Accessible Hotels in London
Appendix B Draft Best Practice Guidance
Accessible Hotel Rooms

Proposed Draft Best Practice Guidance – London Plan

Grant Thornton

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Promoting Equality For London’s Deaf and Disabled People
Accessible Hotel Rooms
Proposed Draft Best Practice Guidance

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1 Introduction

1.1 Background

1.1.1 This Best Practice Guidance has been prepared by Colin Buchanan in association with David Bonnett Associates as part of a wider study by Grant Thornton and commissioned by the GLA, LDA and DfL. The focus of the overall study was to undertake research to assess the current supply and demand for accessible visitor accommodation in London. Grant Thornton led a consortium to produce the research that included Colin Buchanan, David Bonnett Associates and Inclusion London.

1.1.2 Older and disabled people from all over the UK, Europe and North America are travelling more. This has been encouraged by legislation, such as the Disability Discrimination Act (DDA 1995), and of a change in attitudes, by which full participation in society is facilitated by the gradual removal of physical and social barriers. London, too, is progressively removing barriers and encouraging the creation of inclusive places. Public buildings and spaces, buses and taxis already provide a very high degree of accessibility, while a programme to make the Underground and the rail stations more accessible is well underway. The 2012 Olympic and Paralympic Games are also promoting inclusion and the Mayor has committed that the Games will be the ‘most accessible ever’.

The Disability Discrimination Act states that equal levels of access and service should be provided to all customers. This requires the whole hotel premises and experience to be welcoming and accessible to all disabled and older people.

1.1.3 Moreover, inclusive travel is a sizeable market, which is still in expansion. The UK Travel Survey proved that disabled people and their families spent more than £1.8 billion on UK travel in 2009. When inbound travel by European and overseas visitors is included, the market grows substantially. In 1993, Touche Ross estimated that a 117 million visits to Britain could be generated by disabled travellers, including their travelling companions. The potential was estimated as £22 billion in extra tourism expenditure for Europe overall. In other European countries (see Section 3), inclusive travel is a well recognised market sector, which is often actively promoted.

1.1.4 Current estimates (Grant Thornton, Accessible Hotels in London, March 2010) show that the underlying demand for accessible rooms in 2010 is around 4% of the total. This proportion is set to rise to 7.5% by 2030. This level of demand is not currently matched by supply, which stands at around 2% of the total number of rooms. This is despite the Building Regulations requirement for hotels built since 1991 to ensure 5% of new rooms to be wheelchair accessible. This is having the effect of very slowly increasing the supply of accessible hotel rooms but it will take a considerable time to raise the number to any significant degree: only around 100 new rooms would be provided each year, the equivalent of raising the supply by just 0.1% each year if there are no changes to this policy. Clearly, a higher target is needed to ensure the number of accessible rooms is increased at a faster rate.

1.1.5 The Grant Thornton study shows that, under the assumption that 10% of new hotel rooms should be required to be accessible, then the total stock of accessible rooms would reach 4.5% by 2031 (just over 6,000 rooms).

1.1.6 Accordingly, the 2009 Draft Replacement London Plan sets a 10% target for accessible rooms in new hotel developments in order to maximise the value of tourism to the

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1 LOCOG, Accessible Transport Strategy, May 2008
2 Touche Ross, Profiting from opportunities, 1993
economy and demonstrate commitment to accessibility. Moreover, Policy 4.5 acknowledges that an inclusive hotel experience can only be achieved through integration of an appropriate physical environment, room fit-out and equipment and management practices. This policy has also been informed by evidence collected as part of the Grant Thornton study.

1.1.7 Access for disabled people has in the past been dealt with as an adjunct to the overall design. Even Design and Access Statements (introduced in 2006) are not always sufficiently detailed to demonstrate that accessible hotel rooms are part of the overall design approach to the building and its operations. Moreover, poor or ad hoc management practices have been identified by disabled travellers as very significant barriers to access the existing hotel facilities (See Section 2). Thus, the policy and this guidance propose a more flexible and responsive approach to the provision of accessible rooms, to be considered at planning stage, through more detailed Design and Access Statements and the preparation of Accessibility Management Plans (See Section 4).

1.2 Scope of the Guidance

1.2.1 It is proposed that this Accessible Hotel Rooms Best Practice Guidance (BPG) accompanies and supports the Draft Replacement London Plan (2009) policies below. It provides designers, developers and hotel operators with clarification of requirements in the context of a planning application. In particular, it sets out:

- Clarification of how the 10% accessible rooms target is to be met, through a range of solutions to fit the hotel business model and category, all welcoming disabled visitors (including wheelchair users) in a way that is comfortable and desirable for all types of customers – See Section 5.
- Suggestions on how to design and manage accessible rooms that are safe, convenient and welcoming, so that everyone can use them – See Section 5.
- Reference to existing best practice guidance (BS 8300:2009 and PAS 88) within the context of providing accessible hotel rooms in London – See Section 3.
- Clarification of what it is needed to be included in the Design and Access Statement and Accessibility Management Plan that are to accompany a planning application for hotel development in London – See Section 4.

Key definitions

1.2.2 The principles of inclusive design, as defined by CABE3, call for places to be inclusive so everyone can use them safely, easily and with dignity; flexible so different people can use them in different ways and realistic in recognising that one solution may not work for everybody.

1.2.3 The essential terminology used in this document refers to:

- Inclusive or accessible hotels: both terms are used interchangeably and refer to premises and management practices which welcome all their guests, whether disabled or not.
- Wheelchair accessible rooms: indicates a room which has adequate circulation space and facilities for a wheelchair user, and is designed to also facilitate use by older or other disabled customers, but that can be used with complete satisfaction by all other potential guests.

3 CABE, *The principles of inclusive design*, 2006
1.3  The Draft Replacement London Plan (2009)

1.3.1 The Draft Replacement London Plan (2009) is currently at consultation stage. It is expected that it will be adopted by the end of 2011, once all statutory processes are complete. Then, it will replace the existing London Plan and its 2008 updates.

1.3.2 The following two policies are expected to apply to hotel-related planning applications (new development or refurbishment) in relation to the provision of accessible hotel rooms. As these build on existing policies and guidance, such as BS 8300:2009 (see Section 3), developers will be encouraged to adopt the principles and suggestions of this BPG in advance of the formal adoption of the new London Plan. In addition, Borough relevant planning policy and guidance, such as Borough level inclusion policies, will also apply.

Policy 4.5 - London’s Visitor Infrastructure

The Mayor, boroughs and relevant stakeholders should:

**Strategic**

a. Support London’s visitor economy and stimulate its growth, taking into account the needs of business as well as leisure visitors and seeking to improve the range and quality of provision especially in outer London.

b. Seek to achieve 40,000 net additional hotel bedrooms by 2031, of which at least 10 per cent should be wheelchair accessible

c. Ensure that new visitor accommodation is in appropriate locations

d. Support provision for business visitors, including high quality, large scale convention centre capacity in or around the Central Activities Zone (CAZ)

e. recognise the need for apart-hotels in the context of the broader policies of this Plan.

In addition:

**Planning Decisions**

Developments should contribute towards the hotel provision target and ensure that at least 10 per cent of bedrooms are wheelchair accessible.

**LDF Preparation**

LDFs should seek to ensure that all new visitor accommodation meets the highest standards of accessibility and inclusion and encourage applicants to submit an Accessibility Management Plan with their proposals.
Policy 7.2 - An inclusive environment

Strategic

a. The Mayor will require all new development in London to achieve the highest standards of accessible and inclusive design.

b. The Mayor will assist boroughs and other agencies in implementing accessible and inclusive design in all development proposals by updating the advice and guidance in the Supplementary Planning Guidance 'Accessible London: achieving an inclusive environment'; by continuing to contribute to the development of national technical access standards and by supporting training and professional development programmes.

