



UNIVERSITY OF
TECHNOLOGY SYDNEY

School of Leisure, Sport and Tourism Working Paper Series

UTS: BUSINESS

Working Paper No 10
Accessible Tourism Accommodation Information Preferences

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2008

ISSN: 1836-9979

Series Editor:
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NSW 2070 <http://datasearch.uts.edu.au/business/publications/lst/index.cfm>



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Working Paper 10
2008

School of Leisure, Sport and Tourism
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Citation:

Darcy, S. (2008). *Working Paper No. 10: Accessible Tourism Accommodation Information Preferences*. Working paper of the School of Leisure, Sport and Tourism - Faculty of Business - University of Technology, Sydney, Kuring-gai campus, Lindfield NSW 2070. from http://www.business.uts.edu.au/lst/research/research_papers.html

Acknowledgements:

1. The individuals with disabilities, their families, attendants, carers and associated professionals who took the time to respond to the questionnaire.
2. The disability, ageing and other organisations that assisted the research by providing details of the online questionnaire to their members.
3. Those members of the accommodation sector, who provided in-kind support to the research, assisted the fieldwork and provided time for their employees to be part of the research project.
4. Bruce Cameron from Easy Access Australia for his expertise and guidance on the project.
5. The research was supported by a UTS Early Career Research Grant.

This paper represents work in progress and is therefore likely to be revised/updated from time to time.

***Any comments on the paper would be gratefully received via:
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Accessible Tourism Accommodation Information Preferences

The paper has been prepared to inform respondents of the results of the research project on accessible tourism accommodation information preferences instigated by the University of Technology Sydney with the assistance of Easy Access Australia (EAA). Respondents were asked to complete an online questionnaire about the features of accessible rooms that are important to them, their preferred format for accessible tourism accommodation information and their travel patterns. The working paper provides a summary of the research findings.

Purpose

The project began as a response to a series of well-documented adverse experiences that people with disabilities had encountered with tourism accommodation. These experiences have been documented in letters to the editor of the travel sections of major newspapers, complaint cases lodged with the Human Rights and Equal Opportunities Commission and stories published in the disability press. These issues are not confined to just Australia but are a universal experience of people with disabilities wanting to travel. Based on these sources and Australian and international academic research, the major issues identified were that accessible tourist accommodation information is poorly documented, not detailed enough, not room specific and the rooms do not have an equal amenity to nondisabled rooms (“aesthetic” attributes, vista and room location). From a supply perspective, owners and managers do not recognize disability as a market and, hence, do not promote the rooms in an appropriate manner for people with disabilities to make an informed choice about their accommodation needs. In addition, accommodation managers report low occupancy of the accessible rooms and that non-disabled customers do not like using accessible accommodation.

Objectives

To address these issues the research sought to:

1. Provide information about accessible accommodations in the four currently available formats to people with disabilities to determine whether the information met their access needs;
2. Ascertain which format was preferred;
3. Determine whether the participants perception of the accessible information reflected the reality of the accessible room by conducting room inspections;
4. Uncover the perceptions of hotel managers towards the accessible accommodation; and
5. Establish the perceptions of non-disabled customers towards accessible accommodation.

Research Design

A detailed research design is provided in Darcy (2007). In brief, objective one and two involved a two-stage method. First, access audits were undertaken of 10 hotels with the accessible accommodation and this information was translated into the four information formats. One of these hotels was then chosen as the basis for testing the four information formats based on negotiation with the hotel managers, location, room availability and preferred times. For this purpose, an online questionnaire was developed to:

- Determine the relative importance of access criteria identified under the Building Code of Australia to people with disabilities;
- Test the four formats of presenting access criteria; and
- Provide a profile of the respondents.

