



University of  
Nottingham  
UK | CHINA | MALAYSIA

# COVID-19 testing policies in Universities

Kirsty Bolton, RAMP Continuity Network Asymptomatic Testing Meeting, 7th June 2022

# Acknowledgements

**V-KEMS study group** on “Unlocking Higher Education Spaces”

**UoN TRACK-COVID MRC** study team

Jonathan Ball, Holly Blake, Chris Denning, Kavita Vedhara & many others

**UoN Asymptomatic testing service**

Moira Petrie & many others

**INI HE working group**

Jessica Enright, Edward Hill, Helena Stage, Emily Nixon, Emma Fairbanks, Maria Tang, Ellen Brooks-Pollock, Louise Dyson, Chris Budd, Rebecca Hoyle, Lars Schewe, Julia Gog, Michael Tildesley

# What makes universities different?

**Demographics** In 2020/21, across UK HE:

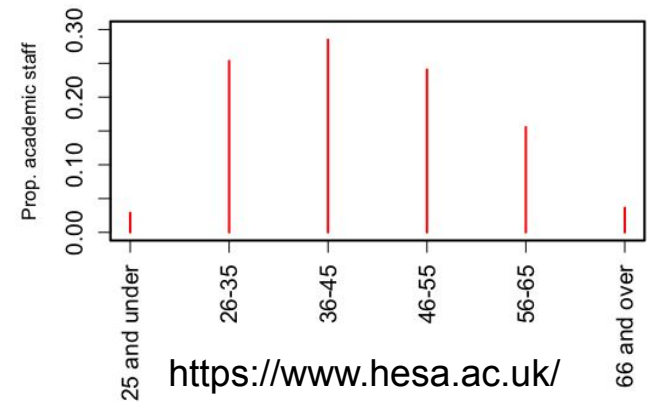
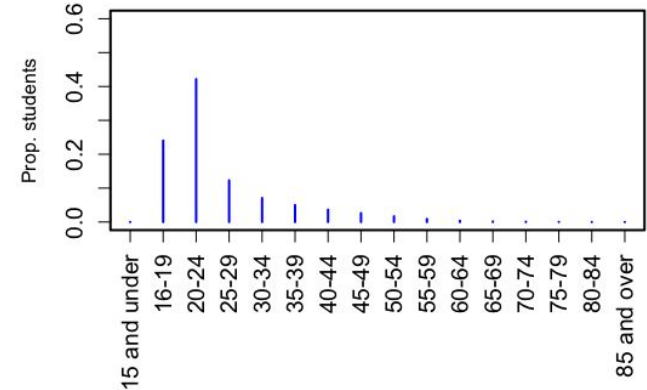
- 2.75 million **students** in the UK (2m undergraduate)
  - 592 190 > 30 y.o
  - 3090 over 70
- **Academic staff**: total staff 224 510
- Non-academic staff: 191 425

