



# National Accessible Scheme

Quantitative & Qualitative Consumer Research

## Research objectives

- VisitEngland is carrying out a strategic review of the National Accessible Scheme. The project includes both a stakeholder review and primary consumer research.
- The principal consumer research objective is to ascertain whether tourists with accessibility requirements see independently verified accessibility ratings having a role to play (alongside Accessibility Guides and other sources) in meeting their information needs.

## Research Method

### Quantitative Stage

- Online survey
- 655 completes (boosted from 600 to ensure robust sample of wheelchair users)
- People with health conditions and/or people who travel with others with health conditions that impact their leisure travel accommodation requirements
- Decision makers in choice of accommodation
- Fieldwork April 2022

### Qualitative Stage

- Virtual depth interviews (mainly via Zoom)
- 18 participants
- People with health conditions and/or people who travel with others with health conditions that impact their leisure travel accommodation requirements
- Decision makers in choice of accommodation
- Fieldwork April 2022

# Understanding our target group

## Target Group: Who did we talk to?

For both, the quantitative survey and qualitative interviews, the respondents were recruited to fit the below criteria:

- Adults aged 18+, residents of Great Britain
- Either the respondent and/or someone else in their travel group has a **health condition**
- Those who have **taken an overnight trip** in England in the last 5 years **and/or intend to do so** in the next year
- Those who tend to stay or planning to **stay in paid-for accommodation**
- **Decision makers** responsible for the choice of accommodation
- Those for whom the health condition has an **impact on their accommodation choice**

# Target group: decision makers

By interviewing **decision-makers**, we captured needs of children and those with profound health conditions, who would not otherwise be able to take part in the research.