Planning decisions

c. Development proposals should meet the highest standards of accessible and inclusive design and should demonstrate that they meet the principles of inclusive design so that developments:

i. Can be used safely, easily and with dignity by all regardless of disability, age, gender, ethnicity or economic circumstances

ii. Are convenient and welcoming with no disabling barriers, so everyone can use them independently without undue effort, separation or special treatment

iii. Are flexible and responsive taking account of what different people say they need and want, so people can use them in different ways

iv. Are realistic, offering more than one solution to help balance everyone's needs, recognising that one solution may not work for all.

d. Design and access statements submitted with development proposals should explain how the principles of inclusive design, including the specific needs of older and disabled people, have been integrated into the proposed development, whether relevant best practice standards such as British Standard BS 8300:2009 have been complied with, and how inclusion will be maintained and managed.

LDF preparation

e. Boroughs should develop detailed policies and proposals that ensure the physical environment can meet the highest standards of accessibility and inclusion and that the principles of inclusive design are adopted at the earliest stages of the development process including when drawing up masterplans, area planning frameworks and development briefs.

1.3.3 This guidance is structured to include:

- A review of current practice in London taking the user and hotelier perspective and examples of current practice across Europe (Section 2)
- A review of existing guidance to support accessible hotel room provision (Section 3) and a summary of how the planning system can be used to promote inclusive design (Section 4)
- Some suggested methods of meeting the Draft Replacement London Plan policy requirement using a model of mixed room provision (Section 5).
2 Current Practice

2.1 Supply and demand

2.1.1 The Grant Thornton study (Accessible Hotels in London, March 2010) estimates that in 2010 around 2,000 hotel rooms in London are wheelchair accessible, equivalent to around 2% of the existing stock of hotel rooms in London. This stock of hotel rooms is considered to be inadequate for the following reasons:

- The stock does not meet the level of demand for inclusive travel, measured by the demand from people with ‘any disability’, currently estimated to be around 4% of all hotel rooms.
- It is difficult for disabled people to track down such a small segment of the total market (i.e. 2%) and, of these, identify which ones are appropriately located and priced, not occupied or constrained by other barriers (accessible transport, car parking etc).
- There is poor choice compared to provision in other areas. For example, all London buses and taxis are now wheelchair accessible and TfL remains on target to make a third of all tube stations step-free by 2013.
- A number of organisations and studies have suggested that the limited supply of accessible rooms may be limiting the market growing to its full potential. The 10% target in Policy 4.5 (Draft Replacement London Plan) is intended to increase supply of accessible rooms to 4.5% of all rooms by 2030.

2.1.2 Going forward, demand is likely to increase - it is forecast to grow from 4% in 2010 to 7.5% by 2030 (with 3.5% of demand specifically from wheelchair users). This is likely to be for two reasons. Firstly, further latent demand is likely to be realised as barriers disappear and/or are removed (e.g. improvements in travel by Underground in London). Secondly, ageing demographics mean that the proportion of disabled people is likely to rise, as disability is linked to age. For example, the EU in its programme ‘Europe for All’ identified the European accessible travel market at 127 million people or 27% of the EU population, including disabled people, older people and their travel companions. They estimate this market is worth €80 billion to Europe every year 4.

2.2 Users’ perspective

2.2.1 Disabled hotel users and inclusion professionals have raised a number of issues which, if addressed, will greatly facilitate the visitor experience. These can be summarised as:

- Hotels should have sufficient provision for disabled people to exercise consumer choice, similarly to any other customer, and choose accommodation on the basis of good service, location, appropriate price, comfort and a dignified experience, which does not set the guest apart.
- Disabled visitors have also highlighted the importance of good management policies (such as availability of information at booking) and provision of equipment (such as shower seats or vibrating alarms) to make their hotel experience a comfortable and successful one.

2.2.2 Disabled users have suggested that wheelchair accessibility provides a standard which is of great advantage to many users and should be adopted for all accessible rooms. They have also pointed out that choice (of floor or aspect, double or twin beds, etc.) should be available to them to the same degree as it is for other users. Car parking is very important and should be available near the entrance to the building; where there is no or limited car parking, other arrangements should be in place to facilitate older or disabled guests.

4 Europe for All, Information and marketing on accessibility, 2008
2.2.3 They noted that room fit-out does not always allow for flexibility so that all users, including companions, can comfortably use accessible rooms: this could include full length mirrors, standard height washbasin as well as lower basin, etc. Moreover, features such as grab rails and easy to use taps are not always well integrated in the décor of the room or of the same quality standard of other furniture.

2.2.4 Disabled and older customers would like to have a range of equipment to fulfil common needs to be available upon request and prior booking (such as mattress pads, choice of pillows, mobile hoist, etc). Smartly designed devices (telephones, remote control, etc) and signage would also greatly improve their stay.

2.2.5 In terms of management practices, disabled visitors noted that there is insufficient consistency of approach, even within the same hotel chain; this relates to information availability, booking procedures, charges for accommodation of carers, car parking allocation, etc. They also perceive that the limited number of accessible rooms are frequently allocated to non-disabled guests, resulting in their need to book with unreasonable advance notice in order to secure a room.

2.2.6 Other suggestions for management improvement include better informed and trained staff, availability of access information for visitors' destinations and opportunity to offer feedback, without the need to give uncomfortable personal details.

2.2.7 Clearly, only very few of the issues above are considered as part of a planning application, which normally deals only with the structure and fabric of the building, or as part of building consent processes, which, whilst more detailed, only address physical provisions. An appropriate response to disabled customers' aspirations demands the early consideration and integration of physical, fit-out and management in order to achieve best practice. This BPG suggests ways to achieve these results through the early preparation and regular update of Accessibility Management Plans (see Section 4).

2.3 Hoteliers’ provision

2.3.1 Hotel visits and meetings with hotel managers and operators as part of the Grant Thornton study showed that hoteliers are generally aware and ready to respond to the duties placed on them by the Disability Discrimination Act. All the visited hotels, for instance, had a proportion of accessible rooms varying from 1% to 10% in the smaller hotels. Recent developments and refurbishment generally adopted the 5% requirement of the Building Regulations. The public parts of hotels were generally accessible to wheelchair users (especially in the newer hotels) and accessible toilets in the public areas were mostly in place.

2.3.2 Few hoteliers, however, recognised inclusive travel as a growing market opportunity and adopted either recommended best practice (for example PAS 88 – see Section 3) or specific strategies or policies aiming to improve customer service to visitors with disability. This is in contrast with the approach adopted by hotels in Sweden or Germany, which found that proactive and open marketing makes good business sense (see Section 2.4).

2.3.3 In London, hotels appear to simply adhere to regulations and legal requirements, often narrowly interpreting disability as wheelchair use, and failing to integrate the accessible rooms in their business model. Most point out that the accessible rooms are not often in demand and thus they are normally offered to other guests. Yet it seems that no information is collected to verify how frequently disabled customers requested a room and found that it was already occupied by other visitors.

2.3.4 By and large, the interior decoration of the visited accessible rooms reflected the style and colour scheme of the rest of the hotel. The bathroom was more likely to be
substantially different to that of other rooms, not only in spatial terms but also in quality. Often, functional and ‘ad hoc’ fittings were used. In some cases wash basins, wardrobes and other furniture would not have been appropriate for a non-wheelchair user (whether disabled or not).

2.3.5 Moreover, there seemed to be few formalised hotel policies on provision for disabled visitors:

- Only some hotels provided information flyers about their provision for disabled visitors.
- Few hotels had parking, and none had specific policy for alternative or preferential parking space arrangements for disabled or older guests.
- Not all hotels provided additional equipment for use within the room. The prevailing expectation is that disabled guests will take with them what they need.

2.3.6 It should be noted, however, that existing guidance and regulations do not consider the way the hotel star-rating system affects the ability of hotels to increase supply. For example, guidance makes no distinction between different room sizes, bathrooms or level of services between luxury and budget hotel categories, and suggests spatial solutions that have different implications for different hotel types:

- The typical size of a budget hotel bedroom is 12-15 sq.m., i.e. around 50% smaller than a typical room adhering to Building Regulation accessibility standards. Accessible room provision in budget hotels, therefore, significantly increase the capital costs, while the provision and maintenance of specialist equipment may increase the running costs, in these typically low-service establishments. A better approach will be that of designing inclusive rooms that are also accessible and essential in space requirements and – at the same time - flexible, so that they double up as family accommodation or multiple-bed rooms, which are anyway part of most low cost hotel developments.
- On the contrary, the typical size of a luxury hotel bedroom (30-45sqm) is normally sufficient to allow wheelchair access to any room, with just minimal change. High levels of staffing and services, however, require that most rooms are occupied at any one time by paying visitors. Flexible fit outs and moveable equipment, therefore, will be essential to allow accessible rooms to be used by non-disabled visitors as well, possibly on a last-let basis.

