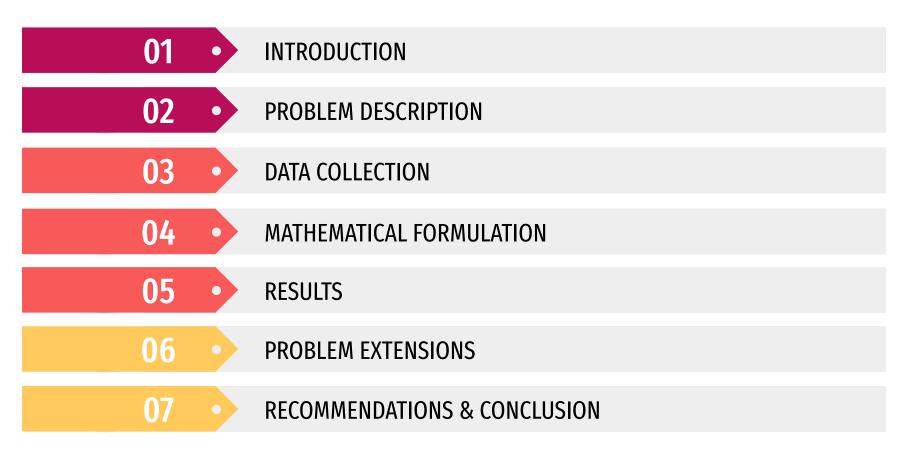


Vaccine Distribution Optimization for Montréal's COVID-19 Response

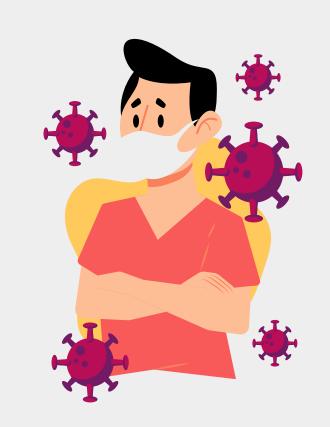
Decision Analytics MGSC 662: Group 3855-1

By Audrey Delisle, Samia Belmadani, Tiffany Lagarde, Dhevin DeSilva, Julien Palummo

Table of Contents



SECTION 1: INTRODUCTION



SELECTED TOPIC : COVID - 19



A new COVID-19 variant is spreading in Quebec...

Aug. 31, 2023 11:30 a.m. EDT By Caroline Van Vlaardingen & Keila DePape - CTV News Montreal



Early signs suggest fall COVID-19 wave starting in Canada...

Aug 18, 2023 4:00 AM
By Lauren Pelley - CBC News



Canada 'likely at the start' of new COVID-19 wave. How big will it get?

August 28, 2023 6:19 am
By Aaron D'Andrea - Global News

MAIN PROBLEM DESCRIPTION

Category: Unbalanced Inventory Problem

Problem: We have an unbalanced weekly vaccine demand and supply. For 1 week, we want to distribute the supply we do have as optimally as possible all the while incurring the least transportation costs and unmet demand penalties. We are looking at t=0-4 (Oct-Nov), knowing demand/urgency changes week over week.



Distribution Facilities (Suppliers) = i

33,815 over t,i

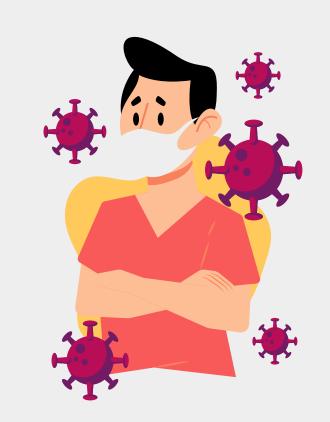


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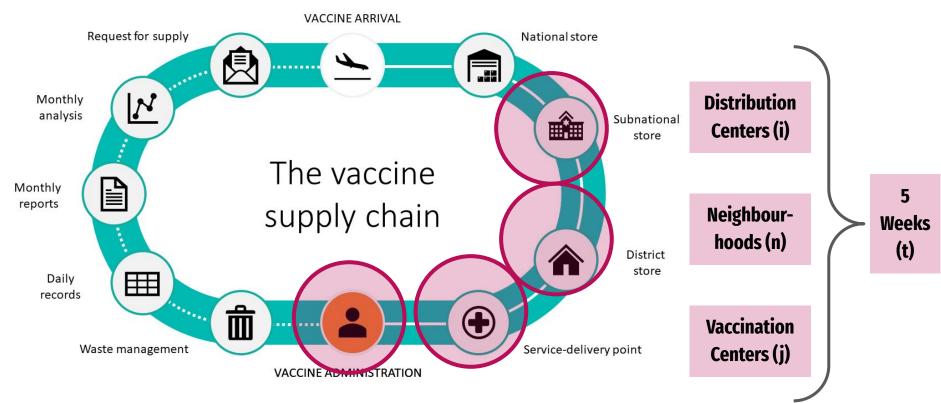
Vaccination Centers (Buyer) = j