## Living arrangements

- Halls of residence
- Congregate living

## Large connected workplaces

- Spread across ~ 210 providers
- Variably connected to surrounding community



<https://www.hesa.ac.uk/>

# What makes universities different?

## Migration

- Beginning of academic year
- Term times

## Large events

- Exams
- Graduations

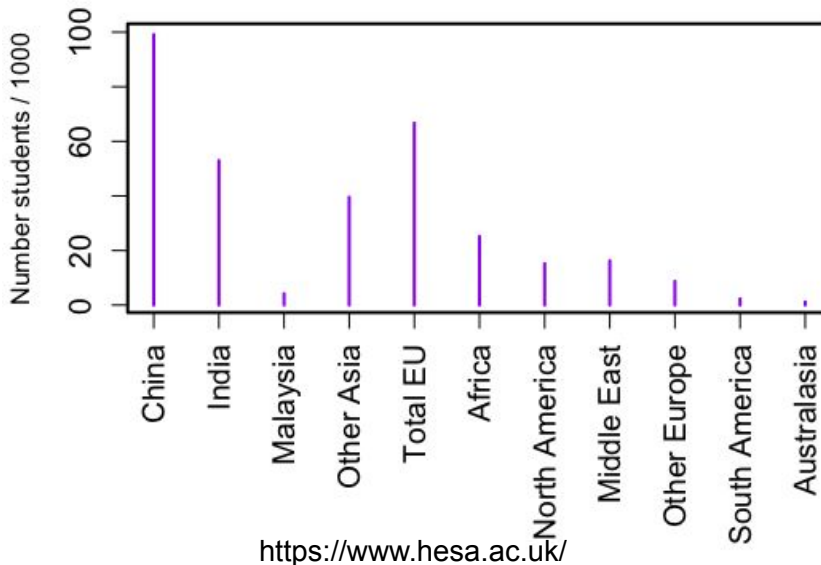
## Behaviour

- Contact tracing difficult [1]
- Risk tolerance
- Vaccine hesitancy [2]

## Epidemiology

- Higher rates of asymptomatic / paucisymptomatic SARS-CoV-2 cases [3]
- Known for 'freshers flu' [4]

First year non-UK domiciled students by domicile



# Many possible asymptomatic testing strategies

## General

Regular voluntary testing

Test on arrival

Test to return

Test to access

## Targetted

Surge testing

Contact testing

Sentinel surveillance

Population surveillance

# And SARS-CoV-2 assays...

<b>Assay</b>	<b>Collection</b>	<b>Viral gene target</b>	<b>Approx. limit of detection</b>	<b>University</b>
RT-qPCR	Nasopharyngeal and/or oropharyngeal swab, saliva	N, E, S, ORF1a/b,...	~ 0.1 copies/mL [1]	Nottingham, Cambridge, Cardiff, Edinburgh,...
RT-LAMP	Nasopharyngeal and/or oropharyngeal swab, saliva	N, ORF8, ...	~ 0.1 copies/mL [2]	Southampton, Leicester, ...
LFD/RAT	Nasopharyngeal and/or oropharyngeal swab	N	~ 100s copies/mL [3]	All UK universities

[1] Tastanova *et al.*, 2021, <https://doi.org/10.1016/j.jmoldx.2021.04.009>, [2] Mautner *et al.*, 2020, [doi.org/10.1186/s12985-020-01435-6](https://doi.org/10.1186/s12985-020-01435-6),

[3] Fung *et al.*, 2020, <https://doi.org/10.1128/JCM.01535-20>

# Pooling strategies for expensive PCR tests...

Epidemiological considerations may maximise sensitivity / utility:

- No loss of sensitivity when pooling by household with pool size of 10 [1]
- Pooling by living circle may be more efficient due to clustering of follow up tests within pools [2]
- Random pooling may be logistically easier (e.g. 2-way matrix pooling [3])