2.4 Other European Examples

2.4.1 We have looked at examples of how accessibility is promoted across Europe (Sweden, Germany and Netherlands) as this may be useful in the implementation of the proposed policies.

Sweden

2.4.2 Sweden adopted a firm social model approach to accessibility, by publishing in the year 2000 an action plan: “From Patient to Citizen”, with a strong emphasis on democracy and human rights. Building laws were tightened and tougher requirements were imposed on both official and private bodies to create accessible environments. The public sector led the way by seeking to “simply eliminate obstacles in official premises and public spaces” by 2010 at the latest, or otherwise provide alternative accommodation.

2.4.3 Handisam, the Swedish Agency for Disability Policy Coordination, published in 2001 a policy document entitled ‘Break the Barriers’, which stated:

“The goal for the Swedish disability policy is to ensure a social community based on diversity, where society is formed so that men and women, and similarly boys and girls, with disability become fully participative in the life of the community and have equal
conditions of life. The disability policy therefore not only relates to people with disability, but to everyone in society.”

2.4.4 The same document refers to access to information, services and operation (employment, participation in democracy, education, etc) as well as premises. Guidance to make premises accessible covers the building fabric, fittings and equipment, maintenance and management routines. This is a much broader scope than the one adopted by British Standards or Building Regulations, which are only focused on the physical environment and new development.

2.4.5 The city of Stockholm, in particular, has launched an accessibility programme to make street environments accessible and easy to navigate for people with mobility impairments. Accessibility to public places and transport is part of the initiative. An honorary award, the St. Julian Prize, is promoted by the city and awarded to business owners who have designed their premises to be accessible to everyone, with consideration given to both the physical environment and the business’ attitude to visitors to their establishment.

2.4.6 The St Julian’s Prize winners include the Scandic Anglais Hotel in Stockholm, a fine example of how tight policy accompanied by promotion have kick-started a process which is now at the core of the business strategy of the entire chain (see below).

Scandic - Scandic Anglais Hotel in Stockholm

The Scandic Anglais hotel in Stockholm won both the St Julian Prize and the STIL (Stockholm Cooperative for Independent Living) Award, for their approach and attitude to making their hotels accessible.

In Autumn 2006 Scandic launched its 93-point programme of alterations which make up their own Accessibility Standard, applicable to all 122 existing hotels in the Nordic region. The programme was developed following the appointment of a Disability Co-ordinator in late 2003. In 2008, the chain decided to add 100 additional accessible rooms to their existing stock and adopt a 10% accessible room policy across their operations. This percentage enables preferences to be expressed when booking the rooms, with sufficient choice of accommodation, bed type, etc.

A 2008 press release quotes: “We currently have difficulty satisfying all the room requests we receive from individual disabled guests, from various organizations, and from older people who find our accessibility aids a great help,” says Magnus Berglund, Scandic’s disability ambassador. “Scandic has won a number of awards for its accessibility program in recent years, which has probably added to the demand.”

“Scandic sees investing in accessibility as a step towards a better society and, equally importantly, as a competitive advantage in the market. Many people probably think of accessible rooms as sterile and dull, but guests who have experienced our rooms prefer them because we have focused on functionality, size and design.”

The 93-point programme includes physical improvements, equipment and specific staff training in customer care. It is accompanied by detailed information available through prominent links in their website and various information leaflets. The website allows booking of accessible rooms, bed types and other preferences through the standard electronic booking procedures.

The emphasis is on well designed, legible spaces and comfort, with a commitment to accommodating a range of needs through ‘smart features’ ranging from vibrating alarm clocks to special dietary requirements.

Magnus Berglund, Disability Co-ordinator, Magnus.berglund@scandic-hotels.com
Germany

2.4.7 Policy in Germany varies according to the individual federal states which have different building regulations and codes. For example, in Berlin at least 10% of each building must be ‘barrier free’ and this will result in 10% of rooms being fully accessible in a new hotel. At the other end of the spectrum, in Hamburg only 1% of hotel rooms (or at least one) should be barrier free.

2.4.8 By and large however, building regulations require that in every hotel all doors and corridors throughout the building and all public areas must be appropriate for wheelchair use and provide colour contrast for visually impaired people. Also 3-5% of parking spaces (or at least one parking space) are to be reserved for disabled customers. Accessible rooms must be as comfortable or better than the standards ones, should be located on various floors, and if possible, the room should have a connecting door to the neighbouring room, for the accompanying person. These rooms, normally larger and more comfortable, must be priced at the same rate as the standard rooms.

2.4.9 The hotel market, in Germany, has recognised the need for accessible hotels and accommodation. The strongest trend is that of specialised hotels, in which over 50% of the rooms are accessible and the hotel openly marketed to older and disabled customers. An example is the Stadthaus Hotel, in central Hamburg: a three star hotel with seven wheelchair accessible rooms and six standard rooms. The hotel is also partly staffed by disabled people.

Netherlands

2.4.10 In the Netherlands, building construction in respect of accessibility is governed by the Building Decree (2003) which includes hotels as ‘Temporary Accommodation Function’. The Decree states that in new premises over 500sqm, at least 40% of the building should be fully accessible. Minimal standards for bedroom sizes, bathrooms, etc, are given in the document.

2.4.11 In practice, however, most hotels are not recent and have only one or two accessible rooms. In Amsterdam, for example, hotels such as the Eden Hotels and the Park Hotels, four large premises between 170 and 300 rooms each, offer less than 10 accessible rooms between them.

2.4.12 Much investment, however, is made on information, with specific accreditation for venues such as hotels, restaurants and museums: the International Accessibility Symbol (IAS) which is to be displayed on the front door of the venue as well as on marketing material. In addition tourist offices offer a search service for specific requirements for disabled visitors, including accommodation or other tourist facilities. These are available in several tourist websites, which also provide details of facilities not only for disabled people, but also for families, special dietary requirements, etc:

- [Hotelpage, w.hotelpage.nl](http://w.hotelpage.nl)
- [Procrustes, Accommodations that suits you, http://www.procrustes.nl](http://www.procrustes.nl)
- [Dinnersite, www.dinnersite.nl/rolstoel](http://www.dinnersite.nl/rolstoel)
- [www.rolstoelweb.nl for wheelchair accessible fun parks, zoos and other attractions in the Netherlands](http://www.rolstoelweb.nl)

2.5 Conclusions

2.5.1 The evidence from users groups and hotel visits suggests that practices in London are already improving and that the quantity and quality of provision is getting better over time. However, further improvement is needed in integrating accessibility provision in the overall design and management of hotels. In particular:
The hotel industry needs to do more to embrace the need for inclusion and recognise its business value. European experience, such as in Sweden and Germany, firmly suggests that best practice, if marketed, is accompanied by business success.

Providing accessible premises should not just be a response to the need to fulfil duties in accordance to Part M of the Building Regulations, but be part of a comprehensive customer centred strategy which integrates inclusive practices in the day-to-day planning and running of the business.

Spatial and building standards need to be complemented by a strong design attitude, so that good quality fittings and attractive layouts are matching or exceeding the overall quality standard of the hotel, recognising that inclusive design must be useable by all people. The Swedish Scandic Hotel example provides a good model in this respect.

Customer care is very important to disabled guests. It is imperative that higher standards of physical provision are accompanied by well informed policies and management practices, particularly at booking time and upon arrival. Continuous improvement, following feedback, is necessary to ensure that customers get what they want, whether disabled or not.

Provision of information can greatly facilitate travel, either through an accreditation system or through general availability of information through websites or tourist offices (such as in the Netherlands).