35,182 over t,n

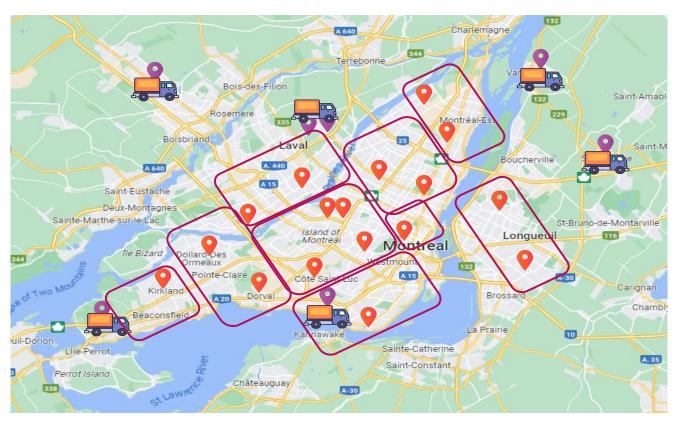
SECTION 2: PROBLEM DESCRIPTION



PROBLEM CONTEXT



PROBLEM VISUALIZATION



^{*} Not exact, only for visualization purposes

PARAMETER DESCRIPTIONS

Icon	Description	Variable	Amount			
	Distribution Facilities	i	6 (vaccine suppliers)			
	Neighbourhoods	n	9			
•	Vaccination Centers	j	17			
	Week	t	5 in total: October 15 - November 18 (t=0-4)			

GOALS OF OPTIMIZATION



1

MINIMIZE DAILY
TRANSPORTATION
COSTS OF VACCINES
FROM SUPPLIER i TO
CENTER j



2

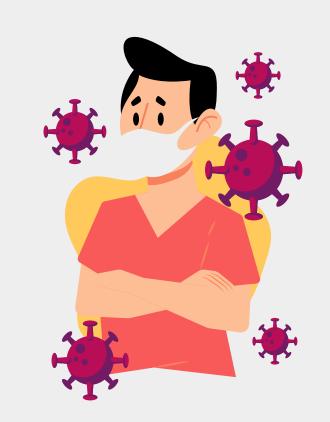
MINIMIZE COSTS
RELATED TO UNMET
DEMAND IN
NEIGHBOURHOOD n



3

MINIMIZE URGENCY
PENALTY RELATED TO
UNMET DEMAND IN
NEIGHBOURHOOD n

SECTION 3: DATA COLLECTION



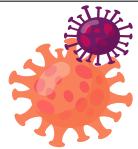
DATA SOURCES - Supply

Source	Description							
Statistics Canada Statistics Canada	 Provides population proportion of Quebec vs Canada and Montreal versus Quebec to help us with the calculation of supplies Initial agreement number of vaccines that suppliers will supply to Canada for a year 							
Github	Weekly vaccines supply to Canada							
statista 🗷 Statista	Vaccine purchase costs from various suppliers							

DATA SOURCES - Demand

Source	Description						
Statistics Canada Statistics Canada	 Provides data on target immunization rates in Canada Offers historical data on vaccination rates Provides information on high-risk age boundaries 						
Health Infobase Canada	 Provides the number of weekly COVID-19 deaths Provides the number of weekly COVID-19 cases 						

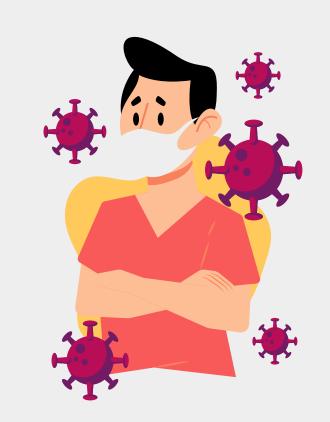




DATA COLLECTED

Supplier data: Supplier Location, Supply quantity of vaccine i, vaccine i price Region data: Vaccination Center location, neighbourhood to center association, demand quantity from neighbourhood n **Transportation Costs:** Matrix of cost of transportation from supplier i to center i **Unmet demand costs:** Cost of 1 person catching serious case of Covid due to unmet demand **Urgency factors:** Amount of cases and deaths per neighbourhood at time t