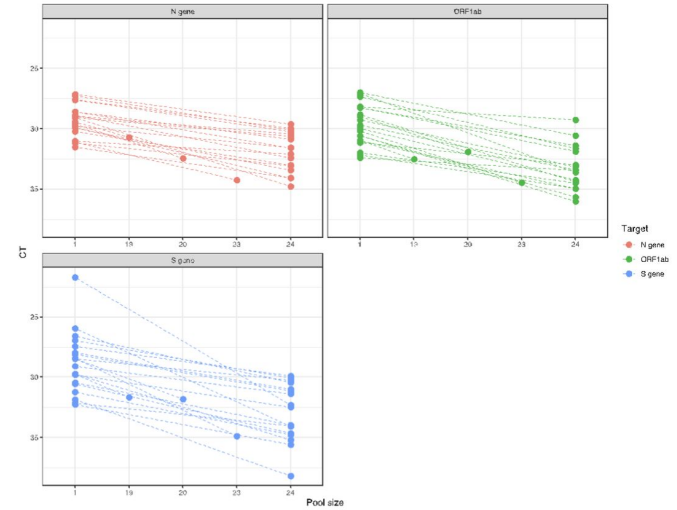
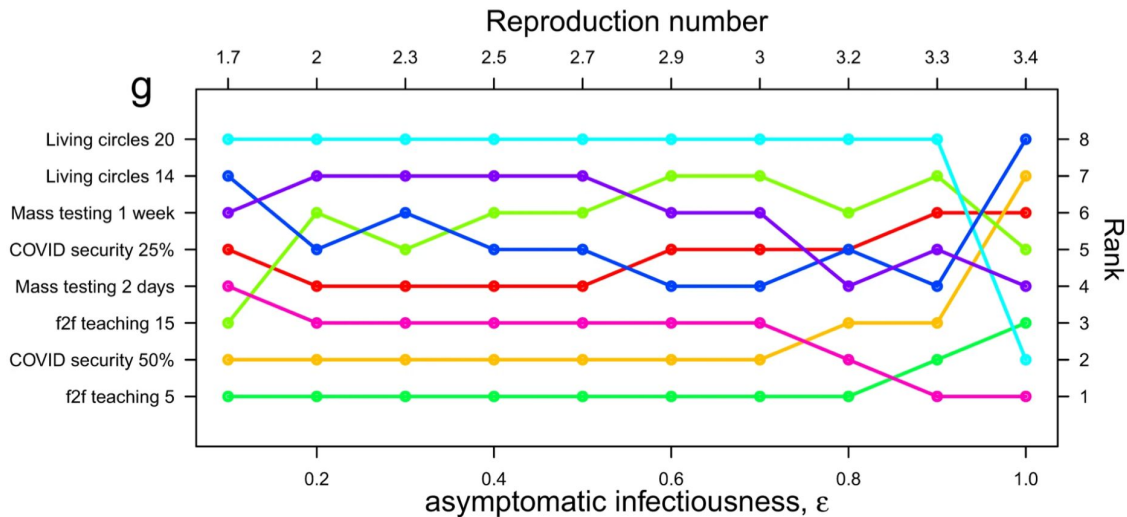


Figure 3. CT values comparisons between pooled and individual samples. Twenty randomly selected positive samples were analyzed for comparison of CT values when detected in a pool of 24 samples and when analyzed as a single sample. The dashed lines connect the dots that indicate the CT values of individual samples (higher) to the corresponding pools (lower).

Bi et al. 2021 [4]

# Many uncertainties in modelled asymptomatic testing strategies

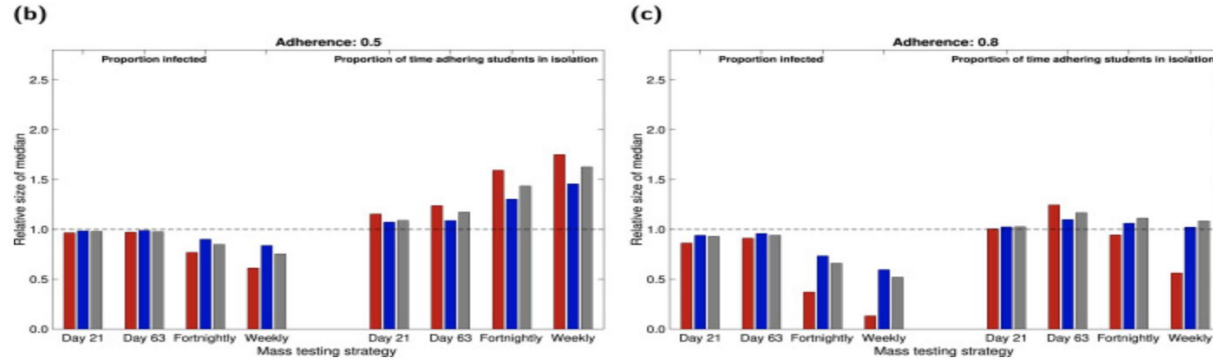
## Viral dynamics/infectiousness of asymptomatic cases