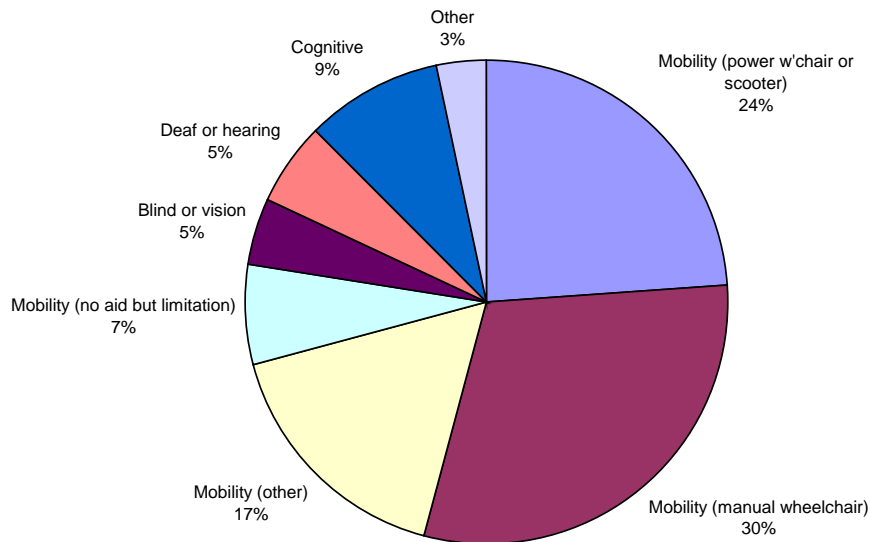
Objective 3 invited a sample of the participants who had completed the online survey (n=6) to inspect the rooms to judge whether there was a true reflection of the information provided. Objective 4 involved in-depth interviews with accommodation managers to ascertain their perceptions and practices towards accessible accommodation.

With regard to the formats of information provision, the literature revealed that there were four ways accessible information was presented in Australia and overseas (Buhalis, Michopoulou, Michailidis, & Ambrose, 2006; OSSATE, 2005). They were:

1. AAA Tourist accommodation guide information (ACROD, 1994; Australian Automobile Association, 2005; Australian Council for Rehabilitation of Disabled (ACROD) Ltd, 1999);
2. Textual presentation - (Australian Quadriplegic Association, 2002; Fodor's, 1996);
3. Textual and spatial presentation - (Cameron, 2000; City of Melbourne, 2006); and
4. Digital photography tour similar to those found commercially (Accor - Australia and the Pacific, 2006; Voyages Hotels and Resorts - Australia, 2006), with independent operators (e-bility, 2006; O'Carrolyns, 2006) and the One-Stop Shop for Accessible Tourism Europe (Buhalis, 2005; Buhalis et al., 2006).

Sample

Over 520 people responded to the survey, with 416 fully completing the questionnaire (n=416). Of these 45 percent were female and 55 percent male, with a relatively even distribution of age. The dominant lifestyle groups were midlife singles, older working couples, younger singles living at home and older non-working couples. The sample was well educated with 48 percent having a University qualifications and 20 percent TAFE educated. The majority of people were full-time (33%) or part time (17%) employed with 24 percent retired or receiving a pension. Over 80 percent were Australian-born with a low affiliation to other cultural or ethnic groups (8%). While the questionnaire was designed for predominantly people with mobility disabilities who use accessible accommodation designated under the *Building Code of Australia* and the referenced *Australian Standards for Access and Mobility* (AS1428 parts 1-4), people with other dimensions of disability were encouraged to respond. The dimensions of disability of respondents are presented in Figure 1.

Figure 1: Dimensions of Disability of the Sample

Source: ATAIP Study (n=416)