SECTION 4: MATHEMATICAL FORMULATION



PARAMETERS

p _i	Price of one vaccine from supplier i
t _{i,j}	Transportation cost from supplier i to center j
c _n	Number of COVID-19 cases in neighbourhood n
d _n	Number of COVID-19 deaths in neighbourhood n
α	Weighting factor representing the importance of Covid-19 cases (0.05)
β	Weighting factor representing the importance of Covid-19 deaths (0.1)
h	Medical costs associated with 1 person catching Covid (1,000)
$\mathbf{D}_{n,t}$	Vaccine demand (based on population) in neighbourhood n at time t

¹⁶

PARAMETER RATIONALE

h

1,000

-CBC estimates the average cost for COVID-19 ICU patients, to **\$50,000**.

- Likelihood of hospitalization, approximately 20% for individuals who contract COVID-19.
- Assuming that around **10%** of unvaccinated individuals may catch COVID-19
 - 'h' penalty to be **\$1,000**, considering these probabilities (50,000*0.2*0.1).

Alpha

0.05

Beta

0.1

- Deaths were considered more critical than cases, hence a higher weight to 'β' (0.1) and a lower weight to 'α' (0.05).
 - Does **not exceed** the general penalty ('h').
- Estimated the urgency penalty to be around **20-40% of the general penalty**, equivalent to approximately
 \$200-\$400.
- Through trial and error, we determined that 'α' and 'β' should be **approximately 0.1**'
- Urgency = approximately \$355, completing our parameter choices.

DECISION VARIABLES

1

X_{ijt}: Number of vaccines transported from supplier i to vaccination center j for week t

OBJECTIVE FUNCTION

$$Z = \sum_{i,j,t} (p_i + t_{i,j}) \times x_{ij} + \sum_{n,t} (h + u_{nt}) \times (D_{nt} - \sum_{i \in I(n),j} x_{ijt})$$

Cost of Procurement and Transportation

General Costs incurred for Unmet Demand (\$) Penalty for Unmet Demand in high intensity areas

Unmet demand

*i∈I(n) = vaccination centers i included in neighbourhood n

The overall objective is to minimize the combined cost of procuring and transporting vaccines while considering general penalties for unmet demand (monetary healthcare fees) and a penalty factor associated to incurring unmet demand in a high urgency neighbourhood at time t.

OBJECTIVE FUNCTION: TRANSPORT & PROCUREMENT COST

$$Z=\sum_{i,j,t}(p_i+t_{i,j})$$

suppliers to vaccination centers.

p_i: Price of one vaccine from supplier i.

 $t_{i,j}$: Transportation cost from supplier i to vaccination center j. x_{iit} : Number of vaccines transported from supplier i to vaccination center j for week t.

OBJECTIVE FUNCTION: UNMET DEMAND PENALTY (GENERAL)

$$\sum_{n,t}$$
 (h*unmet demand)

This part represents the general monetary penalty associated with unmet demand in each region.

h: Monetary cost for 1 person catching serious case of Covid (healthcare fees).

OBJECTIVE FUNCTION: UNMET DEMAND PENALTY (URGENCY)

$$\sum_{n,t} (u_{n,t}^* unmet demand)$$

This part represents the penalty associated with unmet demand in highly critical areas (urgency), taking into account COVID-19 cases and death rates. Hence, the penalty is higher when fewer vaccines are transported to critical areas.

$$u_{nt} = \alpha \cdot Cases_{nt} + \beta \cdot Deaths_{nt}$$

 α , β : Weighting factors

 $c_{n,t}$: Number of COVID-19 cases in neighbourhood n at time t. $d_{n,t}$: Number of COVID-19 deaths in neighbourhood n at time t.