2.5.2 It will be necessary to consider the issues above as early as possible when designing a new hotel development. Therefore, it is recommended that the Design and Access Statement and Access Management Plan, both required by the Draft Replacement London Plan Policy 4.5, are used as a tool to ensure that the design of accessible hotel rooms is appropriate, well integrated and part of an overall customer oriented approach.

2.5.3 We discuss these mechanisms in turn in this BPG, but first summarise the current sources of guidance in this area.
3 Existing Legislation and Guidance

3.1 Overview

3.1.1 The law (Disability Discrimination Acts, 1995 and 2005) requires that disabled people are offered the same treatment and standard of service as everybody else. This requires that hotels (existing and new) make reasonable provision to welcome disabled guests, through both physical and operational adjustments. This is interpreted by existing guidance and provision is already improving as a result.

3.1.2 All hotels, whether existing or new, as service providers and employers must not discriminate disabled people. Access audits are commonly used to confirm that reasonable provision is made or suggest any required corrective measures.

3.1.3 The Town and County Planning Act also requires development to meet the needs of disabled people, essentially interpreting accessibility as good design (for example in Planning Policy Statement 1) and the requirement to provide Design and Access Statements with planning applications (Circular 1/2006). The CLG is also proactively promoting Lifetime Homes and Lifetime Neighbourhoods and has published advice such as Planning and Access for Disabled People.

3.1.4 Publicly Available Specification 88 (PAS 88) Guidance on Accessibility of Large Hotel Premises and Hotel Chains, on the other hand, is a non-mandatory best practice guide, which aims to improve accessibility in all hotels. PAS 88 recognises that accessibility is a matter of appropriate management practices as much as it is physical provision. It also adopts a broader understanding of the customer groups which would benefit from accessibility measures by interpreting accessibility as good customer care.

3.1.5 New hotel developments, in addition, should consider guidance provided by Building Regulations (mandatory) and British Standards (advisory).

- Both state that a proportion of rooms in new hotels need to be accessible and define accessibility standards through detailed guidance. The proportion of accessible rooms varies from 5% in the Building Regulations to 10% accessible + 5% adaptable in the British Standards.
- Both Building Regulations and British Standards provide detailed specifications of the physical characteristics of accessible hotel rooms; the diagrams and illustrations contained in these documents have become the ‘design norm’ for accessible rooms in developments. The documents provide designs of public accessible toilets and generic bathrooms, which equally apply to hospitals, homes and hotels, perhaps inappropriately.
- Building Regulations and British Standards do not offer guidance on the management policy or other operational arrangements that apply to these rooms or to the hotel in general and make no distinction between different hotel categories.

3.2 Key legislation

Disability Discrimination Act (DDA, 1995, 2005)

3.2.2 The law, with the Disability Discrimination Act, protects the rights of disabled people in the areas of employment, education, access to goods and services, buying land and property and public functions. The aim is to end the discrimination which disabled people experience. The Act legally requires businesses and operations to make reasonable adjustments to all facilities and services, including the physical features or premises, to overcome any barriers to access by customers and employees with disability. The Act is
necessarily concerned with principles, rather than detail, and provide the overall framework under which hotels have a duty to provide equivalent service to all customers, whether disabled or not.

3.2.3 New and existing hotels, as service providers, are required not to discriminate against disabled people. More specifically, Part 3 of the DDA requires the implementation of reasonable adjustments to policies, practices and procedures as well as adjustments to remove or avoid any physical feature that makes the service unreasonably difficult to use. The Act also requires that equal levels of service should be provided to all, irrespective of their disability. Hotel premises therefore should be overall welcoming and accessible to all people including disabled people.

3.2.4 A common way for hotels to determine whether their services present unreasonable barriers to disabled people, is to undertake an access audit and identify any required action.

Planning and Compulsory Purchase Act and Circular 01/06

3.2.5 Circular 01/06 provides guidance on changes to the development control system implemented by the Planning and Compulsory Purchase Act 2004. This circular does not include changes made by virtue of section 188 of the Planning Act 2008 and a revised circular will be published in due course reflecting this change.

3.2.6 Circular 01/06 requires that planning applications of the scale envisaged for new hotels in London, whether outline or full applications, are accompanied by a Design and Access Statement, which accompanies the application to describe the design approach and principles as well as demonstrate that the proposed development is inclusive and makes provision for access and use by disabled people.

3.2.7 Individual local authorities can provide additional guidance as to the level of detail to be provided as part of a planning application. A review of planning applications in London has revealed that Design and Access Statements for hotel developments do not always provide comprehensive details of the quantity and quality of accessible hotel rooms.

Part M (2004) – Building Regulations

3.2.8 Building Regulations provide the standards that each new development or building alteration needs to meet prior to receiving building consent. These standards are mandatory and enforceable by the Local Authorities. Building Regulations are concerned with the physical fabric of buildings to ensure that they are safe and comfortable to use.

3.2.9 Part M – Access to and Use of Buildings is the Building Regulations document which governs accessibility. Its approach is to enable people with impairments by creating specific and suitable accommodation, rather than designing for all people more generally. It has a section dedicated to Buildings Other than Dwellings (which includes hotels) and defines its requirements as reasonable provision so that people, regardless of disability, race or gender, can:

- Reach the principal entrance to the building and all other entrances;
- Use the building without encountering hazards, or need assistance to avoid them;
- Access any storey of the building and all building facilities;
- Enjoy suitable accommodation;
- Have availability of aids for hearing or sight in parts of the buildings where communication takes place (such as information points, receptions, etc);
- Use sanitary accommodation provided in the building.
3.2.10 Specifically for hotels, Part M (sections 4.17 to 4.36) requires one in twenty hotel rooms (5%) to be accessible and offers detailed guidance of requirements: size of passageways and turning circles, location and types of support rails, position of switches and sockets, etc. Most requirements focus on the needs of wheelchair users.

3.2.11 In addition, Part M requires that accessible rooms should not be less advantageously situated than other bedrooms, that there is choice of location and equivalent standards of amenity and that there are at least as many shower rooms as bathrooms. Finally, it also states that wheelchair users should be able to visit companions in other bedrooms and a proportion of rooms should have a connecting door to an adjacent room for a companion.

3.3 Relevant best practice guidance

3.3.1 Visit Britain, the Department of Culture Media and Sport and others have published guidance and advisory papers promoting best practice (see also Section 6). The most important and relevant best practice guidance concerned with accessibility and hotel rooms is summarised below.

**BS 8300:2009 – British Standards**

3.3.2 BS 8300:2009 Design of buildings and their approaches to meet the needs of disabled people - Code of Practice focuses on the design requirements to meet the needs of disabled people in new buildings. It is a code of good practice, and contains detailed guidance to all physical parts of a building. Guidance is advisory and not enforceable.

3.3.3 BS 8300:2009, in relation to hotel premises, specifies that accessible rooms should cater for a wide range of disabled people and sets out the following requirements:

- 5% of all rooms to be wheelchair accessible
- 5% of rooms to be fitted with a fixed tracked-hoist system or similar system giving the same degree of comfort and safety
- 5% of rooms to be capable of being adapted in the future to accessibility standards.

**Publicly Available Specification (PAS) 88: 2008, Guidance on Accessibility of Large Hotel Premises and Hotel Chains**

3.3.4 PAS 88: 2008 defines inclusive environments as those capable of use by everyone. More specifically PAS 88 defines accessibility as providing appropriate facilities and services to disabled or older people, but also families and those with luggage (Section 1 – Scope). The document is advisory and equally applies to existing and new hotels. It is intended to specify what would be considered a minimum standard of service for disabled people in application of the DDA, whilst recognising that, ultimately it is for the courts and tribunals to determine whether or not someone has breached the Act.

3.3.5 PAS 88 covers all aspects of the hotel experience, from booking to arrival, stay and departure. It suggests ways by which the experience can be made more welcoming, through hotel practices, customer care and special equipment (from TV remote controls to specialist facilities). As such, it fundamentally differs from the Building Regulations or the British Standards, as it is focused on management and policies as well as physical provision. It also adopts a broader understanding of the customer groups which would benefit from accessibility measures, by interpreting accessibility as good customer care.