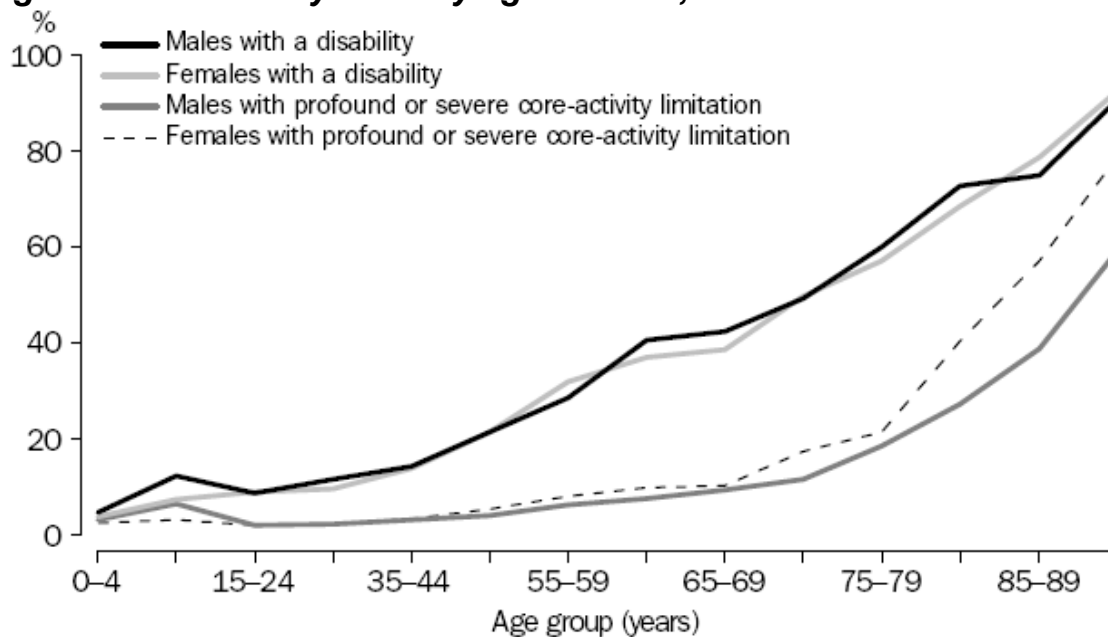
The respondents identified 742 dimensions of access, suggesting that people identified as having multiple dimensions of disability. Of these people, 39 percent identified as being independent or low support needs, 25 percent medium support needs and 36 percent having high or very high support needs. Lastly, 61 percent of respondents were people with disabilities, 17 percent friends or family members, 14 percent attendants and 8 percent professionals in the allied areas.

It is these last three components (dimension of disability, support needs and the individual who answered the questionnaire) that demonstrate the relative complexity of understanding social responses to disability. For example, a power wheelchair using quadriplegic may have a relatively high level of support each day when carrying out activities of daily living (getting out bed, toiling, showering and dressing) but may have relatively low levels of support in carrying out their other activities. Yet, a person with an intellectual disability who has no physical impairment may require 24 hour assistance with all aspects of their daily living. When these two examples are compared in a tourism sense they have significantly different access needs to facilitate their inclusion in destination regions – one requiring a combination of attendant support, built infrastructure and wayfinding information, the other continual attendant support over the day.

As Figure 2 from the Australian Bureau of Statistics (2003) shows, the disability rate increases with age and that most people will experience disability either temporarily (sports injury or illness) or to an increasing extent over their life course. The figure at also shows that significant numbers of people have a high support needs. The importance of the relationship between ageing and disability has always been recognized by disability advocates and was recently affirmed by the World Health Organization (2007) through the

release of its *Aged Friendly Cities* document. The document recognizes the importance of the access considerations to meet the needs of seniors. Disability groups have identified for some time, the barriers to inclusion for people with disabilities, which also impact on seniors.

Figure 2: Disability rates by age and sex, 2003



Source: ABS (2004, p.6)

Travel Patterns

Respondents were relatively well travelled with 33 percent having 2-3 trips per year, with 26 percent having six or more trips per year. About a third of people were satisfied with their level of travel with about 50 percent wanting more opportunity to travel. Most people (68 percent) were the only member of the travel party with a disability, travelling with on average 3.9 people. However, those travelling in groups with other people with disabilities had an average group size of 6.3. These groups were with people from supported accommodation, service organisations, sporting groups and people travelling for the purpose of disability advocacy. This would suggest that there are significant opportunities for group travel requiring the inclusion of multiple people with disabilities. The group sizes ranged from 2-100. Qualitative comments suggest that there are significant difficulties in finding accommodation with multiple rooms for these group travel opportunities. However, a significant proportion of these groups do travel in traditionally lower demand times such as mid week, non school holidays and shoulder periods.