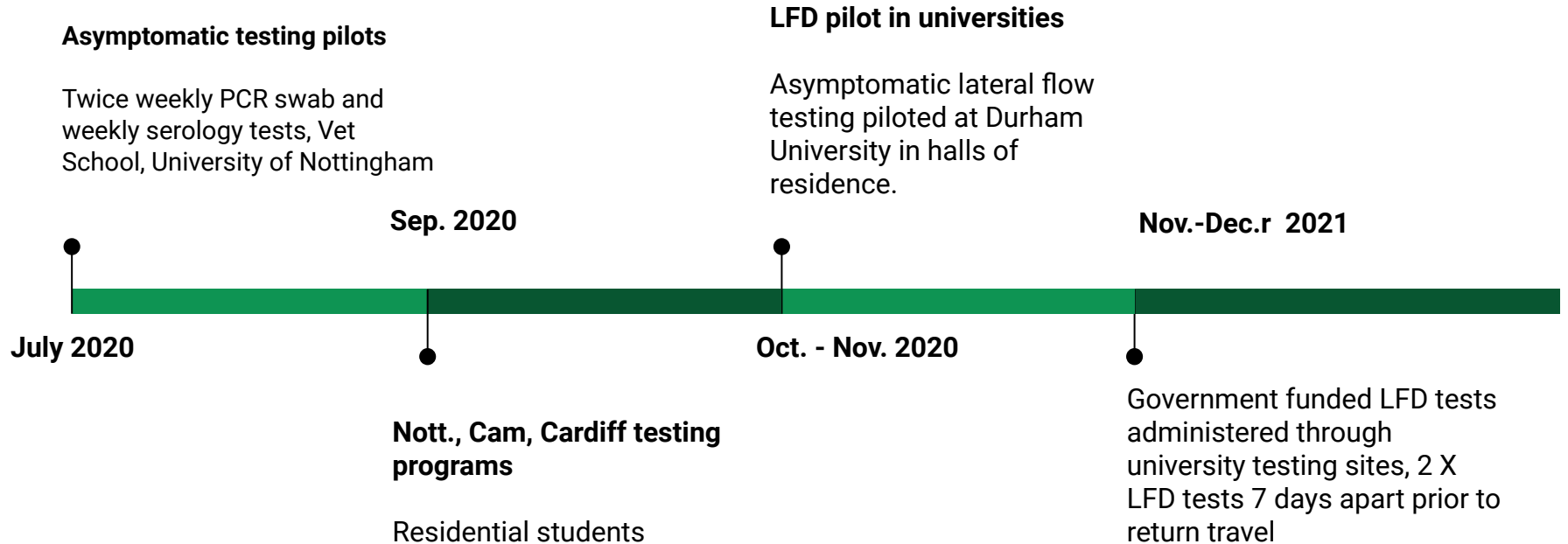
# Many uncertainties in modelled asymptomatic testing strategies