CONSTRAINTS

1. Supply Constraints:

Ensure that the total vaccines supplied by each supplier to each vaccination center at each time period do not exceed the available supply.

$$\Sigma_{i,t} X_{i,j,t} \leq Supply_{i,t}$$

3. Proportion of Demand Met:

Ensure that at least 10% of the demand in each neighborhood is met by the vaccines distributed at each time period.

$$\Sigma_{i,j}X_{i,j,t} \ge 0.1 * Demand_{n,t}$$



2. Demand Constraints:

Ensure that the total vaccines distributed to each neighborhood's vaccination centers at each time period do not exceed the total demand for vaccines in that neighborhood.

$$\Sigma_{i,j} X_{i,j,t} \leq Demand_{n,t}$$

4. Non-negativity Constraints:

Ensure that the number of vaccines transported from each supplier to each vaccination center at each time period is non-negative.

$$X_{i,j,t} \ge 0$$

CONSTRAINTS

5. Supply < Than Demand Indicator:

Introduce binary variables to indicate if the total supply is less than total demand at each time period. Ensure that if this indicator is 1, the total supply is indeed less than demand.

supply_less_than_demand,

7. Equal Distribution Constraints:

Ensure that vaccines are equally distributed among vaccination centers within each neighborhood at each time period.

\(\sum_{i,j} \text{t} = \text{total_vaccines_for_neighbourhood } / \)

inum_centers_in_neighbourhood

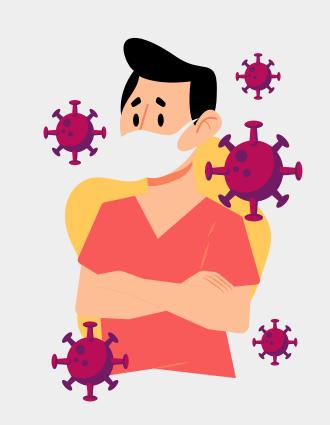


6. Use All Supply When Less:

Ensure that if the supply is less than demand at a time period, all available supply is used, and no vaccines remain unused.

 $\Sigma_{i,j} X_{i,j,t} = Total_supply_{t, when supply_less_than_demand=1}$

SECTION 5: RESULTS



GUROBIPY SOLUTION

		Kirkland	Lachine	Berri-UQAM	Verdun	Parc-Extension	Décarie	Saint-Laurent	Montréal-Nord	Chauveau	CLSC Est	Saint-Michel	Montérégie-Centre	Montérégie-Ouest	Laval	Laurentides	Universitaire De Sante	Lanaudière
t=0	Moderna	3	72	207		181	175	61						182			8	
	Pfizer-BioNTech				ð.		6			9 9					665	366	181	
	Johnson & Johnson (Janssen)		_											907				
	AstraZeneca	275	203		9		97			3	1						0	
	Novavax				207		92					262	750			596		
	Sanofi and GlaxoSmithKline								61	262	262		339					795
t=1	Moderna		274	58	58	180		61						112				
	Pfizer-BioNTech	274				1	181		61						67	96	181	
	Johnson & Johnson (Janssen)			ų.	o.		94							641	,			
	AstraZeneca													338				
	Novavax	4		Ť	0		90					203	1080			ř	9	
	Sanofi and GlaxoSmithKline						42			203	203		11				8	798
	Moderna		274	47	Š	181	10.	44			l l			180			0	
	Pfizer-BioNTech	274					181		43						67	96	181].
t=2	Johnson & Johnson (Janssen)				47									580			8	
1-2	AstraZeneca	- 5			or .		67							330	-			
	Novavax											186	1069					
	Sanofi and GlaxoSmithKline	- 2			9		90		1	186	186		21					795
	Moderna	1 0	50	120		184		62						128			2	
	Pfizer-BioNTech						184					1			668	258	184	
t=3	Johnson & Johnson (Janssen)													964			× 0.000	
1-5	AstraZeneca	279	229		12											e e		
	Novavax	2			210		26					265	750			704)	
	Sanofi and GlaxoSmithKline			90					62	265	265		342					803
	Moderna	2										8					0	
	Pfizer-BioNTech					181	181								666	305	181	
t=4	Johnson & Johnson (Janssen)			18			22	15						1095			0	
	AstraZeneca	274	274					46										
	Novavax				207							261	527			657		
	Sanofi and GlaxoSmithKline			189	8		St.		61	261	261		568				,	798

