

**Outbreak Management Hub
Public Health Team
North Yorkshire County Council
County Hall
Northallerton
DL7 8DD
Email: dph@northyorks.gov.uk**

24th November 2021

Dear NHS Colleague,

We have received a number of queries from care settings regarding the use of Abbott ID Now tests to facilitate discharge from hospital into care homes. We escalated this to the Department of Health and Social Care, in particular the Clinical, Adult Social Care and Testing Policy teams, who continue to advise that a PCR test needs to be completed, rather than an Abbott ID Now test, to facilitate hospital discharge into care homes. This PCR test needs to be completed within the 48 hours prior to the individual's discharge from hospital.

We are aware that some trusts across North Yorkshire are utilising Abbott ID Now tests, and discussions are ongoing at a national level regarding the Abbot ID Now platform, in particular regarding its utility in relation to multiplex testing in vulnerable settings such as care homes. However, its use is still under discussion. There were trials of its use in A+E departments showing some utility for rapid diagnosis and importantly in a winter context differential diagnosis. Based on currently available evidence, DHSC does not view it as a substitute for a lab-based PCR test used to test people moving from a hospital (high risk infection environment) to a care home (high risk transmission environment).

DHSC has advised that although Abbott ID Now has been validated as a point of care test by TVG, it is not the same as a PCR test. It uses direct isothermal nucleic acid amplification with identified sensitivity of c. 93% (versus the $\geq 97\%$ required for a category 1 test like PCR).

National guidance specifically requires a PCR test to facilitate discharge into care homes. Changing this to include less sensitive tests would be something for further policy/clinical decision at a national level. Based on currently available evidence, Abbott ID Now tests do not meet the requirements for high sensitivity (i.e. category 1) testing regimes currently undertaken in Adult Social Care settings because the models used to determine efficacy and safety of those regimes utilise 97% sensitivity.

The risk to vulnerable people is clear and potentially liability issues could emerge as well as clinical governance issues which could have far-reaching implications. Therefore, we would appreciate your support in continuing to utilise PCR tests to facilitate hospital discharges into care homes, in line with the national [Admission and care of residents in a care home during COVID-19](#) guidance.

Although we cannot act in a directive capacity, **we do very strongly advise against use of testing platforms other than lab-based PCR to facilitate discharge into care homes at this time.**

We appreciate your continued support at this challenging time.

Kind Regards,

Louise Wallace
Director of Public Health, North Yorkshire County Council.