## Uptake of mass testing

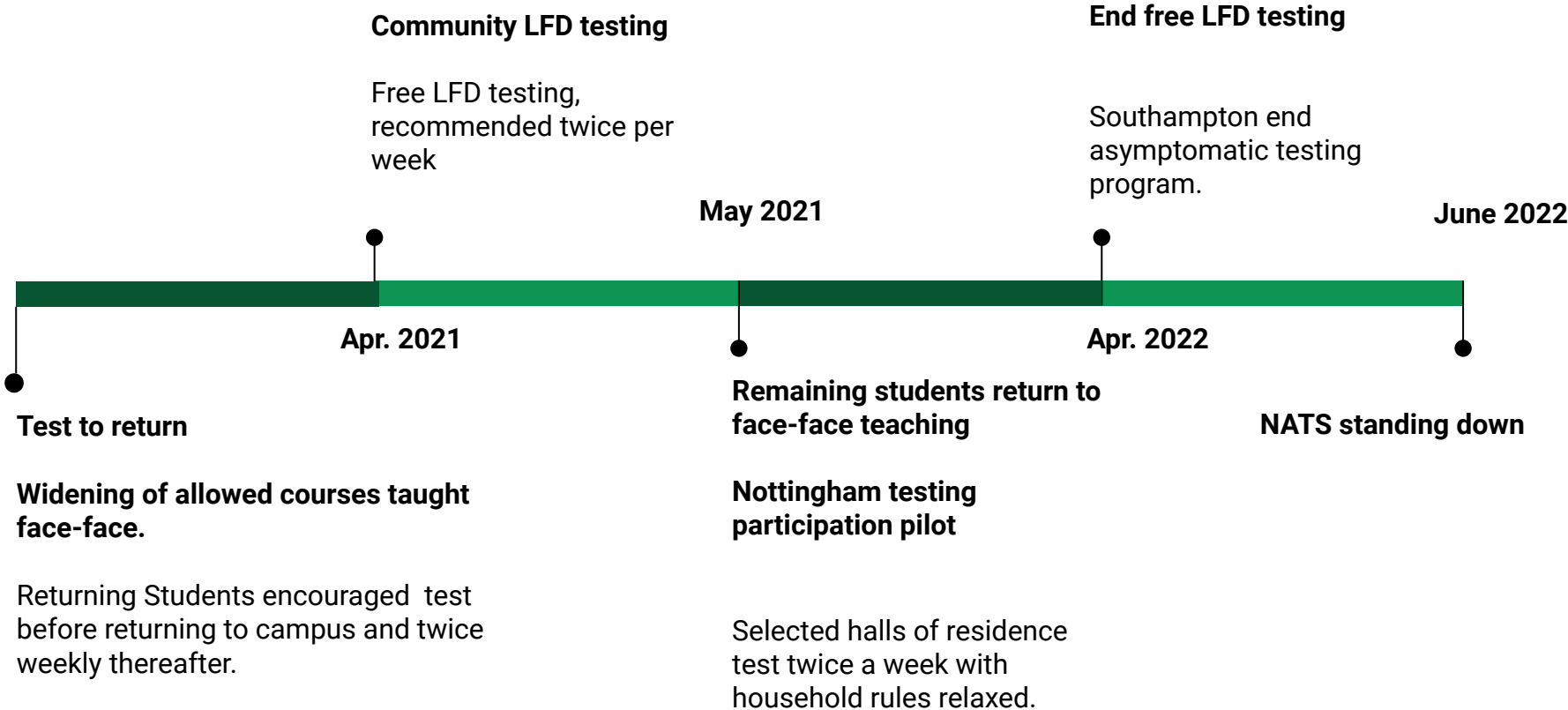


Hill et al., *Epidemics*, 2021, <https://doi.org/10.1016/j.epidem.2021.100476>

# Timeline of asymptomatic SARS-CoV-2 testing in UK universities



# Timeline of asymptomatic SARS-CoV-2 testing in UK universities



Period	Testing protocol	Participants	Uptake	Context	Ref
<b>July-September 2020</b>	Weekly PCR swab	Rural campus (Vet School) First year residential students	89.2% > 1 sample  70.8% all 10 samples *	Bubbles Low-prevalence	[1]
<b>Autumn term 2020</b>	PCR saliva	Halls of residence Large provincial university	Decreasing 58% to 5%	Local outbreaks	[2]
	Weekly PCR swab	Residential students, College based university	> 75 %	Some outbreaks	[3]

[1] Blake *et al.* 2020a, [doi.org/10.3390/ijerph18010188](https://doi.org/10.3390/ijerph18010188), [2] Blake *et al.* 2020b, <https://doi.org/10.3390/ijerph18084182>, [3] Warne *et al.* 2021, [doi.org/10.21203/rs.3.rs-520626/v1](https://doi.org/10.21203/rs.3.rs-520626/v1)

Period	Testing protocol	Participants	Uptake	Context	Ref
<b>Winter break testing (November-December 2021)</b>	2 LFD	All students, Bristol University	10% had 2 required tests	Rising community prevalence	[1]
<b>Testing participation pilot (May 2021)</b>	Twice weekly PCR saliva Daily contact testing	Halls of residence, Large provincial university	88% > 1 test  46% all samples	Household rules relaxed in exchange for requirements to test	[2]