Accommodation Findings

Of those responding, 93 percent preferred to use an accessible room when travelling. Some 63 percent cited the lack of suitable accommodation as a significant constraint to their travel patterns with while 52 percent cited the lack of suitable accommodation as the reason for not travelling as frequently as they'd like. With regard to accommodation choice, 61 percent identified that they had not been able to stay in the class of accommodation that they had hoped to. The most frequent accommodation choice constraint was backpacker, budget and cabin style accommodation, suggesting that people were forced to pay more than they wished for accommodation. This was supported by the

respondents, that over the last three years, 76 percent chose motels (2-3 star), while 52 percent stayed in 4-5 star luxury accommodation. The lack of access to budget accommodation forces individuals to pay a high a price for accommodation, shortening their length of trip and affecting their expenditure on other items.

Information Sources

Almost half the respondents identified difficulties in obtaining accurate information as the reason for lower levels of travel than they would like. The problem in obtaining accurate information on which to make an informed decision led to a serial approach to sourcing information. This included 61 percent of travellers seeking information by phone enquiry direct to the accommodation provider, contact via Internet direct communication to the accommodation provider’s website (53%) and a direct email query (53%). The sources most relied upon next were word-of-mouth from friends or relatives, together with discount accommodation websites and disability specific web sites. Retail choices were used at a much lower level, with 25 percent having used the AAA/NRMA guides, only 20 percent have ever used a travel agent or a state tourism authority or Visitor Information Bureau (18%). There was a significant relationship between the level of support need and retail information use, with people with high support needs using retail travel sources significantly less.

Room Components

In taking direction from Ruys and Wei (1998) considerations for mature travellers, research on accommodation needs of tourists with disabilities in Australia (Access For All Alliance (Hervey Bay) Inc, 2006; Darcy, 1998; Market and Communication Research, 2002; Murray & Sproats, 1990) and the relevant Building Codes of Australia/Australian Standards, six broad considerations were identified: access and mobility; service; safety; security; convenience; and recreation/comfort. From these broad areas, some 68 individual items were tested in a five point likert scale from 1 ‘not at all important’ to 5 ‘very important’. Table 1 presents the top 10 items by mean across all dimensions of disability. When further analysis was undertaken it was notable that there was significant variation based on the dimension of disability between mobility, vision, hearing and cognitive. See Appendix 1 for the variation between dimensions of disability as to their ranked room requirement components.

Table 1: Top 10 Components across All Dimensions of Disability

Component	N	Mean	Std. Deviation	Variance
Can do customer service attitude	415	4.61	0.74	0.54
Rooms of equal level of comfort	416	4.52	0.80	0.65
Roll in shower	415	4.52	0.96	0.92
Clear circulation space	416	4.49	0.89	0.79
Continuous accessible path	416	4.49	0.88	0.77
Non-slip bathroom floor	415	4.48	0.89	0.80
Handheld shower head	415	4.37	1.04	1.07
Accessible parking	416	4.21	1.05	1.09
In room temperature control	416	4.21	0.92	0.84

Preferred Information Formats

Table 2 presents the mean of response for preferred information format based on a scale of 1 for 1st preference to 4 for 4th preference. The results revealed the main preference was Digital Photography with floorplan (72% = 1.51) followed by text with floorplan (14%). When independent travellers were removed from the sample, the support for digital photography with floorplan rose to 90 percent. Not surprisingly, people who were blind or visually impaired did not find the digital photography useful for their purposes but found the rich text description somewhat helpful. A number of respondents suggested that the room floor plan could be translated into a raised tactile room map to assist people who were blind or had vision impairments. This may assist with their travel planning and room orientation. As shown in Figure 3, the Digital Photography option involves Digital Images combined with Textual and Spatial Presentation. This means there is text, key photographs, measurements of critical elements particularly relating to circulation spaces, and a room/bathroom floorplan.

