Main recommendations of the Dilnot Commission and the government's response as detailed in the Care Bill 2013

Source: The King's Fund, 'Paying for Social Care: Beyond Dilnot' http://www.kingsfund.org.uk/sites/files/kf/field/field_publication_summary/social-care-funding-paper-may13.pdf

	Recommendation in Dilnot	Government response in the Care Bill
1	To protect people from extreme care costs, there should be a cap on the lifetime contribution to adult social care costs that any individual needs to make at between £25,000 and £50,000. Where an individual's care costs exceed the cap, they would be eligible for full support from the state.	Accepted – cap to be set at £72,000 from 2016, with a lower cap (to be decided) for working-age people.
2	To extend protection to people falling just outside of the means test, the asset threshold for those in residential care beyond which no means-tested help is given should increase from £23,250 to £100,000.	Accepted – the upper capital threshold for means-tested support will rise to £118,000 from 2016/17 (equivalent to £100,000 in 2010/11 prices) and the lower threshold to £17,000 (equivalent to £14,250 in 2010/11 prices).
3	Those who enter adulthood already having a care and support need should immediately be eligible for free state support to meet their care needs, rather than being subjected to a means test.	Accepted – there will be a zero cap for people who turn 18 with eligible care and support needs.
4	Universal disability benefits for people of all ages should continue as now. The government should consider how better to align benefits with the reformed social care funding system, and attendance allowance should be re-branded to clarify its purpose.	The government has not commented on this recommendation.
5	People should contribute a standard amount – $\pounds7,000$ to $\pounds10,000$ yearly to cover their general living costs, such as food and accommodation, in residential care.	Accepted – from 2016 people in residential care should pay a contribution of around £12,000 yearly towards general living expenses (£10,000 in 2010/11 prices).
6	Eligibility criteria for service entitlement should be set on a standardised national basis – in the short term at substantial – to improve consistency and fairness across England, and there should be portability of assessment.	Accepted – the Care Bill makes provision for a national minimum eligibility threshold, to be in place from 2015 and the level to be determined through regulations.
7	The government should also urgently develop a more objective eligibility and assessment framework.	The government has said it will 'develop and test options for a potential new eligibility and assessment framework'.
8	To encourage people to plan ahead for their later life, the government should invest in an awareness campaign to inform people of the new system and the importance of planning ahead.	See below.

	Recommendation in Dilnot	Government response in the Care Bill
9	The government should develop a major new information and advice strategy to help when care needs arise, in partnership with charities, local government and the financial services sector. As proposed by the Law Commission, a statutory duty should be placed on local authorities to provide information, advice and assistance services in their areas, irrespective of how people's care is funded or provided.	Accepted – the government has committed to providing a 'clear, universal and authoritative source of national information about the health, care and support system'. The Care Bill places a new duty on local authorities to ensure that information and advice is provided locally, and the government is setting up an expert working group with financial services, local authorities and the care sector to support the development of an information offer.
10	Carers should be supported by improved assessments and have new legal rights as recommended by the Law Commission.	Accepted – the Care Bill contains new provision to strengthen the rights of carers.
11	The government should make a clear statement that disability-linked annuities are permissible under current pension taxation rules.	The government has said it will clarify the tax treatment of disability-linked annuities.
12	The current deferred payment scheme should be extended so that it is a full universal offer across the country.	Accepted – deferred payments will be available in all local authorities from April 2015, as reflected in the Care Bill.
13	In reforming the funding of social care, the government should review the scope for improving the integration of adult social care with other services in the wider care and support system – in order to deliver better outcomes for individuals and value for money from the state.	Accepted – taken forward through new powers and duties in the Health and Social Care Act 2012, through the Care Bill and through the forthcoming Common Purpose Framework.