National PRS Infrastructures

Malta Galileo Conference Gordon Black 12-Oct-2010





What is PRS ?

Service			Receiver	Benefits	Target user groups	Availability
Open Service	OS		Single frequency	 Additional satellites for better n-system coverage (e.g., deep urban) Coding and modulation advances for increased sensitivity and mu-path mitigation Pilot signal for fast acquisition 	• Low end mass market (e.g., LBS, outdoor)	Open
			Double frequency	 As above + increased accuracy windfrequency 	 High end mass market (e.g., car navigation, maritime) 	: Open
Commercial Service	CS	min	Double frequency	 Increased accuracy using additional frequencies and signals Additional features under investigation (e.g., da rate capacity) 	● Professional markets (e.g., surveying, [•] recision agriculture)	Commercial basis
Safety of Life Service	SoL		Single frequency (Level B)	 As OS + Integrity and authentication of signal Continuity and service guaranty 	• Aviation (en route)	Certified receivers
			Double frequency (Level A and C)	As above at higher performance levels suitable stringent dynamic conditions	for viation (A) • Maritime (C) • Road, Train (A)	Certified receivers
Public Regulated Service	PRS	- Jang	Dual frequency	 As OS + High Continuity (in times of crisis) Improved Robustnesvs jamming, spoofing) 	 Law enforcement Strategic infrastructure 	Regulated
Search and Rescue	SAR		Single frequency	 Almost instantaneous reception of emergency c Exact positioning of emergency beacon 	alls mergencies	Certified & registered beacons

The PRS System Architecture

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PRS System Architecture



A National PRS Infrastructure

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Purpose

• Provide governance

- National security authority to approve EC interactions
- Day to day management of PRS
- Accreditation of new facilities
- Certification of new devices

Provide capability

- Key distribution to user groups / manufacturers
- Re-key receivers that have been reset
- Provide a service centre to user groups
- Monitor & advise status of receivers

• Protect capability

- Monitor & advise threats
- Protect PRS assets
- Respond to Joint Action requests

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Purpose

• Provide governance of users & capability

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It's a <u>service</u>, not a system !



Open Issues - Governance

authority

- government, military or civil ? -> which dept
- different for joint actions ?
- which person(s) -> ToRs

operations

- government, military or civil (outsourced / PPP)
- command structure for joint actions
- crisis mode links to emergency services etc

accreditation & certification

which authorities (NSA ?)

• monitoring & auditing

who will ensure CMSs are implemented & maintained ?



• POCP

- just the one ?! civil v military ?
- location ? New facility ?

Implementation of key capabilities

- key distribution any national initiatives that can be used ?
- Rx status monitoring electronic or simple ?
- Rx keying, re-configuring & repair -> PRS service centre ?
- timelines what is needed when ?

Other capabilities

- PRS QoS monitoring station
- JIMS infrastructure linked to existing capabilities ?
- applications test facilities (eg GATES)

Links to manufacturers

- security modules, receivers, devices national / other MS / 3rd ?
- how will keys be handled between these ? Manually ?



Open Issues – The Users !!!

• Who are they ?

- which orgs will be allowed to use PRS in MS ? What criteria ?
- which others want or need it ?
- mandate any CNI orgs to use it ?

• User needs

- what are they & do they differ between groups ?
- technical & security capabilities / experience ?
- what processes & tools will need to be put in place ?

• User uptake

- what will the uptake profile be over first five years
- max likely no of users ???
- how to raise PRS awareness & uptake ?

Technical implementation

- which user in what user groups ?
- tier users according to trust ?

Let's not forget them ... !!!



Open Issues – Financials

• Who will pay ?!

- national infrastructure costs (capex)
- national operation (opex)
- receivers & repair centres

Cost benefit analysis

- do any user / rx costs make sense ?!
- are costs realistic to encourage PRS growth or not ?
- dependent on users some will pay more than others ?

Users will need to understand the business model



UK Approach

- UK undertook a PRS Management Study to answer these questions as the infrastructure, organisations and cost models will differ according to the answers.
- User analysis was at the core of the study. PRS is a service, not a system
- Participation in the PRS Pilot Programme seen as essential to providing further answers, not least through sharing ideas & lessons learnt between member states



Workflow



The UK PRS Management Study

-rolesson

QinetiQ

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- identify an initial organisational structure for a national point of contact (POC) which could be implemented to fulfil the needs of operating the Galileo Public Regulated Service (PRS) in the UK
- identify possible candidate organisations to deliver UK PRS management
- determine the likely costs and potential charges for that service in order to understand whether it was feasible for the operation to be wholly funded by the users (i.e. - requiring no centralised Government funding)
- Additional to this was an analysis of the key requirements driving those needs to determine whether any were potentially unnecessary cost drivers.