## AGE OF RESPONDENTS



	Age
■ 18 - 34 yrs	34%
■ 35 - 59 yrs	36%
■ 60 yrs & over	30%

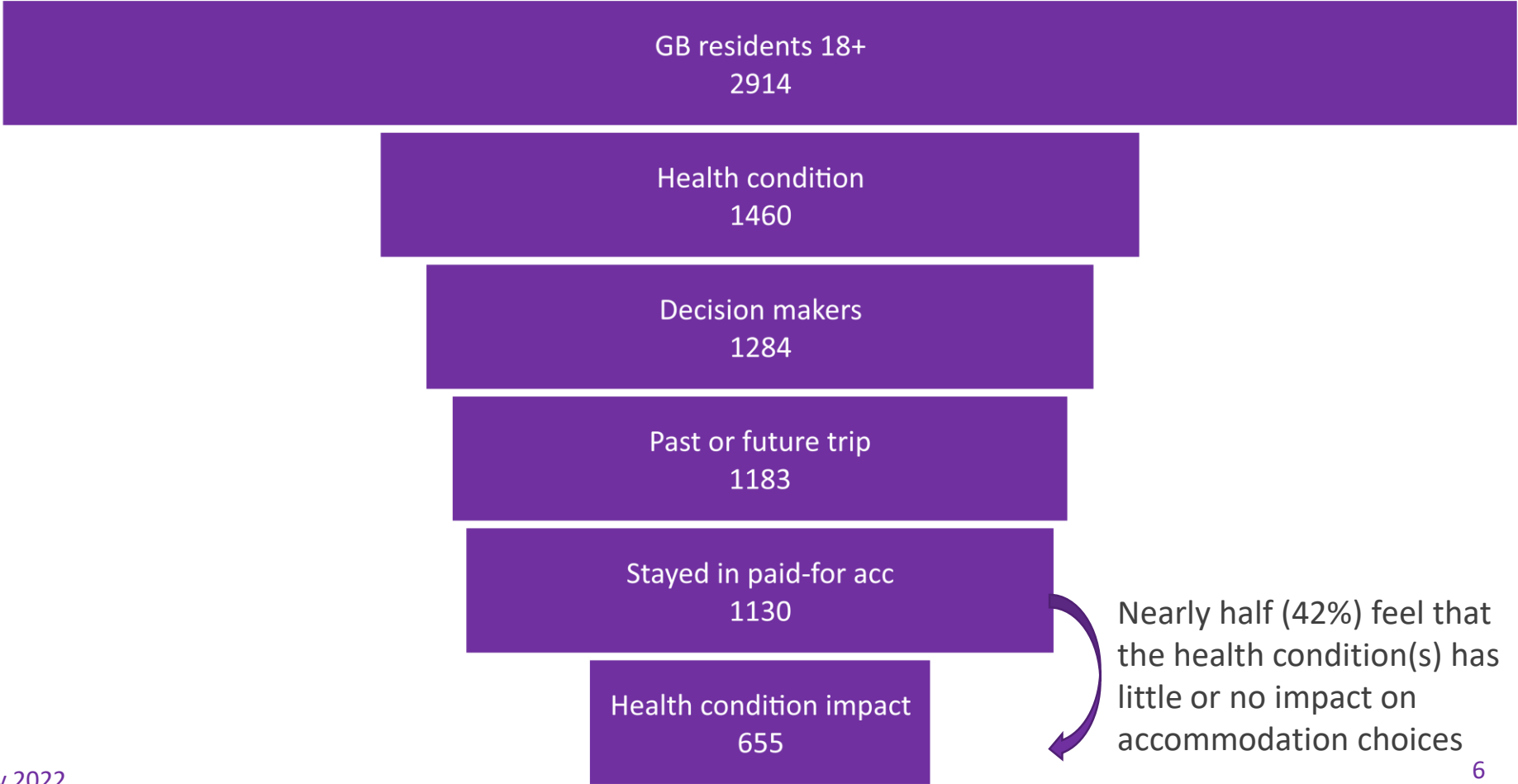
## AGE OF THOSE WITH HEALTH CONDITIONS



	Age
■ Under 12 yrs	6%
■ 12 - 17 yrs	5%
■ 18 - 59 yrs	56%
■ 60 yrs & over	33%

# Target group: quantitative survey

For the quantitative survey, we initially started with 2914 GB residents of 18+ and ended up with 655 fitting our target group

