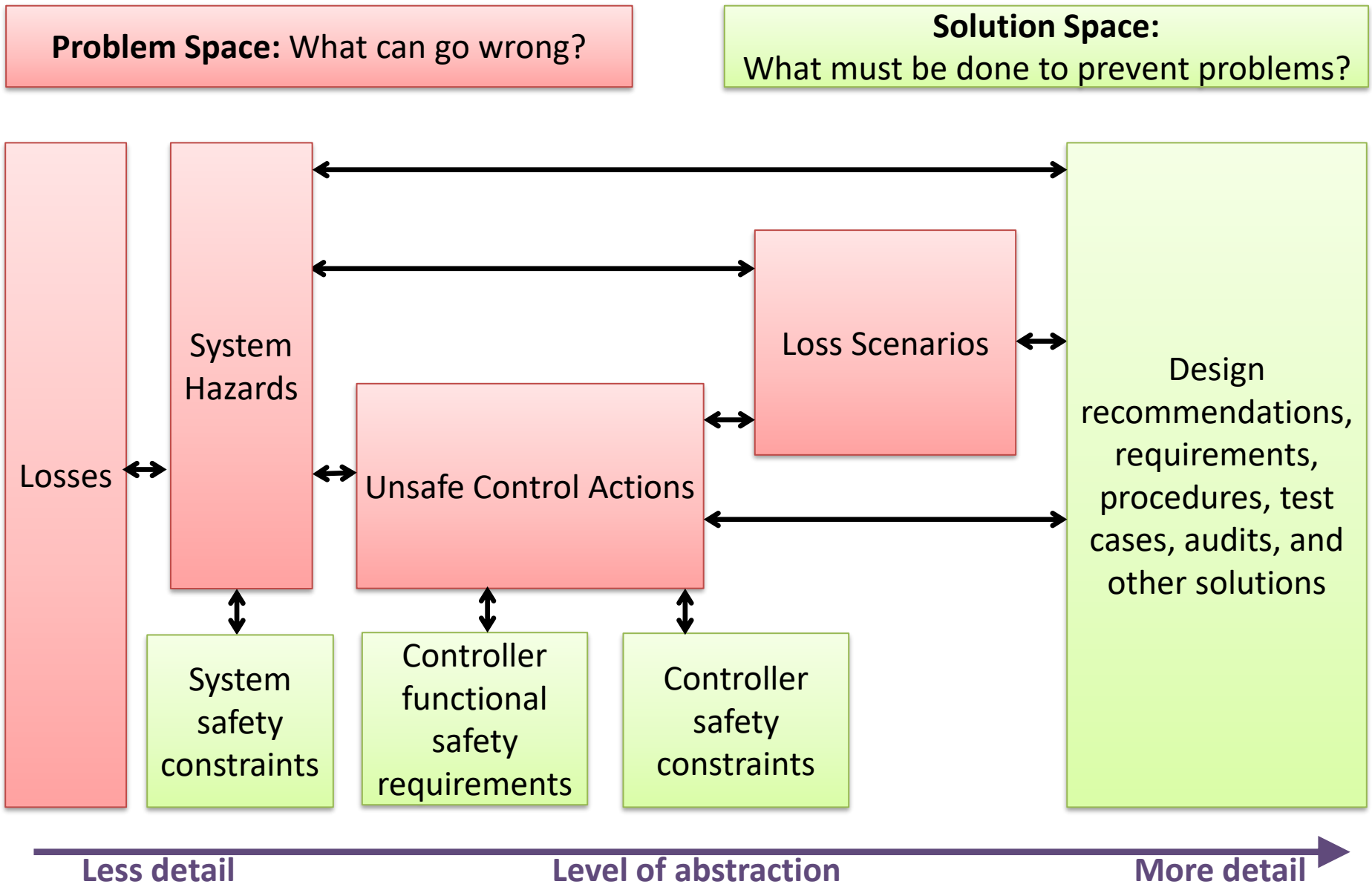
Every recommendation and decision is traceable

(Thomas, 2017)

