

**Statement about the Moonshot Phase 1 city wide SARS-CoV-2 testing in Liverpool as first step in national roll out** 8 November 2020

**DR ANGELA ELIZABETH RAFFLE**, Consultant in Public Health, Honorary Senior Lecturer Bristol Medical School Population Health Sciences, University of Bristol

The UK has over twenty years' experience of delivering evidence-based, systematic, high quality screening programmes, which deliver more good than harm at affordable cost. I have specialised in researching, planning, delivering and quality assuring screening programmes for the last 35 years. I helped set up the National Screening Committee and worked as a Consultant to the National Screening Programmes since their inception in 1996.

Experience with screening tells us that if you embark on a screening programme without having carefully evaluated it first, without a proper quality assured pathway, without certainty of test performance in field settings, without full information for participants, and without the means to ensure that the intervention needed for those with positive results does indeed take place, the result is an expensive mess that does more harm than good.

I have many concerns about population-wide screening for SARS-CoV-2 and the screening project in Liverpool.

- There is no concrete evidence that screening of this nature is helpful in outbreak control, or that it represents valuable use of public funds.
- Asymptomatic screening is not advised by the WHO, or by SAGE.
- There is ambiguity about whether this is a research project, and if it is then participants should be aware of this and should give informed consent.
- The blanket invitation through mass media to attend a testing centre does not provide adequate information to each person about limitations of the testing, the potential for misleading results, GDPR safeguards and how personal data will be used
- It appears that test results will not be linked to primary care clinical records
- The tests being proposed are new and there is little data about their performance in field settings.
- The potential harm from false results includes unnecessary isolation (for false positives), and false reassurance with potentially riskier behavior (for false negatives), yet this is not being made clear to participants.

My concerns are that the current proposals for city-wide screening will fail to realise any worthwhile benefit, will cause substantial harm through diversion of resources, and will distract from solving the widely reported problems with the test and trace programme.

It is my view that the National Screening Committee should be asked to rapidly review the proposals for nationwide screening as a matter of urgency.     **END**