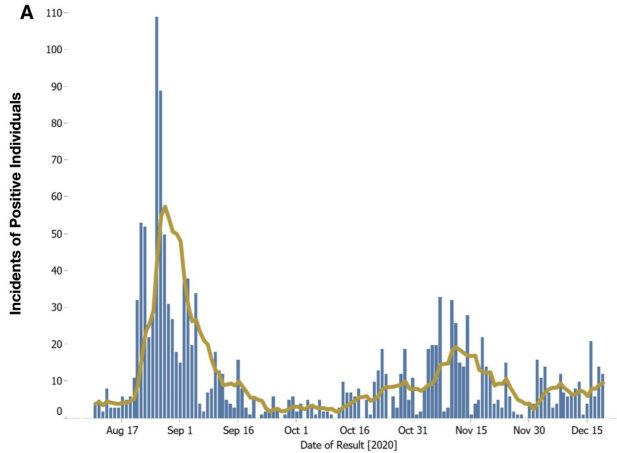
[1] French *et al.* 2022, doi.org/10.1016/j.puhe.2022.01.002, [2] Blake *et al.* 2021, doi.org/10.21203/rs.3.rs-1093335/v1

# Uptake associated with mood, peer pressure, and more...

- Isolation requirements for peers/household members are perceived to have deterred uptake of asymptomatic testing (Blake *et al.* 2021b).
- Pressure from housemates not to get tested (Jones *et al.* 2021, doi:10.1136/bmjopen-2021-055644)
- Uptake correlated with lower anxiety, satisfaction with communication, worry about friends or family contracting COVID-19 (Blake *et al.* 2020a).
- Some significant differences in uptake by year of study, course, and ethnicity in Winter Break testing (French *et al.* 2021) and in residential setting (Warne *et al.* 2021).

# Evaluation of testing strategies: outbreak control

## Increased testing associated with decline in cases



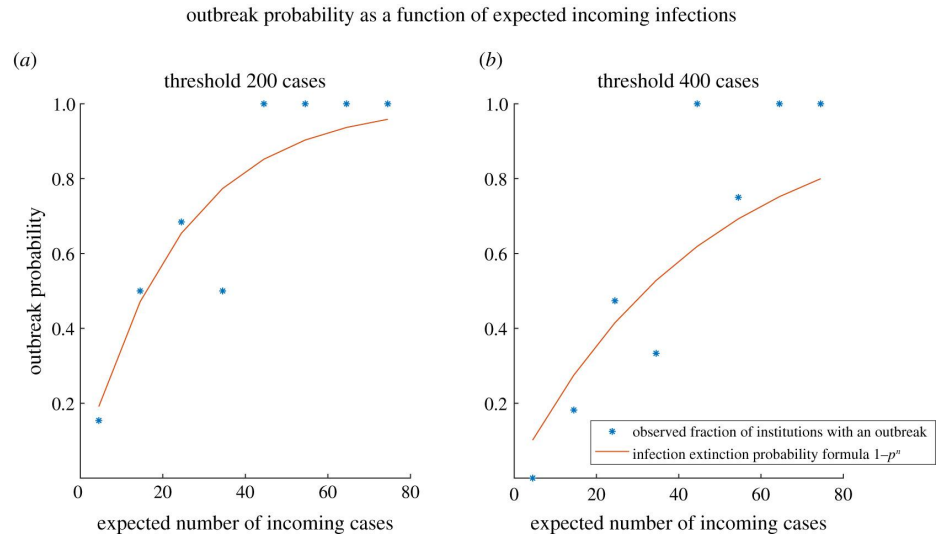
Greg et al., 2021, <https://doi.org/10.1097/EDE.0000000000001448>