3.3.6 PAS 88 suggests that hoteliers should:

- Prepare and implement Access Strategies for the management of their premises
- Provide training to all staff
- Enhance communication and information to older and disabled guest, from booking time to departure.

**Conclusion**

3.3.7 The BPG is founded on existing guidance as referred to above, provides clarification of what is best practice and sets out the specific requirements of accessible hotel rooms to help ensure inclusive access is addressed effectively at planning application stage.
4 Planning policy and accessible hotel rooms

4.1 Key issues and Draft Replacement London Plan policy objectives

4.1.1 A review of planning applications\(^5\) indicated that, when planning permissions are discussed, accessible hotel rooms are generally not reviewed in detail, as the level of detail provided in Design and Access Statements varies quite considerably between applications. Generally, the provision and quality of accessible rooms is often delegated to the Building Consent process, relying on the requirements of Part M of the Building Regulation.

4.1.2 Moreover, the Planning Application and Building Consent processes are only concerned with the physical fabric of the hotel and make no distinction between hotel categories (such as luxury hotel vs. budget accommodation). Yet, how rooms are fitted out or managed is an important part of encouraging a more inclusive hotel industry, as well as recognising that different hotels have business models that are very sensitive to room sizes or standards of service.

4.1.3 The Draft Replacement London Plan policies and this BPG seek to improve the quantitative and qualitative hotel provision of accessible rooms in new development, by:

- Setting a quantitative requirement of 10% of all hotel rooms to be accessible (Draft Replacement London Plan Policy 4.5).
- Suggesting that these can be provided in a range of types and sizes to suit the business model of the individual hotel (see Section 5).
- Requiring that accessible room provision is fully integrated in the design of the hotel.
- Requiring that management practices are fully considered at design stage and put in place and monitored throughout the lifetime of the development.

4.1.4 This BPG is designed to support the Draft Replacement London Plan and to ensure that the Draft Replacement London Plan policies are effectively implemented. In particular, it aims to ensure that best practice in the provision, design and management of accessible hotel rooms is considered from the outset of hotel development and forms part of the planning application process.

4.2 Planning for accessible hotel rooms

4.2.1 Hotel developments in London need to be designed in compliance with national, regional and local planning policies to obtain Planning Permission.

4.2.2 For hotel developments in London, the most specific policies relating to the provision of accessible hotel rooms are the policies of the Draft Replacement London Plan 2009 (Policies 4.5 and 7.2 – see above Section 1.1). Other policies in the Local Development Framework of individual Boroughs will be relevant, for example on tourism or inclusion and accessibility.

4.2.3 Developers will be encouraged to use the Draft Policies and this BPG in advance of adoption of the Draft Replacement London Plan (due in late 2011).

4.2.4 Applicants will be expected to:

\(^5\) Grant Thornton, Accessible Hotels in London, 2010
1. Prepare a Design and Access Statement, which is sufficiently detailed to demonstrate that accessibility is integral to the design and that adequate choice of accessible room types is provided to all customers, whether disabled or not. The Design and Access Statement should cover as a minimum the topics in Table 4.1
2. Prepare and submit with the Planning Application An Accessibility Management Plan, which demonstrate that the management and operation of accessible rooms is considered from the outset of the design.
3. Use and reference existing best practice guidance such as BS 8300:2009 or PAS 88:2008.
4. Adhere to Part M of the Building Regulations in order to obtain Building Consent.

4.2.5 It is considered that these requirements could have, over time, a very significant impact in enhancing accessibility and promoting integrated, responsive and inclusive design

4.2.6 Details that should be included in the Design and Access Statement and the Accessibility Management Plan are provided below. Section 5 provides ideas and suggestions for the design and management of inclusive hotels and accessible rooms.

4.3 Design and Access Statements

4.3.1 Design and Access Statements (DASs) should always accompany planning applications for new development of the scale envisaged for new or refurbished hotel accommodation in London. They are the most appropriate tool for assessing best practice in hotel design and the provision of accessible rooms, as they are designed to link general development principles to final detailed designs.

DASs provide an opportunity for developers and designers to demonstrate their commitment to achieving good design and ensuring accessibility in the work they undertake, and allow them to show how they are meeting, or will meet the various obligations placed on them by legislation and policy.

4.3.2 CABE Guidance indicates that a DAS should describe and justify the essential features of the development, including the relationship with its context, outdoor spaces and visual appearance. Access is to be articulated into:

- Vehicular and transport links, including site access and relationship to public transport
- Inclusive access: how everyone can get to and move through the place on equal terms regardless of age or disability.

4.3.3 Greater consistency and detail is required in the DASs to implement Draft Replacement London Plan Policy 4.5 – London’s Visitor Infrastructure to demonstrate the integration of accessibility and hotel room design within the overall hotel development concept and expected operation and ensure that accessible rooms become an effective facility and an asset for the development.

6 Circular 01/06 (Communities and Local Government): Guidance on Changes to the Development Control System
7 CABE, Design and access statements, How to write, read and use them, 2006.
Table 4.1 - What to include in the Design and Access Statement

In London, the DAS and planning applications for all hotel development should as a minimum:

1. Demonstrate how the building/development will embrace inclusive design principles and promote accessibility. Specific reference will need to be made to the adoption of best practice, including guidance offered by British Standards BS8300:2009 and PAS 88:2008 as well as international examples. If these standards have not been achieved the reasons should be explained in the DAS along with what other measures have been adopted instead to achieve an accessible hotel.

2. State, where the applicant is part of a franchise or hotel group, how the hotel group or franchise design standards/manual respond to and achieve best practice in hotel accessibility.

3. Describe how the hotel layout helps orientation and facilitates independent use without the need for unnecessary assistance.

4. State the actual number and rationale for the adopted mix of accessible rooms making up the required 10% (see Section 5) and how the chosen room types have been integrated into the hotel business model and expected hotel category.

5. State the approach to construction which ensures that fixed or mobile support rails and hoists can be installed and serviced as required.

6. Illustrate on plan the distribution of the rooms within the development and describe how an adequate choice of room type and location is going to be provided.

7. Illustrate on plan the location of ancillary facilities, such as accessible toilets and changing rooms in the public areas, storage space for mobile equipment, etc.

8. Illustrate on plan a typical layout of each accessible room type, including furniture, support rails and equipment, wheelchair turning circles, etc. Each plan layout should be accompanied by a brief description of ‘fitness for purpose’, describing how each room type can facilitate use by disabled people as well as other customers.

9. Illustrate on plan the circulation routes and access to all hotel facilities without the need for assistance or unusual routing.

10. Illustrate on plan the car parking provision, in accordance with the highest of either the relevant borough standard or the London Plan (see DRLP Table 6.A Car Parking Standards).

4.4 Accessibility Management Plans

4.4.1 Management practices greatly affect the potential for disabled and older customers to use and enjoy hotel accommodation. These include, among others, getting the right information when booking a room, the way accessible rooms are allocated to non-disabled guests to retain availability and choice, parking provision policy, and so on. Specific policies may, for example, justify, and therefore allow, a high proportion of
accessible rooms of the smaller type and minimal fixed equipment by explaining how they are to be managed for the satisfaction of all guests.

4.4.2 Policy 4.5 of the Draft Replacement London Plan encourages the preparation of an Accessibility Management Plan (AMP) to ensure that management and operation of facilities are fully considered at the outset of the design and that accessibility and inclusion are monitored throughout the life of the development. Therefore an AMP is distinct from a DAS, which sets out physical provision and design rationale. The Plan would accompany the planning application in a similar way as a Travel Plan and should be modelled on the Access Strategies indicated by PAS 88:2008.

4.4.3 The level of detail to be provided by an AMP will depend on the type and scale of development being proposed. For example:

- Where the development is of a significant scale and the future operator is known, policy measures can be specific and guarantee that accessible rooms and facilities are fully integrated in the management practices and the business model of the hotel.
- When the development is significant in scale, but the operator is not known at the time of the planning application, the AMP will describe the assumptions made at the time of the design and development. There will be a requirement to submit additional details prior to occupation, preferably as a planning condition and/or legal obligation.
- The approach above could assist franchises, and introduce standardisation within a chain, with only development specific issues included prior to occupation. This will promote guest recognition and expectation of the availability of facilities and approach to inclusive services within a given brand.
- Smaller scale developments, with only a few accessible rooms, could simply produce a statement based on the recommendations of PAS 88, Visit England National Accessibility Scheme or other best practice available at the time of the development.
- All AMPs should be reviewed annually. A new AMP and DAS will be required with any major refurbishment or material change of the interior that triggers a new planning application.