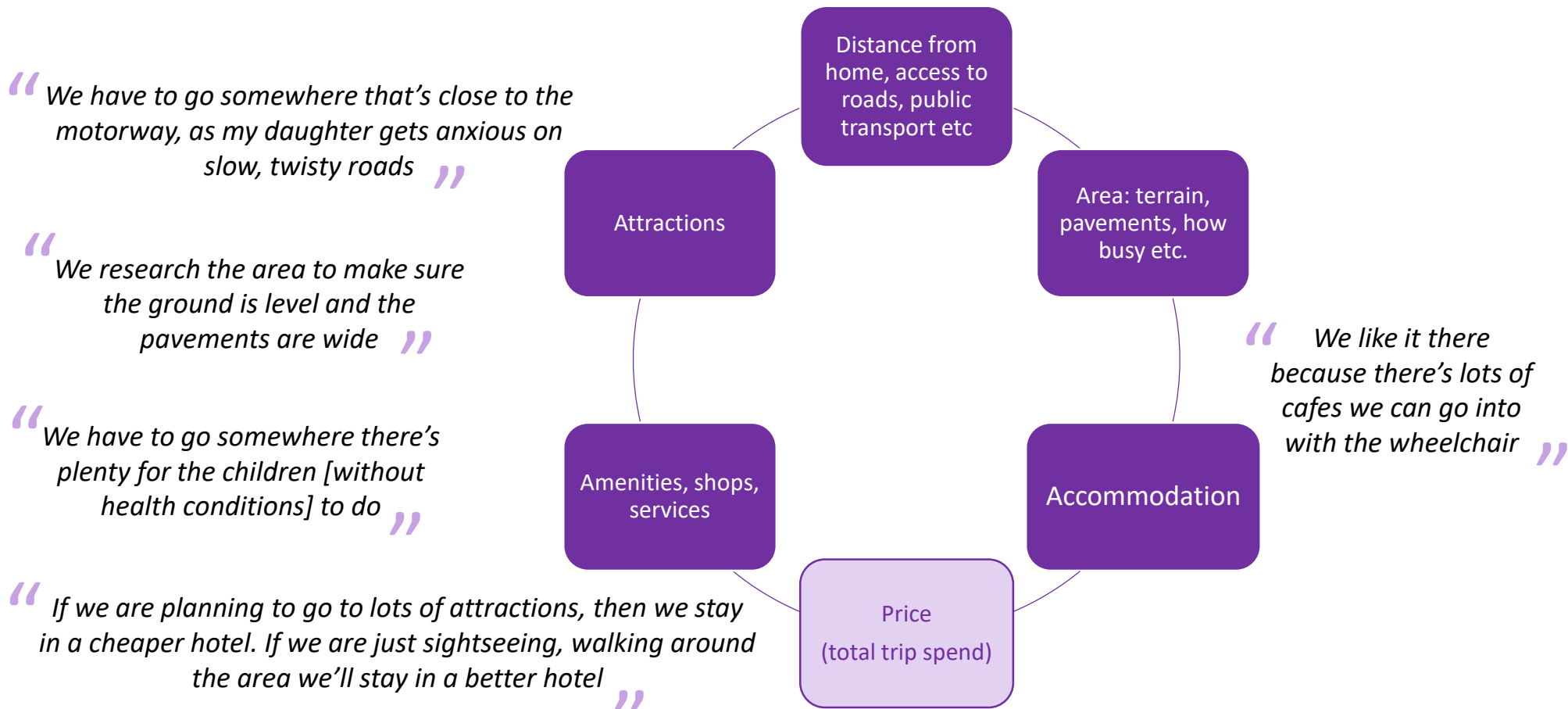


## When travelling with health conditions, the considerations are complex and multi-faceted

“ [I need to think about] low level rooms or working lifts, and near to centre so not walking far. [We also need] clear instructions and [for the area and accommodation to be] not too loud due to sensory difficulties. ”

## The decision making process

Accommodation is just one part of the overall decision making process, all of which are impacted by the health condition. Often the accommodation search doesn't start until the other elements are considered.





## Range of conditions

The range of considerations when trip planning are multi-faceted: the average trip party in this audience has two or three different conditions to consider, with each disabled individual typically having two conditions

Average no. conditions mentioned in party

2.4

Average no. disabled individuals in party

1.5

*(Not including other, non-disabled party members)*

Average no. conditions per disabled individual

1.9

### Meet Sharon\*

Sharon holidays about once a year with a big family group, two of whom have significant mobility requirements, including using two different types of wheelchair.

They typically go to self-catering houses, prioritising step-free access and manoeuvrability into and around the property, and space to bring all their equipment.

They also need a garden and activities for the children in the family.

### Meet Shannon\*

Shannon goes on holiday with her siblings, parents and grandparents.

Within the group, one family member is neurodiverse and finds noise and activity difficult, another uses a walking stick, and another uses a wheelchair and struggles to communicate.

They like to stay in either hotels or B&Bs with limited stairs, a quiet bedroom not facing a busy road or with a window facing outwards, accessible parking and adjacent bedrooms.

## Unique individual experience

...and of course each individual's experience – even of superficially similar conditions – is unique

### Meet Sophie\*

Sophie usually takes her parents on holiday with herself and her young family.

One of her parents has limited mobility, meaning ground floor rooms and level access are essential. A walk-in shower with grab rails etc. is important, and interconnecting rooms are helpful too.

Accommodation is usually budget hotel or self-catering options. Price is an issue and this has ruled out specialist providers, that are perceived to charge a price premium.

Sophie always needs to balance the needs of her parents and her two energetic children who want fun and adventure too.

### Meet Keith\*

Keith and his wife like to stay in affordable chain hotels in England.

Keith uses a wheelchair, as well as other equipment which needs to be plugged in next to his bed at night.

They also need an accessible parking bay at the entrance of the hotel and a downstairs bedroom with adapted bathroom.

### Meet Clare\*

One of Clare's children has autism with mobility issues, and a disability pram is essential when out and about.

When holidaying in England the family likes to stay in hotels. They need either a large bedroom or an adjoining bedroom and a spacious bathroom with a shower. It must be on the ground floor or have a spacious lift, and there needs to be a practical, safe place to store the pram. Their room also has to be ready for their arrival and the child is settled in whilst check-in takes place.

They want to be as adventurous as they possibly can on their family holidays, and they often go back to the same accommodation or a consistent chain hotel.

### Meet Simon\*

Simon has some limited vision, and is a part-time wheel-chair user – he is unable to predict when he will need the wheelchair as it is impacted by his state of health on an individual day rather activity-driven.

