

Asymptomatic COVID-19 Screening Programme – incentives and penalties

In accordance with the terms of the ethical approval for the Asymptomatic COVID-19 Screening Programme, as well as the information provided to students when they sign up, participation in the screening programme must be entirely voluntary. There must therefore be no coercion, direct penalties or other undue pressure from the University or Colleges.

In practice, the effectiveness of incentives and penalties is uncertain, and may have negative consequences – such as reduced trust and solidarity, or a build-up of resentment and complaints. A general ethical framework for asymptomatic COVID-19 testing programmes for students in higher education institutions is available here: <https://ethical-framework-testing-hei.carrd.co/>.

We therefore kindly request that students are not told that ‘they must participate’ in the Asymptomatic Screening Programme, or that ‘students who do not participate will be refused entry to University or College facilities or events’ (or equivalent statements). This does not, of course, preclude the University, Colleges, student organisations or students strongly encouraging students to take part, in a positive and compassionate way. Small tokens of appreciation may also be offered.

Separately, the University or Colleges may wish, as part of an overall risk reduction strategy to request evidence of a recent negative COVID-19 test (by whatever means) as a basis for inclusion or exclusion in services or events. The means for evidencing a negative COVID-19 test in such cases might include (but not be limited to) any of: participation in the Asymptomatic COVID-19 Screening Programme; screening using a lateral flow test from the UK government; or testing from another suitably accredited public or private provider. Additionally, the rate of participation in the Asymptomatic COVID-19 Screening Programme may be one of the factors included as part of a risk assessment. These approaches would not be considered directly linked penalties, incentives intended to drive participation, nor undue pressure to participate in the Asymptomatic COVID-19 Screening Programme.

Depending on the circumstances at the time, these approaches may or may not be effective or necessary – so should be considered carefully on a case-by-case basis, rather than normalised. For example, when infection rates are low and/or group sizes small, pre-requisite proof of testing may not be justifiable.

Our data show that the risk of unsuspected asymptomatic COVID-19 is lowest immediately following a negative screening test, and that the overall likelihood of developing symptomatic infection in the 7 days after a negative screening test is approximately half. For specific events, provision of a negative lateral flow test taken in the 24 hours preceding the event may therefore provide greatest reassurance. Conversely, for regular access to facilities, weekly PCR screening or twice-weekly screening with a lateral flow test may be more appropriate.

Nonetheless, no strategy can reduce the risk to zero, and requirements should always be proportionate. In all cases, students should be reminded that lateral flow tests are less sensitive than PCR tests, and that a single negative test does not eliminate the risk of asymptomatic infection – whatever the means of testing.