4.4.4 The preparation stages of the AMPs coincide with those of the Travel Plan. The Borough Development Control, will be the main negotiators during the process, which we anticipate will include the following steps:

- At planning stage, it will be appropriate to agree the main terms of the AMP with the Borough planning officers. Pre-application reviews and discussion may be required for large applications.
- At Planning Submission stage, a final AMP will accompany the Design and Access Statement and be considered as part of the planning application.
- Post-permission and pre-opening, it may be necessary to update the AMP and include additional detail, in accordance with any conditions and / or planning legal obligations.
- Post-opening, the implementation of the Accessibility Management Plan will be rolled out. Monitoring, ongoing review and improvement is encouraged.
- Assistance from suitable organisations supporting travel for disabled people may be sought at any stage.

8 Transport For London, Guidance for workplace travel planning for development, 2008
**Suggested structure and topics**

4.4.5 Accessibility Management Plans should be seen as living documents aiming to provide a continually enhanced level of customer care to disabled guests and, at the same time, optimise the use of the accessible rooms.

**Table 4.2 – Accessibility Management Plan topics**

<table>
<thead>
<tr>
<th>Accessibility Management Plans a should identify, as a minimum, the approach and policy for:</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Nominating an individual as Accessibility Co-ordinator and outline of his/ her duties; preferably the Accessibility Co-ordinator will be a member of staff based on the premises;</td>
</tr>
<tr>
<td>▪ Training of staff in disability equality issues;</td>
</tr>
<tr>
<td>▪ Ensuring an inclusive approach to enquiries and booking procedures;</td>
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<tr>
<td>▪ Reserving rooms to disabled people (such as last-let basis);</td>
</tr>
<tr>
<td>▪ Allocating rooms for personal assistants (including policy on room charges);</td>
</tr>
<tr>
<td>▪ Providing welcome packs with detailed information of the room, its facilities and mobile equipment, including the contact of a trained advisor based within the hotel; familiarisation tours on arrival should also be provided;</td>
</tr>
<tr>
<td>▪ Allocating parking on the premises or alternative arrangements to facilitate older people or those with a Blue Badge;</td>
</tr>
<tr>
<td>▪ Design and maintenance of furniture and fittings that are part of the accessibility provision of a room;</td>
</tr>
<tr>
<td>▪ Providing, maintaining and reserving equipment, such as mobile hoists, hearing loops, shower and bath seats, etc.;</td>
</tr>
<tr>
<td>▪ Arrangements for making standard equipment accessible for example by indicating unimpeded access to curtains, and storage of spare linens within reach of a wheelchair user;</td>
</tr>
<tr>
<td>▪ Means of escape procedures;</td>
</tr>
<tr>
<td>▪ Encouraging feedback from disabled guests;</td>
</tr>
<tr>
<td>▪ Reviewing the AMP.</td>
</tr>
</tbody>
</table>

4.4.6 When the operator is unknown (such as in the case of speculative hotel development), the AMP should provide a description of the assumptions made when the hotel was designed, to cover the majority of the topics above. The AMP will then be integrated with the additional details prior to occupation.

**Implementation**

4.4.7 The nominated hotel Accessibility Co-ordinator will be responsible for overseeing and implementing the various measures and policies of the Accessibility Management Plan. In addition, they will be responsible for the following:

- Obtaining and maintaining the commitment and support from staff;
- Raise the standards of inclusion and accessibility and the profile of the AMP within the hotel;
- Liaising with other organisations supporting and promoting inclusive travel;
- Give support and information to disabled guests;
- Coordinate feedback, data and update the plan as required.
5 Accessible Hotel Rooms - Examples

5.1 Approach

5.1.1 This Best Practice Guidance suggests that it is possible to provide a range of room types to suit the business model and market segment of each hotel, and still design at least 10% of rooms to be accessible according to the descriptions below. This approach ensures that choice is broadened and that older or disabled people are not treated as a homogeneous group. This recognises that guests are all different people, individuals with all kinds of preferences, needs, and desires and that there is not a single solution to fit all. Most important, also, is the need to ensure that accessible rooms can be satisfactorily used by non-disabled guests for whom additional space and supporting equipment come as a bonus.

5.1.2 In this section, three examples of accessible hotel rooms of different sizes are provided to illustrate appropriate inclusive design and encourage variety and choice. Hotels could offer for example:

- All 10% of accessible rooms designed as standard rooms, modelled here as a Room Type B
- A budget hotel may choose to provide 5% standard accessible rooms (Room Type B) and 5% smaller accessible rooms (Room Type A), with the latter still suitable for wheelchair users but including only basic support rails and equipment. With appropriate management practices in place, the smaller accessible rooms could also be appropriate for a family with a child, for example by allowing the provision of a roll-away additional bed, when the room is not used by a customer in wheelchair.
- A luxury hotel may decide to provide all 10% of accessible rooms in the larger size, where half of these provide a full set of supports and equipment, while the other half (Room Type C) have only minimal additional fittings and can double up as a family room for four.
- Another hotel may choose a mix, with 5% of rooms being standard, and the rest by a combination of smaller and larger accessible bedrooms (Room Types A, B and C), all designed and managed for flexible use.

5.1.3 The design options for the rooms are closely linked to the way the room is to be furnished, equipped and managed. Easily interchangeable furniture, mobile equipment (such as shower seats or vibrating alarms) and good planning can be a very effective alternative to fixed supports and encourage flexibility as well as a comfortable and dignified experience for disabled guests. For example, a mobile hoist could be provided in lieu of a fixed ceiling track hoist if it is demonstrated that a mobile facility can be used in the room, can be stored and serviced in the hotel and provision is made for booking it prior to arrival. For this reason suggestions are made for the physical environment (normally the only consideration of planning application or building consent procedures) as well as fit out and management policies, both of which need detailing for the purpose of the DAS and the AMP.

5.1.4 Examples of how these rooms could be designed are provided below for inspiration, as Room Types A, B and C. The development of alternative designs which adopt the same principles and improve the offer should be encouraged as an essential element of best practice.

5.1.5 Building Regulations Part M:2004 , BS 8300:2009 and PAS 88: 2008 provide not only the framework for the design of accessible hotel rooms, but also some of the specific guidance on widths, gradients, glazing, etc and should always be used as reference. Wheelchair accessibility should be provided to all common parts of the hotels and to all
accessible rooms and wheelchair users should be able to get into but not necessarily stay in all other rooms.

5.2 Inclusive hotels: getting the basics right

5.2.1 A flexible design-led approach, based on disabled guests and aiming at making their visitor experience the same as everyone else, will greatly facilitate all other guests at the same time.

5.2.2 Hotel developments in London seeking Planning Permission should consider as a minimum:

1. Adopting a clear and easily understandable layout to the hotel as a whole and to the room itself. This will help all visitors to comfortably use the hotel facilities and removes the need for unnecessary assistance.

2. Offering an equal standard of use in all public areas of the building, including restaurant tables, breakfast areas, business centre, etc.


4. Arranging convenient parking to allow easy access to the premises. Provision of blue badge parking bays (whenever parking is provided) and convenient car or taxi pick-up/drop off leading to the front entrance of the hotel with no obstacles or obstructions.

5. Choosing best quality finishes and fittings, in keeping with the style of the interior décor of the hotel, for example by rejecting hospital standard fittings and crude features, whilst of course ensuring safe and comfortable operation.

6. Providing choice of room type and location, with also the opportunity to have connecting rooms in a proportion of accessible rooms. Offer choice of bath or (roll-in) shower or bed type.

7. Positioning furniture, switches, mirrors and other devices (such as kettle and cups) in obvious and rational places so that they can be easily found and safely used and so that they do not obstruct use of other facilities (e.g. furniture blocking access to the window so it is not possible to pull the curtains at night).