**But** outbreak control possible without mass testing.

E.g. O'Donnell et al. 2021

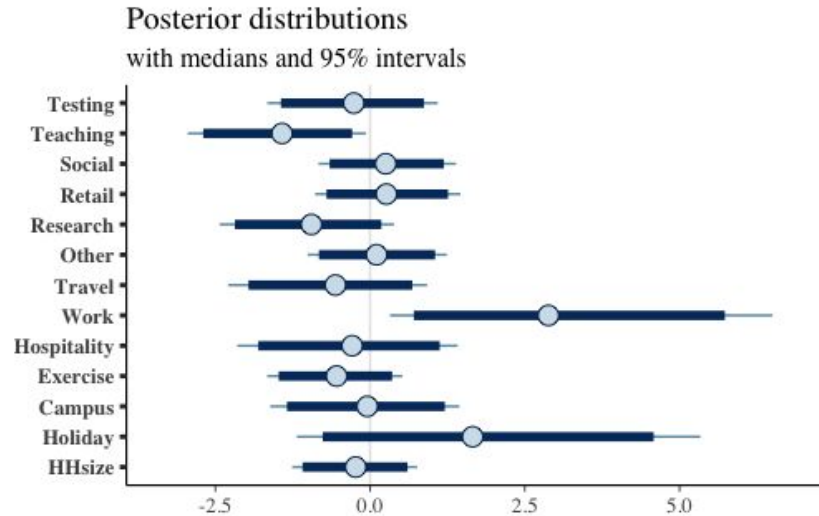
<https://doi.org/10.1101/2021.01.21.21249825>, verified by asymptomatic surveillance

## Outbreak probability well explained by expected importations (not availability of testing)



Enright et al., 2021; <https://doi.org/10.1098/rsos.210310>

# How 'COVID-secure' were universities?



Settings and behaviours associated with a positive asymptomatic test result (October 2020 - March 2021)

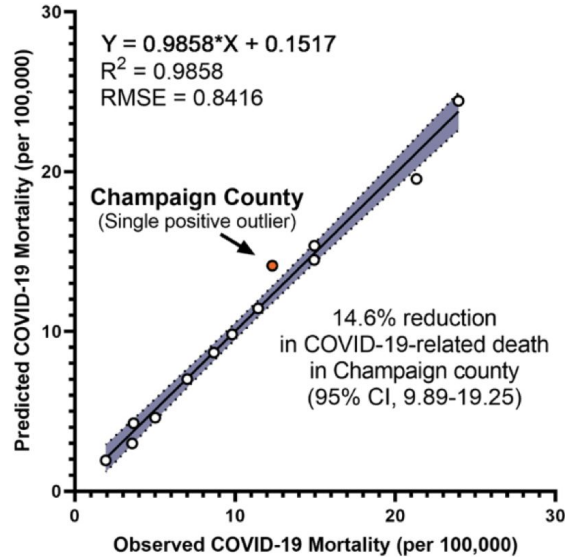


# Evaluation of testing strategies: cumulative infections

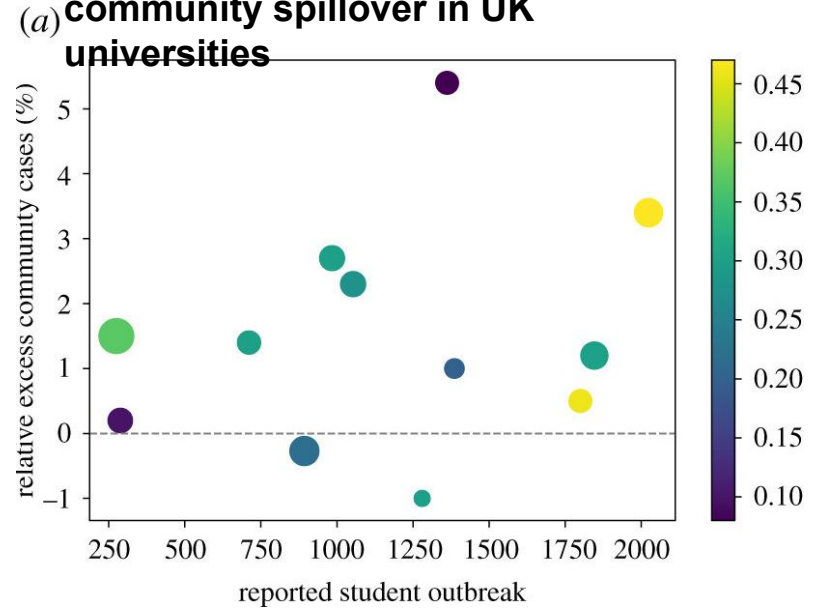
Extensive testing reduces expected mortality in surrounding community

e

Counties Surrounding Big Ten Universities in the U.S.



