IS THE HOTEL FOR THE ELDERLY THE NEED OF SLOVENIAN TOURISM?

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Abstract
This article highlights the answer to the question »Is the hotel for the elderly the need of Slovenian tourism?« Nowadays, it is clear that the familiarization with the needs and understanding of the behaviour of a consumer – an elderly customer – contributes to higher business success, therefore to better and less risky business decisions at all levels of the organisation. The proportion of elderly population is growing; elderly people are a heterogeneous group of people who differ one from another according to their health and functional status, personal characteristics as well as their socio-economic situation. Although a group of elderly people can be quite heterogeneous, it is, however, important to take into consideration some of their characteristics, which have to be adapted to their needs. According to the raising of the retirement age, hotels for the elderly have to offer services to people aged 50 and above, which means that such hotels should not sell vacation arrangements to people younger than 50 years, ensuring the peace required for the elderly. Using a qualitative study, namely a survey questionnaire, we evaluated whether the elderly wanted a hotel which would offer services only to people aged 50 and above; what kind of service they would want and under what conditions they would choose such a hotel. This is a relevant contribution, since it scientifically highlights the understanding of elderly passengers, taking into account their needs and expectations in using tourist services.

Key words
hotel for the elderly, elderly, offer, services, needs

INTRODUCTION

Within this article, we will try to answer the question »Is the hotel for the elderly the need of Slovenian tourism?«. Our research interest focuses on the question whether the elderly want a hotel which would offer services only to people older than 50 years, what kind of supply they want and under which conditions they would choose such a hotel. This is a relevant contribution, since it scientifically highlights the understanding of elderly passengers, taking into account their needs and expectations in using tourist services. First part of this paper presents some facts (concepts, phenomena) presented in the literature, while the other part presents the results obtained by a qualitative research. Finally, the discussion and conclusion will answer the research questions, and, based on the research result, we will introduce suggestions for further work.

1 CHARACTERISTICS OF THE ELDERLY

Pursuant to the definition given by World Health Organization (WHO), most of the countries accepted the chronological age of 65 years and above as a definition of 'elderly' or older person. The amount of older people in Slovenia as well as worldwide has been increasing. In early 2013, there were 17,1 % people older than 64 years (352.000 people). Five years ago, number of the elderly in Slovenia was reduced by exactly one percent. /1/. In 2011, there were 680 million people above the age of 60 living
on our planet, however, this number is expected to rise up to 2 billion by 2050. For now, the ageing of the population is the most evident in Europe and North America; soon this problem is likely to occur on the areas of Asia and Latin America as well. Science that studies the elderly is called gerontology. The word has its origin in Greek and defines a research branch which studies ageing processes in health, psychological as well as sociological sense. The word 'geriatric' also originates from Greek and refers to medical sense of gerontology. It is a science of illnesses (diseases) in elderly. Supposedly, causes for the fact that the elderly suffer from several different illnesses at the same time are decreased tissue regeneration, lower elasticity and consequences of previous diseases. Ageing is not a disease, but a normal physiological process. The basic feature of this process is slowing down of different processes and reduction of different system organ class functions, and thereby functions of the whole organism. Due to the impoverished organ functions, disease in elderly may cause more serious and longer lasting defects than in younger people. There are little diseases that only occur in the old age, however they are more likely to occur in the old age, which results in the accumulation of chronic diseases.

2. THE ADJUSTMENT OF SOCIETY TO THE AGEING OF POPULATION

Malačič divides consequences of the ageing of population to demographic, economic, social, psychological, cultural, institutional and political consequences. Slowly, labour market is adjusting to them. Policy is adopted referring to later retirement and the raising of retirement ages.

Supply of different educational programmes for the elderly has been adopted due to the fact that population is ageing. Therefore, several programmes within universities of the third age and free time activities within a framework of day centres are offered to the elderly. Also websites are in an increasingly wide range intended for the elderly, etc. Quality living in the old age, healthy and active ageing are also the objective of the project, entitled Age-friendly cities, which was developed in 2005 under the World Health Organization.

In order to become effective, these supplies have to adjust to users with respect to the changes in the process of ageing. Hotels intended for the older population present an evolving area. In our country there already exist a few hotels that follow this trend. Within next chapters, the paper presents two of them.

THE DELFIN HOTEL IN IZOLA

The 3-star hotel offers 219 rooms with balconies (www.hotel-delfin.si). It is a hotel managed by Slovene Federation of Pensioners’ Associations (SFPA) (http://www.bizi.si). As already clear from the advertising, target group of guests are the elderly. The presentation of the hotel is also available on the webpage seniorji.si, which is intended for the older population (www.seniorji.info). Pensioners are also given discount on the accommodation. Photos as well show that the hotel aims for the older guests. There is a total of 27 photos on the web page. Most of them (17) present rooms, hotel, food, etc. In 8 photos there are the elderly, while younger generation is only represented in 2 photos (by a child and a young lady in a beauty salon). Twice a week the doctor visits the hotel as well. Within the hotel there is also the hairdresser’s and a private clinic where physiotherapy is offered. Therapeutic exercise is performed at the pool and at the gym (led by a physical therapist). They also offer nine-pin bowling, bocce, tennis playground, beach volleyball; and hiking poles or bicycles for rent (www.hotel-delfin.si). Generally, the Delfin Hotel supply does not differ significantly from the supplies of other hotels.