Mid-range hotel accommodation has to be wheelchair friendly, but otherwise he feels able to 'look after himself'.

Most holiday-makers think about accommodation features, rather than specific health conditions or disability categories

“

Don't tell me what I want, tell me what you have and I'll make my decision

”

## Features, not disability

Holiday makers think about requirements and features, rather than access for a particular type of disability

“ *[I think ] about stairs, handrails, what there is to hold on to in the bathroom while getting showered etc. ”*

“ *Close to the train station so I can get to and from my way home easily without having panic attacks ”*

“ *That it's somewhere with two bathrooms, secure and with plenty of quiet and rest space - so not a communal area for example ”*

“ *The facility has to have ramps rather than stairs, it has to be all on one level, the shower facilities have to be big enough for a chair, some outside space to just sit and relax ”*

“ *I check reviews for noise complaints as I am sensitive to sound ”*

“ *Make sure staff are friendly and helpful and informative ”*

## Key findings

### Some key findings emerge when we quantify this

#### A wide range of requirements and features are considered

*Even amongst those in our previous “macro” categories for mobility, vision and hearing*

#### Not all are within the control of the accommodation provider

*But businesses should be aware of – and help to provide – the information that people want to know*

#### A sizeable cohort use terms like “accessibility”, “disability” in this context – but still a minority

*Unsurprisingly more prevalent where health condition has a high impact on accommodation options*

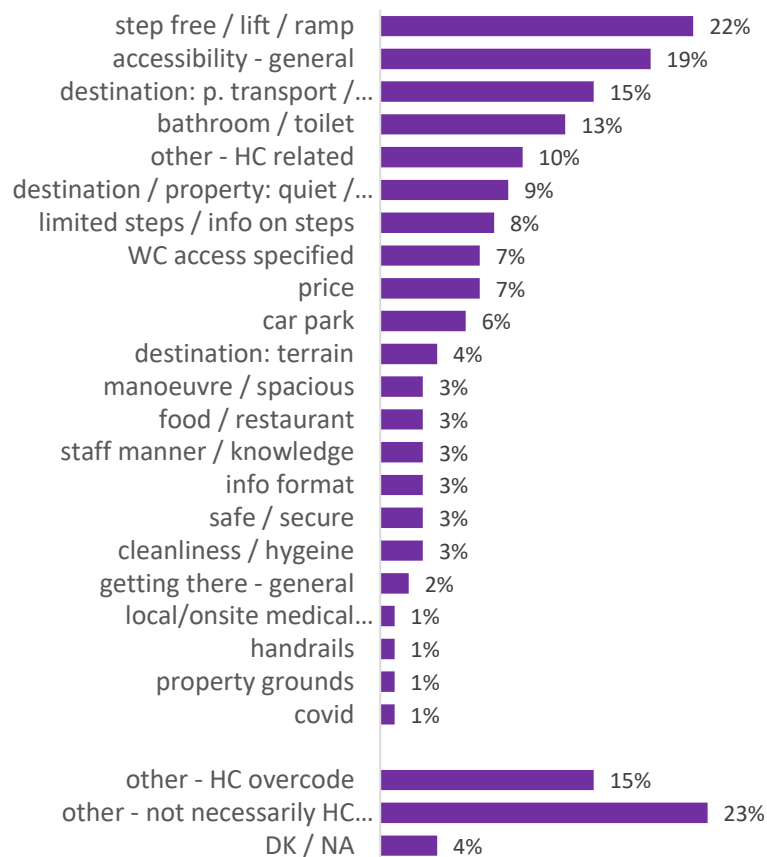
#### (Some) wheelchair users also deliberately look for “wheelchair friendly / accessible”, or similar

*But this isn’t universal even for wheelchair users (who also look for features like “ground floor”, “lift”, “shower [not bath]”,) and this reference to the disability or condition itself is very specific to wheelchair users, rarely coming up for other conditions*

#### There is an imbalance between real holiday makers’ requirements and the emphasis in the current NAS and its logos:

- ✓ Mobility is a big area of focus
- ✗ Many important features aren’t covered at all currently (quiet, food arrangements, staff, etc.)
- ? Hearing and visual impairments are navigated by understanding a range of features, whereas current logos imply emphasis on hearing aid usage for example