8. Incorporate the small and well designed items that can make a big difference such as embossed room numbers, electronic card operated locks or stick holders at restaurant tables;

9. Having adequate storage for equipment and mobile furniture.

10. Ensuring that information is available at all stages, pre-booking to arrival and that confirmation of arrangements made at time of booking (including availability of equipment) is provided in writing in advance.

11. Training of all staff members in customer care for disabled visitors; personal and appropriate service, in line with what the hotel provides for all guests, is as important as technical solutions.

12. Commitment to continuous improvement and encouragement of client feedback, particularly from the users of accessible rooms.
5.3 **Accessible rooms in general**

5.3.1 All accessible rooms should adhere to Part M of the Building Regulations and adopt best practice. It is suggested that all rooms provide the following, as a minimum:

**Table 5.1 – Accessible Hotel Rooms features**

<table>
<thead>
<tr>
<th><strong>Physical environment</strong> – to be considered in the Planning Application (including the Design and Access Statement) and Building Consent Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Wheelchair accessibility;</td>
</tr>
<tr>
<td>▪ Sufficient space around all doors for operation from a wheelchair: minimum 300mm leading edge to all doors;</td>
</tr>
<tr>
<td>▪ Bathroom layout that is rational and allows for wheelchair circulation;</td>
</tr>
<tr>
<td>▪ Well designed support rails by toilet and bath or shower, aiming for minimal visual intrusion;</td>
</tr>
<tr>
<td>▪ Level shower which is open or with easy to use door;</td>
</tr>
<tr>
<td>▪ Toilet and basin that are comfortable to use for all guests, whether disabled or not;</td>
</tr>
<tr>
<td>▪ Details to be reviewed as part the Building Consent to include: switches, taps and other controls that are easy to operate; multi-sensory alarm and emergency pulls; double height spy-hole with wide angle viewer; card activated locks.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Fit out and equipment – to be considered in the AMP</strong></th>
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<tbody>
<tr>
<td>▪ Bed on feet to allow use of mobile hoists;</td>
</tr>
<tr>
<td>▪ Choice of bed type, mattress and pillows;</td>
</tr>
<tr>
<td>▪ Wardrobes with adjustable or double height clothes rail;</td>
</tr>
<tr>
<td>▪ A choice of essential equipment available at booking time: e.g. mobile hoists, bath board, shower or bath seats, etc.</td>
</tr>
<tr>
<td>▪ A choice of desirable equipment available at booking time: e.g. vibrating alarm clock, choice of TV remote control, etc.</td>
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</table>

<table>
<thead>
<tr>
<th><strong>Policy and management – to be considered in the AMP</strong></th>
</tr>
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<tbody>
<tr>
<td>▪ Room booking policy to ensure reasonable availability is kept for disabled people;</td>
</tr>
<tr>
<td>▪ Information about the room and equipment reservation made possible through normal booking channel and through direct enquiry with hotel;</td>
</tr>
<tr>
<td>▪ Staff training and good customer care during booking, at arrival and during stay;</td>
</tr>
<tr>
<td>▪ Parking policy which facilitates disabled guests;</td>
</tr>
<tr>
<td>▪ Policy for booking and facilitating use of taxis and other accessible public transport;</td>
</tr>
<tr>
<td>▪ Ensuring minibuses or shuttle buses provided by the hotel are accessible;</td>
</tr>
<tr>
<td>▪ Commitment to continuous improvement through an Accessibility Management Plan;</td>
</tr>
<tr>
<td>▪ Escape plans which respect dignity of all guests</td>
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</tbody>
</table>

5.4 **Example: Room Type A – Basic Accessible Room**

5.4.1 This basic accessible room is space efficient (requiring approximately 20-26sqm) and appropriate to those ‘no-frills’ establishments where a small room size and space optimisation is critical to business success. According to the style of the hotel, this room may have only essential furniture and equipment.

5.4.2 Not all disabled guests will find this room suitable to their needs, as circulation, support rails and transfer space will be kept to a minimum.
5.4.3 It is recommended, therefore, that this room type is complemented by 5% of all rooms to be of the Standard Accessible Type. Adoption of a high proportion of this room type may trigger additional requirements in terms of mobile equipment and additional justification and monitoring of the Accessibility Management Plan (see Section 4).

5.4.4 This room could be fitted with a foldable/roll-away bed and used as a family room when no disabled guest requires it. It is therefore suggested that Basic Accessible Rooms entirely replace the family rooms in a budget or ‘no frills’ hotel.

5.4.5 The design emphasis will be on simple layout and well integrated equipment. Key features include:

- A rational layout and essential wheelchair circulation.
- Wet room with roll in shower.
- Sufficient space around the basin to accommodate towels and toiletries within easy reach of a person in a wheelchair.
- Essential wardrobes or open clothes-rail reachable from a wheelchair, even when the hotel does not provide such furniture in the non-accessible rooms.
- Minimal furniture like an easy chair or desk, only if normally provided in other rooms.
- Potential to directly connect to the adjoining room, if it is the practice of the hotel to provide connecting rooms elsewhere.
Figure 5.1: Possible layout of a basic accessible room – Room Type A with shower

- **COMMON FEATURES**
  1. 3000mm offset to all doors
  2. 800mm clear effective opening to main entrance (925mm if corridor is less than 1500mm wide)
  3. 623mm bathroom door
  4. Min 1200mm circulation route
  5. 1500mm clear approach to balconies. Doors clear effective opening 800mm
  6. Plug socket to re-charge electric wheelchairs/scooters

- **ROOM TYPE SPECIFIC FEATURES**
  1. Storage/Furniture zone (Additional)
  2. Easy access bathroom for use in type A room (To Lifetime Homes standards)
  3. Walls designed to take grab rails & shower seat at short notice
  4. Level access shower
  5. Fittings to allow alarm pull cords to be retrofitted at short notice

Scale (mm)
5.5 **Example: Room Type B – Standard Accessible Room**

5.5.1 This room is a well designed version of what is currently intended as an accessible room. It is approximately 26-30sqm in size. It is suggested that 5% of all rooms should be provided as Standard Accessible Rooms.

5.5.2 Unlike Room Type A and C, Standard Accessible Rooms should be fully equipped with all the fittings necessary to facilitate use by people with limited mobility. Careful design should minimise the visual intrusion of fittings specifically aimed at disabled people, and ensure that the room can be comfortably used by all guests when disabled visitors do not require it.

5.5.3 Provision can be made to use this room as a family room, for example by adding roll-in or foldable beds.

5.5.4 The characteristics of this room are:

- A rational layout and comfortable wheelchair circulation.
- Well designed and easy to reach furniture, including a wardrobe/ open clothes rail and shelves or drawers. An easy chair or workstation would be desirable, if normally provided in other rooms.
- Fully accessible bathroom, with adequate transfer space by the toilet and bath and all associated support rails.
- Choice of right or left transfer, double and twin beds and connecting rooms, as well as bath or shower.
- A proportion of Standard Accessible Rooms should also have fixed ceiling track hoists, to satisfy the best practice requirement of BS 8300:2009. At least one room in every hotel should be provided – see www.changing-places.org.