STPA Outputs

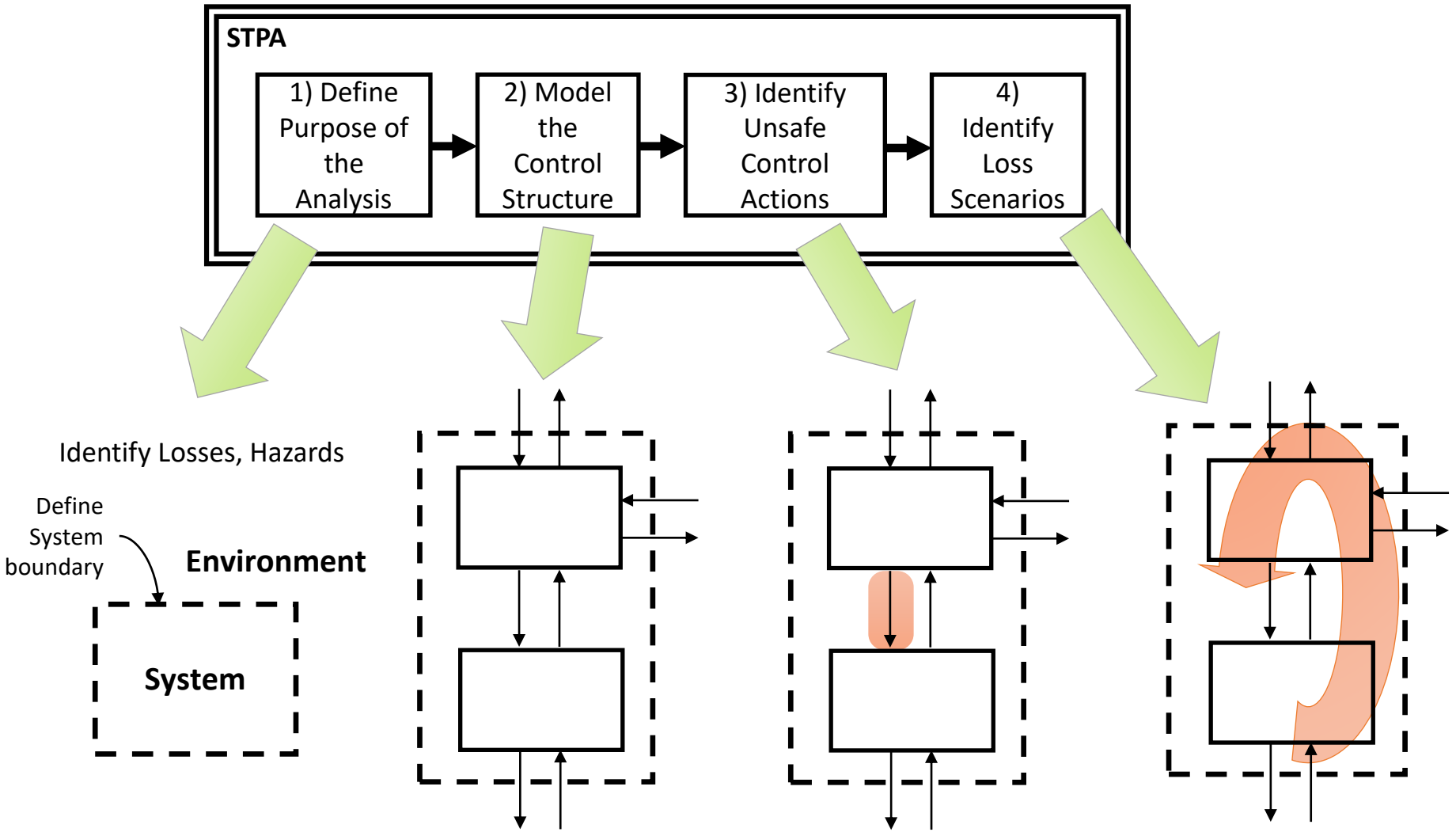
- Loss **scenarios**
- **Constraints** that need to be enforced
- A **conceptual architecture** that enforces the constraints
- The **responsibilities** that need to be allocated
- **Assumptions** that need to be validated
- Behavioral **requirements** that need to be enforced
- **Procedures**
- Critical **test scenarios** / test cases
- Operational **leading indicators** of risk
- Audit plan
- Etc.

STPA: Traceability is maintained throughout



(Thomas, 2017)

STPA Overview



(Leveson and Thomas, 2018)