THE HOTEL VIVAT IN MORAVSKE TOPLICE

This hotel cannot be characterised as a hotel which aims for the older population of guests. However, it is interesting for being completely adjusted to movement-impaired persons, and the first hotel in Slovenia adjusted to persons suffering from hearing impairment. Thus hotel reception holds an inductive loop, which enables hard of hearing persons the communication with the receptionist with the help of hearing aids. In rooms there are light bells, electronic TV loop and analogue alarm clock with a vibrating pillow. Conference rooms also offer inductive loop which helps to improve following oral and audial presentations to hard of
hearing persons (www. vivat.si). These measurements facilitate stay to all movement-impaired and hearing-impaired persons. Older population suffer from more symptoms compared to other population due to higher disease rate. Among 1000 citizens in the USA, there are 37 hard of hearing person of the age 45 and less; among people aged 45 and 64 there are 141 hard of hearing persons; among people older than 65 years there are even 321 hard of hearing persons /10/. This means hearing impairment is more frequent among older population, and consequently, hotel adjusted to persons with hearing impairment would be even more interesting for the older guests especially.

Hotel also provides a special senior discount for pensioners. Since this is a health resort, they also offer a pool filled with thermal water, saunas, wellness and health services (treatment of rheumatic diseases, treatment of orthopaedic patients, treatment after injuries and of urological patients) (www. vivat.si).

The hotels discussed above have already made a step towards adjusting to the ageing population. However, they do not consider all the changes connected to the ageing since they are intended for a wider guest population after all. Therefore the concept of the hotel presented within the paper is intended and adjusted to older persons only.

2 GUEST SATISFACTION

Nowadays, guest satisfaction is extremely important, since guests are not satisfied only by the thought that they are on a vacation or a business trip, but they want to be given more attention during their stay. Beside the fact today’s guests are getting more and more educated, they also seem to notice all the details that could have been hidden by hoteliers 10 years ago. By that we refer to cleanliness, kindness, the performance of individual service. In short, we can conduct that guest are becoming increasingly demanding. If we asked coincidental persons what, for instance, a quality hotel meant to them, most of them would name a five-star hotel as a response. However, nowadays quality is not defined in such a way. Hoteliuers have to be aware of the fact that the guest’s perception of service quality is the only thing that matters at the end. Guests compare offered service or a product with their expectations. If the service meets their expectations, they consider it a quality service. If not, the service is considered poor. Dissatisfaction will occur if actual service is under the expectations. Therefore, guest satisfaction or dissatisfaction are final results of a subjective process of evaluation. Hotel workers themselves have the greatest potential to contribute to guest satisfaction. The important role is played by the management of the hotel, since they are the ones who have to introduce and perform particular standards, enable further education of the workers; that is to perform annual courses on novelties that occur on tourism market. All that can contribute to even higher guest satisfaction. Communication as well is of great importance by ensuring a satisfying experience with the service. Negative experiences are normally the result of inexpertness (lack of knowledge, competencies) and unreliability (mistakes in service performance). Guests do not evaluate service only after the process, but meanwhile as well. Consequently, the occurrence of service satisfaction or dissatisfaction has to be observed in many ways, namely by different studies comparing general (dis)satisfaction and (dis)satisfaction with service itself. We also have to consider the environment where the service is offered. This concept refers to a physical environment where the service is performed. Functional and aesthetical attraction are of great importance. The higher the perceived guest’s control over the service, the higher is the possibility to reduce potential sources of a guest’ dissatisfaction. Generally, the interaction between participants in service exchange (guests, contact staff) is a dominant source of creating dissatisfaction with a service. It is known that guests compare whether their expectations are in accordance with their real experience with the service and the way the service is performed. Based on that evaluation the guest will be satisfied or dissatisfied. Exceeding and failing to meet expectations: At the airport of Mahon in Manorca one of the employees drove from the runway to the air terminal and back several times a day. When doing that, he brought one of the passengers the jacket he had forgotten on the plane; some other time he brought a bottle of alcoholic drink to the same passenger that had forgotten it in a shop at the airport.
This is considered a service that exceeds normal expectations of a passenger. This could be compared to a well-known hotel that refused to meet the requirements of a guest who came late to the hotel and wanted to order a sandwich to his room, with the explanation that the staff have been preoccupied. The guest was not offered: an alternative solution, an apology, moreover, they did not express a concern for the guest’s wishes and welfare. The expectation what happened and how it should have happened presents a core of the understanding of the user’s satisfaction.