Table 2: Preferred Information Format Mean

	Mean	Std. Dev	Variance
1. AAA icon	3.57	.923	.852
2. Textual	2.80	.685	.470
3. Floorplan	2.12	.702	.493
4. Digital images (n=416)	1.51	.916	.840

Source: AATIP 2008

Field Testing

The next stage involved a small sample of people (n=6) who answered the questionnaire inspecting the rooms to identify whether the information presented was a sound representation of the room itself. Feedback from the field testing and qualitative open ended comments from the survey suggested that the photographs needed to be specifically focused on features of the rooms to provide people with the visual information they needed. This was particularly so of people who required the use of handrails as their position and type was critical to whether the rooms would be functional for their purposes. This point was reinforced through the qualitative comments to the online questionnaire where people suggested there needed to be a specific photograph to assist those people with ambulant disabilities or those who used handrails to transfer within the bathroom.

Interviews were conducted individually with the field testers and then the individuals were brought together in a focus group to discuss the room visits. These qualitative sources identified that it was the significant access features of the rooms that required photographs rather than the general photographs of the other features of the hotel (parking, reception desks etc.). Quite simply, the participants were willing to stay at an accommodation if the room was functional for their needs, even if they could not use all the other facilities. Specifically, it was the accessway to the accommodation room itself, the bed and the bathroom in particular, which was crucial to making an informed decision about whether the hotel met their access needs. This suggests that people with disabilities vary from the general population in that they are far more instrumental about having an accessible room to stay in and this prioritised over the other features the hotel. Of course, in areas where to good quality accessible rooms are available then the participants would make a quality

choice based on the competitive advantage of having a fully accessible property over one where only the accommodation room was accessible.

Figure 3: Extract from Digital Images, Textual and Spatial Presentation

Bathroom:

Door width: 866mm

Door handle: Lever handle 1m high.

Shower: Wheel-in with hand held rose,

Grab rails: 788mm and lever tap, 950mm.

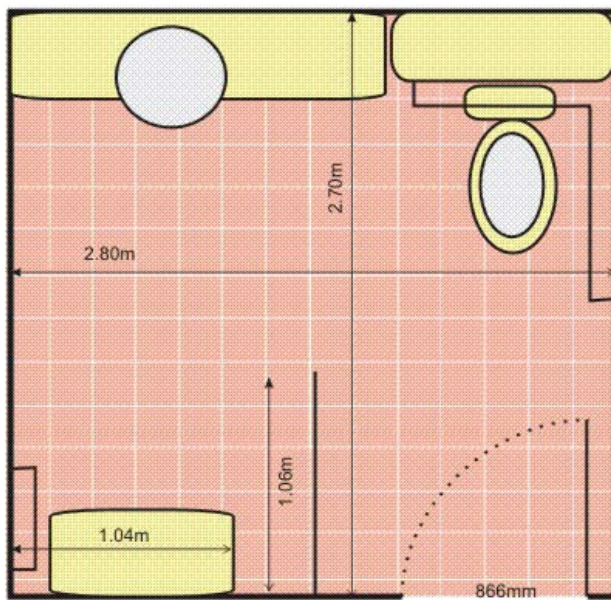
Shower seat: Fold down shower seat height 480mm and shower screen
shower screen limits sideways access to the seat.

Toilet: Height 430mm, centre to side 46cm, front of bowl to rear wall 78cm,
Grab rail height 79cm.

Vanity/Basin: Height 780mm to the top, lever tap.

Light switch: Height 950mm.

Scale:  1m



Source: AATIP 2008 Fieldwork measurements, photography and floor plans.