5.5.5 Adequate policies should be in place for the provision of additional equipment to support disabled visitors and to ensure that priority availability is guaranteed. Policies will be described and justified in the Accessibility Management Plan (see Section 4).
Figure 5.2: Possible layout of a standard room – Room Type B with shower

- **COMMON FEATURES**
  1. 300mm offset to all doors
  2. 900mm clear effective opening to main entrance (625mm if corridor is less than 1000mm wide)
  3. 825mm bathroom door
  4. Min 1200mm circulation route
  5. 1500mm clear approach to balconies. Doors clear effective opening 800mm
  6. Plug socket to re-charge electric wheelchairs/scooters

- **ROOM TYPE SPECIFIC FEATURES**
  1. Storage/Furniture zone (Additional)
  2. Future fixed ceiling track hoist system (Type to be agreed)
  3. Knock out panels/sliding door in bathroom
  4. Meets AD Part M in bathrooms including size & grabrails
  5. Meets AD Part M for alarms

*Alternative fixed seat with non-slip surfaces (Same dimensions as shower flip seat)*
Figure 5.3: Possible layout of a standard room – Room Type B with bath

- **COMMON FEATURES**
  1. 300mm offset to all doors
  2. 800mm clear effective opening to main entrance (625mm if corridor is less than 1500mm wide)
  3. 825mm bathroom door
  4. Min 1200mm circulation route
  5. 1500mm clear approach to balconies. Doors clear effective opening 800mm
  6. Plug socket to re-charge electric wheelchairs/scooters

- **ROOM TYPE SPECIFIC FEATURES**
  1. Storage/Furniture zone (Additional)
  2. Future fixed ceiling track hoist system (Type to be agreed)
  3. Knock out panel/sliding door in bathroom
  4. Meets AD Part M in bathrooms including size & grabrails
  5. Meets AD Part M for alarms
5.6 Example: Room Type C – Larger Flexible Room

5.6.1 This room is intended for all users. It could be a spacious room (between 35 and 45sqm) with more floor space than the minimum required by wheelchair circulation and offer a flexible layout which can be tailored each time for different needs: for example it could have a sofa and workstation to be used by wheelchair users as well as business travellers, or it could be laid out for families by converting the sofa into additional beds. It could therefore replace a premium or family room in a three-star hotel. In a luxury hotel, where rooms are normally larger, this type of room will only have minimal differences to other rooms.

5.6.2 The bedroom and bathroom should allow easy circulation by wheelchair or by mobile hoist. Only essential supports and grab rails will be provided, but will be complemented by a range of mobile equipment, such as a bath board or shower seat to be made available upon request.

5.6.3 The design emphasis, therefore, will be on simple layout, flexible use and mobile furniture or equipment. This type of room should offer:

- The opportunity to use mobile hoists, which could also be made available by the hotel in accordance with the advice in BS 8300:2009.
- Sufficient space to have double or twin beds on demand.
- Wheelchair accessible bathroom, with bath and roll in shower options being available.
- Double basin, at lower and standard height.
- Desk/workstation provision which allows use from a wheelchair.
- Bed adaptations, height, tilt if possible.
- Sofa and variety of cushions or removable easy chair/extra beds to allow family use.

5.6.4 This type of room needs to be associated with adequate policies for the provision of additional equipment to support disabled visitors and to ensure that reasonable availability is guaranteed. Policies will need to be described and justified in the Accessibility Management Plan (see Section 4).
Figure 5.4: Possible layout of a larger room – Room Type C with shower
Figure 5.5: Alternative layout of a larger room – Room Type C with bath and sofa bed for use as a family room
5.7 **Other rooms**

5.7.1 Embracing inclusive design principles would imply that most if not all rooms should be more welcoming to people of all abilities. Part M also requires that:

*Wheelchair users should also be able to visit companions in other bedrooms, for example when attending conferences or when on holiday with their families.*

5.7.2 Clearly wheelchair accessibility to all rooms would require a huge change for many operators, especially in the budget hotel categories, where the standard size of rooms is significantly smaller than even the most space efficient wheelchair accessible room. However, a small degree of change would greatly facilitate visitors with impairments or other mobility difficulty, such as age or heavy luggage. Below is a list of suggested features, which constitute good inclusive design, and which should be encouraged by planners and inclusion officers:

- Sufficient door and corridor widths and space around doors, including a minimum 300mm leading edge.
- Shower, when provided, to be step free with sliding door or open splash-boards;
- Bed on feet if space allows use of mobile hoists.
- Desk/workstation which allow use from wheelchair, if provided.
- Variety of cushions for sofa or easy chair, if provided.
6 Conclusions

6.1 Design priorities
6.1.1 This guidance seeks to ensure that best practice in the quantitative and qualitative provision of accessible hotel rooms is achieved in London. This is to be achieved through adoption of inclusion principles, by which hotel premises should be welcoming for all guests, whether disabled or not, and through better integration of accessibility provision in the business strategies of the hotel and its management. For this purpose it is recommended that the 10% accessible rooms requirement is addressed as follows:

- A variety of accessible room types are provided in each hotel to increase choice and closer matching of hotel standards.
- 5% of the rooms are designed as Standard Accessible rooms preference.
- Rooms are designed to be flexible, so that they can accommodate users with different requirements, including older people and families.
- Flexibility may be accompanied by removable or mobile equipment: appropriate management measures and storage should be considered.
- Fixed furniture items should be comfortable to use for all guests, whether disabled or not.
- Design of all accessibility fittings must be integral to the hotel interior design and style.
- Accessibility must go together with policies to ensure that booking, arriving, staying and leaving the hotel is straightforward for all customers, including disabled ones: this may involve providing detailed information of room facilities prior to booking or having arrangements in place for parking.

6.2 Planning process
6.2.1 This Best Practice Guidance supports the implementation the Draft Replacement London Plan policies. In particular, it aims to ensure that best practice in the provision, design and management of accessible hotel rooms is considered from the outset of hotel development and forms part of the planning application process. In particular, it requires that:

- Accessible room provision is fully integrated in the design of the hotel, by setting out specific topics to be addressed in a DAS.
- Management practices are fully considered at design stage and put in place and monitored throughout the lifetime of the development, through the preparation of an AMP.

6.2.2 DASs should always accompany planning applications for new development or refurbished hotel accommodation in London. They are a very helpful tool for assessing best practice in hotel design and the provision of accessible rooms, as they are designed to link general development principles to final detailed designs.

6.2.3 Policy 4.5 of the Draft Replacement London Plan encourages the preparation of an AMP to ensure that management and operation of facilities are fully considered at the outset of the design and that accessibility and inclusion are monitored throughout the life of the development. The Plan would accompany the planning application in a similar way as a Travel Plan and should be modelled on the Access Strategies indicated by PAS 88:2008.

6.2.4 The level of detail to be provided in the DAS and AMP will depend on the type and scale of development being proposed and details and suggestions are provided in this BPG.
6.3 Useful links / documents

2. British Standard 8300:2009 Design of buildings and their approaches to meet the needs of disabled people - Code of Practice
6. The principles of inclusive design, CABE September 2006
10. Planning Policy Statement 1 (PPS1), Department for Communities and Local Government, February 2005
12. Touche Ross, Profiting from opportunities, 1993
13. Europe for All, Information and marketing on accessibility, 2008
15. LOCOG, Accessible Transport Strategy, May 2008
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Vietnamese
Nếu bạn muốn có bản bản tài liệu
này bằng ngôn ngữ của mình, hãy liên hệ theo số điện thoại hoặc địa chỉ dưới đây.

Greek
Αν ζητείτε να αποκτήσετε αντίγραφο του παρόντος
εγγράφου στη δική σας γλώσσα, παρακαλείστε να
επικοινωνήσετε τηλεφωνικά στον αριθμό αυτό ή της
δρομικά στην παρακάτω διεύθυνση.

Turkish
Bu belgenin kendi dilinde
hazırlanmış bir nüshasını
edinek için, lütfen aşağıdaki
telefon numarasını arayım
veya adresce başvurunuz.

Punjabi
ਨੇਵਾਂ ਹਿੰਦੀ ਸੰਗਠਨ ਦੀ ਚਲੀ ਨੰਬਰਕੀ ਰੂਪਾਂ
ਦਾ ਕਸ਼ਤ ਕੀਤੇ ਹਨ.
ਅਤੇ ਰੀਹ ਦਾ ਤੰਤਰ ਦੇ ਅੱਠ ਦੇ ਅੱਠ ਸੜਕ
ਵਿੱਚ ਪੱਕ ਹੋਣ ਲਈ ਮੁਕੱਦਮਾ ਲੜੀ.

Arabic
إذا أردت نسخة من هذه الوثيقة باللغة، يرجى
الاتصال برقمه الهاتف أو مراسلة العنوان
 أدناه

Gujarati
સ્થળ્મ તથ્યો અથવા સંસ્થાઓના નક્કી તમામી ભાષા માટે
વિમાન સ્થલ્યો કરવો, તે કરી શકી આપેલ નંબર, ઉપર
લખેલ કરો અને વધારે દીનામાં સંદર્ભ સાધો.