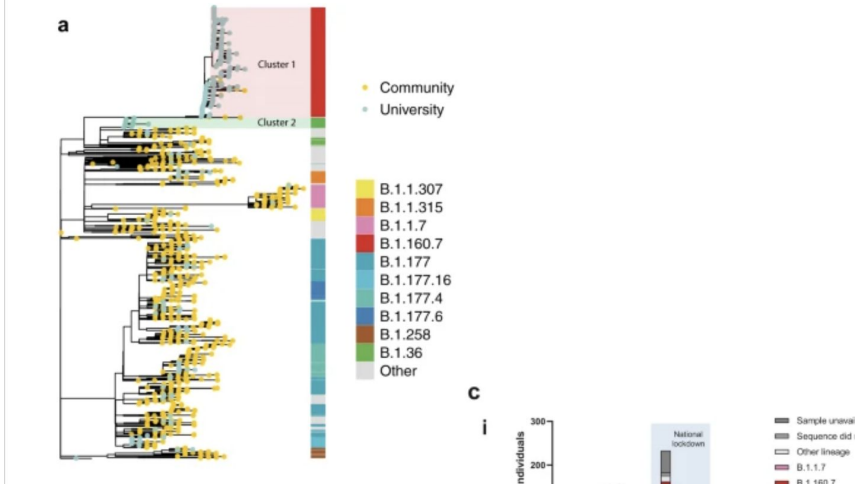
But no obvious pattern between size of student outbreak and community spillover in UK universities



Enright et al., 2021; <https://doi.org/10.1098/rsos.210310>

# Evaluation of testing strategies: genomic epidemiology

Fig. 2: Genomic diversity of SARS-CoV-2 in the university and community.



## University of Michigan, Autumn 2020

Rise in community cases in November following outbreak on campus at beginning of academic year not likely seeded by university cases.

Aggarwal et al., 2020,  
<https://doi.org/10.1038/s41467-021-27942-w>

Valesano et al., 2021,  
<https://doi.org/10.1101/2021.07.19.21260726>

# Uncertainties in benefit of increased asymptomatic testing uptake

## Epidemiological

Prevalence  
Community seeding  
Prior immunity  
Vaccination [1]

## Testing

Sensitivity profile  
Turnaround time  
Testing pattern / frequency

## Virus/variant

Latent and generation intervals [2]  
Heterogeneities in viral load [3]

## Behaviour

Reporting proportion [4]  
Engagement with contact tracing  
Efficacy of isolation  
**What triggers voluntary decision to test?**

[1] Nixon *et al.*, 2021, [doi.org/10.1101/2021.11.22.21266565](https://doi.org/10.1101/2021.11.22.21266565)[2] Park *et al.* 2021, [doi.org/10.1101/2021.05.03.21256545](https://doi.org/10.1101/2021.05.03.21256545), [3] Bjorkman *et al.*, 2021, <https://doi.org/10.1093/infdis/jiab386> [4] Children's Task and Finish Group, Feb 2021, <https://www.gov.uk/government/publications/tfc-covid-19-in-higher-education-settings-10-february-2021>

# Summary

Behaviour possibly largest uncertainty in impact of testing as intervention (test capacity may not be the biggest limitation).

Communication, nature of access to tests and transparency of result important.

Efficacy of voluntary testing in absence of other interventions uncertain.

'Optimal' strategies for testing method, frequency, pooling may be frequently changing?

Universities useful test bed for epidemiological and behavioural research.