Hotel Interviews

A key element of the research was the interviews with hotel managers. They were asked a series of questions about their views of their responsibilities to customers with disabilities, whether they saw this group as a market segment, promotional material and its distribution and staff training and attitude to the access rooms by the generic travelling public. All of the respondents identified that their responsibilities to customers with disabilities were essentially the same as those responsibilities applying to customers generally but with the built environment access and fit out of the room being primary issues. One hotel identified the issue of dietary requirements, another identified information needs of guests with disabilities in terms of provision of information to the potential guest, having staff communicate with the guest and ensuring that information was recorded on their system in the event of an emergency or an alarm. All respondents identified the tourism experience

or 'sense of place' of the destination region as being an essential consideration. However, only one of the respondents identified the inclusive nature of tourism and the ability of tourists with a disability to be involved in the social dimensions of meeting and engaging with other travellers as an important consideration to foster within their establishment. The following quote reflects this attitude.

"We have a 75 year old couple in a double, four 20 year olds in the next room, and the disabled people in the next room. They all share the same common ground."

Conclusion

In conclusion, this research has provided greater empirical understanding of the access considerations of people with disabilities and hotel accommodation. In particular, it has highlighted the complex level of information required for people to make an informed decision about their accommodation needs. The research suggests that previous attempts to create an iconography or rating system for accessible accommodation are misguided. A radical simplification of the high level of detail presented in the Building Code of Australia and the Australian Standards for access and mobility is not possible without compromising the detail required by those using accessible accommodation. People expressed their desire for detailed information, visual reinforcement, an understanding of the spatial dimension of the room as important elements for individuals to make an informed decision about an accommodation. The weighting of which of these components was crucial for individuals to make an informed decision varied between individuals. The more detailed the information on accommodation within clearly defined criteria, is the best organisational response for presenting accommodation information for accessible tourism rooms.

Further information

The questionnaire can still be answered at the following address:

<http://www.surveymonkey.com/s.asp?u=63033650891>

or

<http://www.business.uts.edu.au/lst/research/index.html#access>

and follow the links.

For hard copies of the questionnaire please e-mail

accessibletourism@uts.edu.au

or call 9514-5116.

For more detailed information on the study please see:

Darcy, S. 2007, A methodology for assessing class three accessible accommodation information provision, I. McDonnell (Eds.), Refereed conference paper in the proceedings of *Tourism - Past Achievements, Future Challenges*, CAUTHE, Manly - Sydney Australia, 11-14 February, CD Rom
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Appendix 1: Top 30 Components by Dimensions

	All	Power	Manual	Other Aid
1	Can do customer service attitude	Clear circulation space	Roll in shower	Non-slip bathroom floor
2	Rooms of equal level of comfort	Roll in shower	Continuous accessible path	Can do customer service attitude
3	Roll in shower	Can do customer service attitude	Can do customer service attitude	Continuous accessible path
4	Clear circulation space	Continuous accessible path	Clear circulation space	Rooms of equal level of comfort
5	Continuous accessible path	Handheld shower head	Handheld shower head	Grab rails in bathroom
6	Non-slip bathroom floor	Rooms of equal level of comfort	Rooms of equal level of comfort	Roll in shower
7	Handheld shower head	Non-slip bathroom floor	Non-slip bathroom floor	Clear circulation space
8	Accessible parking	Clear circulation in bathroom	Low pile carpet	Accessible parking
9	In room temperature control	Low pile carpet	Clear circulation in bathroom	Luggage assistance
10	Luggage assistance	In room temperature control	Accessible parking	Handheld shower head
11	Low pile carpet	Bed height	Grab rails in bathroom	Independent access entrance
12	Grab rails in bathroom	Independent access entrance	Luggage assistance	Low pile carpet
13	Clear circulation in bathroom	Height of switches and controls	Independent access entrance	In room temperature control
14	Independent access entrance	Extra linen	In room temperature control	Clear signage
15	Clear signage	Luggage assistance	All controls visible from bed	Toilet seat height
16	Extra linen	Table/kitchen bench clearance	Table/kitchen bench clearance	Easily operated door handles
17	All controls visible from bed	Lever water taps	Clear signage	Well lit public areas
18	Easily operated door handles	Flexi bed configuration	Toilet seat height	Emergency phone in lift
19	Bed height	All controls visible from bed	Extra linen	Extra linen
20	Height of switches and controls	Easily operated door handles	Bed height	Lever water taps
21	Toilet seat height	Accessible parking	Lever water taps	Bed height
22	Lever water taps	Clear signage	Accessible vanity unit	Clear circulation in bathroom
23	Emergency phone in lift	Toilet seat height	Height of switches and controls	All controls visible from bed
24	Well lit public areas	Grab rails in bathroom	Reachable in room tea/coffee	Call button in bathroom
25	Table/kitchen bench clearance	Accessible vanity unit	Easily operated door handles	Height of switches and controls
26	Reachable in room tea/coffee	Emergency phone in lift	Emergency phone in lift	Evacuation orientation
27	Evacuation orientation	Evacuation orientation	Well lit public areas	Orientation to the room
28	Accessible vanity unit	Firm mattress	Bench in shower	Handrails throughout
29	Orientation to the room	Reachable in room tea/coffee	Evacuation orientation	Firm mattress
30	Firm mattress	Call button in bathroom	Orientation to the room	Bench in shower