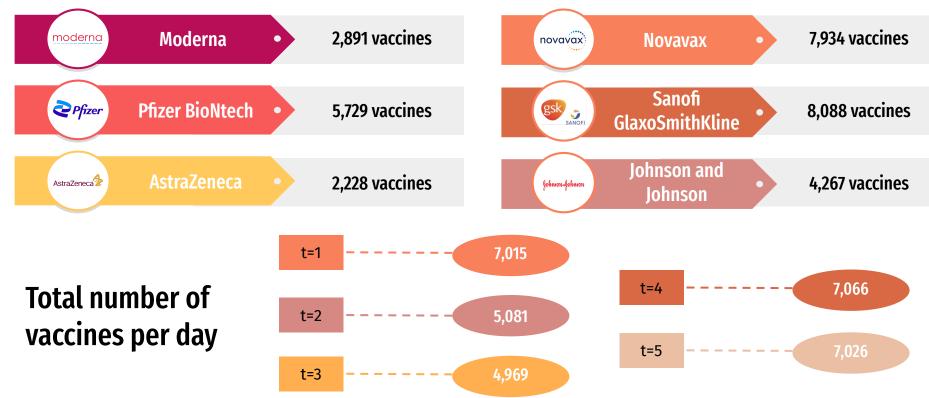
TOTAL Cost \$13,996,643.87 CAD

Direct Costs \$8,541,303.01 CAD

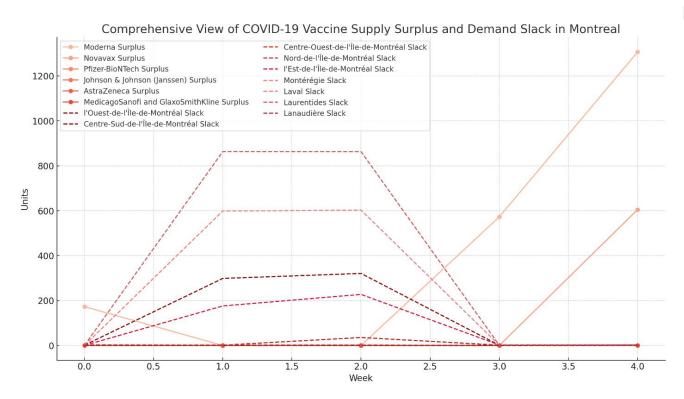
TOTAL Supply 31,15

31,157 vaccines

TOTAL NUMBER OF VACCINES PER SUPPLIER



SENSITIVITY ANALYSIS



Key Findings:

- The analysis revealed geographical disparities in vaccine demand fulfillment.
- Instances where vaccine supply exceeded demand, highlighting the need for a dynamic approach to distribution.
- The model's strict adherence to non-negativity constraints ensure that the distribution plan remained within realistic and feasible parameters.

IS RESPONSE LOGICAL?

Gov Can Covid-19 Expenditure 2021-22

22.1 billion

(not including wage subsidies)

Initial solution

Yearly outlook

Country outlook

13.99 million for 5 weeks in MTL

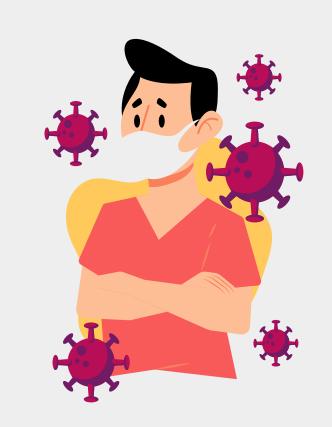
145 million yearly in MTL

2.9 billion million yearly in Canada

* 10.4 (52/5)

* 20 (Mtl is around 5% of Cad pop)