Spontaneous priorities for trip planning  
All survey respondents (coded up free-text)



So, the booking / planning journey is influenced by multiple, complex factors, and is driven by researching facts and opinion to inform a personal choice on suitability

“

I go onto Google maps and search a location for suitability. Then I go onto the accommodations' websites to read about their accessibility and will call or email them with questions. I'll also look at TripAdvisor reviews and search by 'disabled', and check out google reviews

”

Holiday makers generally responded well to the concept of Accessibility Guides, which may be the solution to some of the limitations in the NAS

## Accessibility Guides

The accessibility guide concept is well-received, providing comprehensive information on the accommodation (and the area around), that enables the traveller to make their own assessment of whether the accommodation is suitable for their unique needs.

### Perceived Benefits

- ✓ A positive spin – focus on the what an accommodation **does have**, rather than negative “warning” associations
- ✓ Allow accommodation providers to **talk about features** rather than disabilities
- ✓ Addresses the need **for information on the surrounding area** as well as things directly in the accommodation-providers control
- ✓ Allow for **nuance and detail** – less room for varied interpretations of what is meant, as with a logo.. E.g. room to appreciate types of stairs e.g. wide or narrow, ramp or not
- ✓ **Layout and presentation of examples** was felt to be good (and the fact you can download / print)

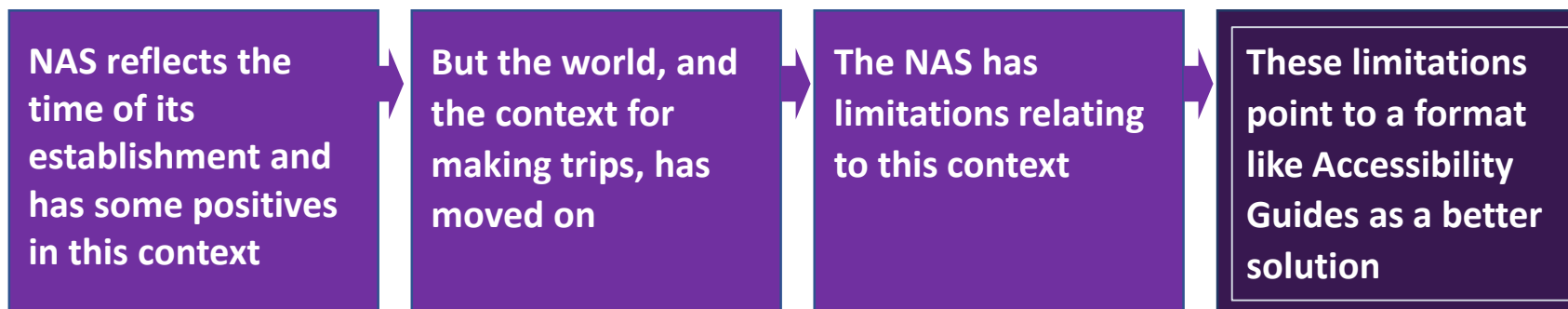
### Opportunities to Optimise

- ✓ Use of **photos and video** as well as written lists, to help with clarity and ease of interpretation
- ✓ **Consistent format** across accommodation providers, to make search process efficient
- ✓ **Available for most (all) accommodation providers** so there is a consistent benchmark that can be looked at for all short-listed accommodation
- ✓ **Easy to locate on the accommodation providers website** (clearly labelled page, logo on landing page etc.)
- ✓ **Searchable** – for individual accommodation providers and/or across multiple providers



## Summary: so what does this all mean for the NAS?

Any information or scheme like this demonstrates a commitment to inclusivity, as well as reducing the effort of the planning task. It's worth spearheading for the benefit of consumers, as well as for business.



And the principle of helping people navigate accessible accommodation is certainly (still) sound

- From consumer perspective, it's right for the industry to take health needs seriously and to promote inclusivity
- Benefits for the businesses involved

Emphasis on **choice** – which will only increase

**Inclusivity** (more and different types of health condition, including invisible conditions and neurodivergences)

(and the arguably juxtaposed) **desire for organised, filterable, easy-search information**

**Narrow focus**

- on specific disabilities
- on the property itself, neglecting surrounds, neglecting staff / customer service

**Assumptive**

**Superficial** – requires further investigation of practical detail