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	Fatigue	Blind	Deaf	Cognitive
1	Non-slip bathroom floor	Clear circulation space	Teletext decoders	Can do customer service attitude
2	Can do customer service attitude	Can do customer service attitude	Can do customer service attitude	Continuous accessible path
3	Grab rails in bathroom	Roll in shower	Phone with vol control and alert	Non-slip bathroom floor
4	Continuous accessible path	Non-slip bathroom floor	In room temperature control	Clear circulation space
5	Roll in shower	Rooms of equal level of comfort	Rooms of equal level of comfort	Rooms of equal level of comfort
6	Accessible parking	Continuous accessible path	Evacuation orientation	Roll in shower
7	Emergency phone in lift	Luggage assistance	Clear signage	Low pile carpet
8	Well lit public areas	Grab rails in bathroom	Internet access	Grab rails in bathroom
9	Luggage assistance	Handheld shower head	Non-slip bathroom floor	Accessible parking
10	Rooms of equal level of comfort	Lever water taps	Non audibel door bell	Handheld shower head
11	Call button in bathroom	Evacuation orientation	Alarm system	In room temperature control
12	Easily operated door handles	Low pile carpet	Well lit public areas	Clear signage
13	In room temperature control	In room temperature control	Grab rails in bathroom	Clear circulation in bathroom
14	Handheld shower head	Easily operated door handles	Access to TTY	Extra linen
15	Lever water taps	Bar fridge for medication	Clear circulation space	Luggage assistance
16	Clear circulation space	Extra linen	Emergency phone in lift	Evacuation orientation
17	Extra linen	Independent access entrance	Orientation to the room	Bed height
18	Clear signage	Call button in bathroom	Call button in bathroom	Flexi bed configuration
19	Low pile carpet	Orientation to the room	Extra linen	Easily operated door handles
20	All controls visible from bed	Clear circulation in bathroom	Clear circulation in bathroom	Independent access entrance
21	Handrails throughout	Well lit public areas	Low pile carpet	Well lit public areas
22	Bench in shower	Accessible parking	Handheld shower head	Pool access
23	Evacuation orientation	All controls visible from bed	Roll in shower	Lever water taps
24	Firm mattress	Clear signage	All controls visible from bed	Bar fridge for medication
25	Height of switches and controls	Firm mattress	Luggage assistance	Orientation to the room
26	Room near lift	Height of switches and controls	Altern format guest info	All controls visible from bed
27	Independent access entrance	Emergency phone in lift	Easily operated door handles	Emergency phone in lift
28	Orientation to the room	Flexi bed configuration	Lever water taps	Level of support needs
29	Bed height	Dietary consideration	Toilet seat height	Table/kitchen bench clearance
30	Reachable in room tea/coffee	Alarm system	Firm mattress	Call button in bathroom