SECTION 6: PROBLEM EXTENSIONS



EXTENSION 1: HISTORICAL VACCINE ALLOCATION IN URGENCY

- For urgency factor, we originally wanted to include not only cases and deaths, but also vaccines distributed at week t-1 (cumulative).
- We were not able to find a working code but with more time and knowledge, this would be an interesting extension

```
In [21]: #urgency_penalty = gp.quicksum(
                                      (alpha * cases[n][t] + beta * deaths[n][t]
                                       for n in neighbourhood vacc centers
                                       for t in time_periods
                             # Urgency penalty from problem extension
                             urgency_penalty = gp.quicksum(
                                      (alpha * cases[n][t] + beta * deaths[n][t] - gp.quicksum(X[j, i, t-1] for i in neighbourhood_vacc_centers[n] for j in sup
                                      (demand[n][t] - gp.quicksum(X[j, i, t] for i in neighbourhood_vacc_centers[n] for j in suppliers))
                                      for n in neighbourhood vacc centers
                                      for t in time_periods if t > 1
                              print(urgency_penalty)
                              # General Unmet demand
                             penalty_unmet_demand = gp.quicksum(
                                      (h-urgency_penalty) (demand[n][t] - gp.quicksum(X[j, i, t] for i in neighbourhood_vacc_centers[n] for j in suppliers))
                                      for n in neighbourhood_vacc_centers
                                       for t in time_periods
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```

$$u_{nt} = \alpha \cdot Cases_{nt} + \beta \cdot Deaths_{nt} - \gamma \cdot \sum_{i \in I(n), j} x_{ij,t-1}$$
 for t>1

EXTENSION 2: ADDING GOVERNMENT BUDGET CONSTRAINT

Financial Limitation Integration

Incorporating a budget constraint mirrors real-world fiscal constraints on vaccine-related expenses.

Balanced Approach to Distribution

• Ensures a delicate balance between meeting vaccine demand and operating within allocated financial resources.

Optimization Impact

• Results in a decrease in transported vaccines, emphasizing cost efficiency while maintaining a careful balance between demand fulfillment and cost-effectiveness.

$$\sum_{i,j,t} (p_i + t_{i,j}) \times x_{ijt} \leq \mathbf{B}$$

EXTENSION 3: EXTENDING SCOPE TO WASTE MANAGEMENT

Wastage Penalty Addition

• Incorporation of a wastage penalty within the model introduces a cost factor for proper disposal of unused or expired vaccines.

Minimization Incentive

• This penalty mechanism incentivizes minimizing wastage by imposing financial repercussions linked to the quantity of wasted vaccines, aligning with directives to keep national vaccine wastage below 5% set by the Public Health Agency of Canada (PHAC).

$$\sum\nolimits_{i,j,t}\!w\!\times\!W_{i,j,t}$$

EXTENSION 4: OTHER CONSTRAINTS

Age Constraint

The age-related limitations in certain vaccines (e.g., AstraZeneca, Johnson & Johnson) enables the optimization model to tailor distribution strategies, ensuring compliance with regulatory advisories and addressing safety concerns specific to particular age groups.





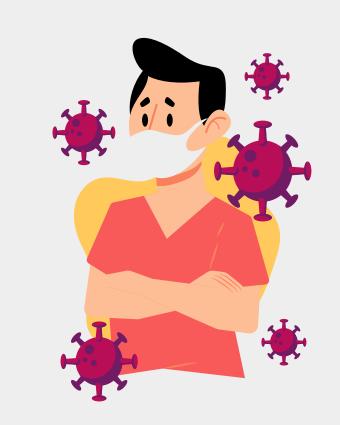
Temperature Constraint

 Temperature constraints, exemplified by Pfizer and Moderna vaccines requiring storage at -70°C and -20°C respectively, impose critical logistical challenges necessitating meticulous planning and infrastructure readiness, significantly impacting their distribution logistics within the supply chain.



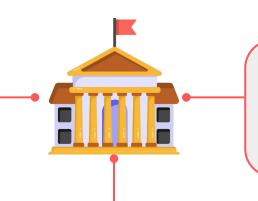


SECTION 7: RECOMMENDATIONS & CONCLUSION



FINAL RECOMMENDATIONS



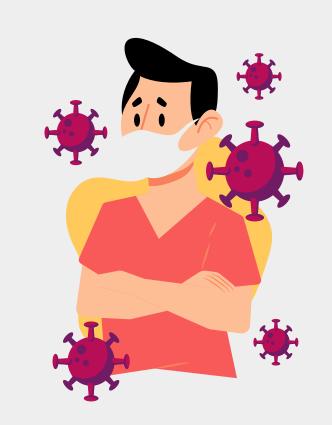


Prioritize resource allocation and boost infrastructure and staffing in high-demand vaccination centers like Montérégie-Centre and Lanaudière, while maintaining cost-effective distribution strategies.

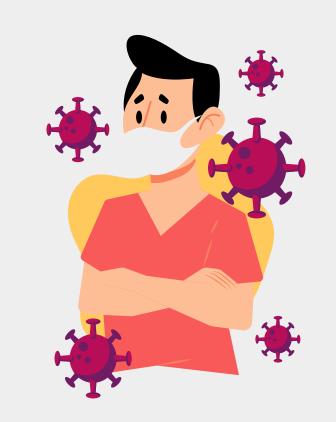
Reassess and potentially re-negotiate terms with lower-contributing suppliers like AstraZeneca.

THANK YOU

IF YOU HAVE ANY QUESTIONS, FEEL FREE TO ASK!



SECTION 8: RESSOURCES



RESSOURCES

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- World Health Organization. (2023). Essential Programme on Immunization. https://www.who.int/teams/immunization-vaccines-and-biologicals/essential-programme-on-immunization/supply-chain