UK PRS Mgmt Study Workflow



DfT PRS Workflow v4 (BAFO) vsd Gordon Black 17-Nov-2008



User Uptake

- Previous Esys study helped identify potential user communities
 - Supplemented by current understanding of likely early users
 - Current PRS usage study would also help validate the scenarios
- Users grouped by size
 - Test users
 - Small, medium & large users (<25, <250, <2500)
 - Very large (<50,000)
 - Mega (100,000+)
- Six uptake scenarios defined based on a sensible mix of user communities and their likely uptake times.
- Not known which scenario is most likely and therefor eimportant to analyse how the infrastructure & goverance might differ for each.
- Next slide shows uptake v PRS Rx numbers



- -----Scenario #1 No operational users, minimal number of test users
- ----- Scenario #3 Very low initial uptake, with some low/medium follow on
- -----Scenario #4 Low initial uptake, with some low/medium follow-on and one large user
- Scenario #5 Stronger initial uptake, with some Govt / Emergency services take up
- Scenario #6 Stronger initial take up building up to include at least one mega-user (e.g. Police, MOD)



Governance & Organisation

- 8 x mgmt , 22 x technical processes defined from the PRS lifecycle & GSMC definition (at the time)
- All input metrics which might impact the organisation structure and size identified and analysed, eg
 - no of Rx orders per day
 - no of new user groups per month
 - Rx loss rate
- High level organisational options studied
 - centralised v distributed Rx initialisation
- Key capabilities were defined in the organisation and numbers based around metrics generated from the input model
 - pocesses matched to capabilities to show coverage
 - numbers matched to capabilities to show size and evolution
- Various big picture options analysed (eg PRS Service Centre)
- Org models analysed for small, medium & large scenarios



Centrally Managed

User Managed

Centrally Managed

User Managed



Organisation Capability Requirements





Centralised v Distributed





Cost Models





Results – models

- Small PRS deployments for trials
 - best delivered through a simple centralised solution most likely undertaken by a UK Government organisation (although many roles could be subcontracted) with a minimal number of staff
- Medium sized deployments (~1,000 receivers)
 - can be delivered by an enhanced organisation employing sub-contracted services to undertake receiver management activities
- Large PRS deployments
 - Best delivered through a decentralised PRS management organisation with a core POC organisation with the remainder of the user and receiver management devolved to the PRS user communities who could use their own staff or sub-contract some of the support activities



Results - general

Uptake

- early uptake (1-3 yrs) expected to be low
- later uptake could vary wildly
 - understanding of potential users not mature enough by far

Infrastructure

- a scalable infrastructure and organisation is possible
- impractical to provide day to day key mgmt for individual Rxs
- strong benefit for automating links between POCP and user orgs
- Financial
 - trials costs should be borne by govnt
 - operational use can be effectively charged
 - 1,000 users => £450 pa per user
 - 100,000 users => £35 pa per user



Recommendations

- identify owning govnt dept for PRS management
- early id of small scenario operations organisation (outsource ?)
- investigate sharing of facilities with other member states
- investigate low cost tools, & synergies with existing initiatives
- be an early adopter to better understand issues and user needs



A Possible Approach

A phased approach whereby a scalable infrastructure can evolve naturally as user uptake grows :

• Phase 1

- all services are centralised
- focus is on providing trialling capability to potential users
- links to manufacturers are manual

• Phase 2

- services still centralised, links are still manual
- undertaken on a much more commercial basis
- possibly outsourced

• Phase 3

- technical capability devolved to those orgs that can manage it
- core management of PRS outsourced
- links to all orgs & manufacturers are electronic

Lateral Options !

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Some lateral thoughts

- >1 POCP ?
 - military & civil ?
- <1 POCP !!!
 - share one between MSs ?
 - GSMC POCP managed service ?
- Zero cost to MS !
 - industry PPP
 - share POCP with other MSs & charge for the service !
 - pass the whole cost on to users



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