3 ACHIEVING QUALITY SERVICE LEADS TO THE RECOGNITION OF THE NEEDS, ASPIRATIONS AND EXPECTATIONS OF GUESTS AND TOURISTS

Every person has their hierarchy of needs, which are, after being fulfilled, followed by wishes and expectations. Needs are psychological and physiological states that have to be satisfied in order to achieve the state when a person feels healthy and pleased. Needs can be divided into: basic or physiological, needs for security, social needs, personal needs and needs for self-affirmation. Aspirations and expectations present emotions, knowledge and actions that make a person do something that makes them happy with a goal to satisfy their needs. Aspirations and expectations are progressive, therefore they grow, meaning that people will want and expect at least the quality level they are used to in their everyday life. An example for aspirations and expectations is a colour television that you have at home, but when you come to a vacation place, in your room there is only a black and white television, or there even is not one. From the tourism worker’s point of view, the fulfilled expectation has a different content than from that of a free time coordinator. A smile could be given as an example. For a tourism worker, a permanent smile, that shows a tourist they are welcome in a hotel or at a tourist destination, is of great importance. For a free time coordinator, on the other hand, only occasional smile is important, namely a smile while greeting or asking questions. A tourist does not expect a smile by a free time coordinator, however, when receiving one, they get a feeling they are welcome in a hosting country, which also has highly professional employees. What is important in creating a hospitable and excellent service is meeting the unexpected. The content of the unexpected is hidden in details differing based on a service activity performed. Quality in tourism is shown by correspondence of expected and actually perceived service by a tourist. When a tourist’s expectations connected to service and their perceived service comply, the quality will remain there. However, when the two differ, it comes to so called quality gap, size of which will define the level of insufficient quality of a service. Nowadays, managing the complete quality is one of the most important, if not the most important fact of the contemporary science of management and management practise. Considering the fact I have been dealing with hotel management and tourism theoretically as well as practically for almost two decades, which present important branches on the area of service activities, I have decided to present quality management in hotel management and tourism. Managing quality on the area of service activities, especially in tourism and hotel management, is in many respects different than the complete quality in production of products. Service possesses some features that are not observed in a product: the intangible nature, simultaneousness, short duration and diversity. Beside these, service in tourism and hotel management has some other features as well: it is assessable; the assessment depends on the assessor and a situation which the assessor is facing; it can be sold but not wrapped in paper; it cannot be standardised, service users (guests) are different; service together with catering or tourism products form an integral whole; personal contact with a guest, namely the attitude towards a guest or a tourist is of great importance.

4 DETERMINATION OF QUALITY

One of the fundamental values customers expect from suppliers is high quality of products and services. For most of the people, average quality is not enough. Kotler /11/ claims that companies that want to stay on the market have to accept the concept of a comprehensive management of quality. It is a comprehensive organizational approach based on non-stop quality improvements of processes, products
and services of the company. According to expert opinion, directors of companies as well, quality is the best guarantee for customer loyalty, the firmest defence from foreign competence and the way to a long term growth and income. Quality of products and services as well as customer satisfaction are tightly connected to the profitability of a company. High quality level leads to higher satisfaction of customers, which enables the company ranking higher prices and (often) also lower costs. Jack Welch, the director of a company, named General Electrics, instructed his employees about quality with a simple sentence: »Quality fluctuation is bad«. But what exactly is quality? The concept of quality has been tried to be explained and determined by several experts resulting in many different theories within the literature. Some define quality as »being suitable for use«, »adjusting to changes«, »reliability«, etc. Most frequently used is a definition given by American Society for Quality Control, that says: »Quality is a whole of the characteristics of a product or service that bear on its ability to satisfy stated or implied needs«. It is definitely the definition that focuses on a user /12/, /13/. Jones and Lockwood /14/ define quality as a sum of functions and features of a product or a service that has a capacity to satisfy certain needs. If we understand quality as a sum of service features, which a certain need can be satisfied with, tourism service quality can be defined as a consistency of a service with the expectations of a tourist. Beside the definitions mentioned above, it is urgent to determine the quality in tourism. Quality in tourism denotes the consistency of expected and actually perceived service from a tourist's point of view. When a tourist's expectations about a service and the perceived service comply with each other, the quality remains there. However, when the two differ, it comes to so called quality gap, size of which will define the level of insufficient quality of a service. Nowadays, managing the complete quality is one of the most important, if not the most important fact of the contemporary science of management and management practise /15/. Quality and customer's satisfaction have become increasingly important all over the world. Social certificates of recognition contribute to the improvement of quality and operating activities of organizations. The aim of these certifi-
cates is to encourage companies (enterprises), institutes and other legal persons as well as state authorities to introduce systems of a modern, effective and comprehensive quality achievement, as well as to plan and perform a modern business process with the aim of ensuring competitiveness of products and services /16/.

Establishing and maintaining adequate level of quality also depend on systematic approach of the highest management of a company. In order to manage quality of a company more easily, several different systems and methods have been used (six sigma, 20 keys, balanced scorecards, benchmarking, business excellence model, comprehensive management of quality, cost optimization, re-engineering of business processes, constant improvements, learning company ...). Recently, use of several systems and their connection to the integrated management system have made it to the forefront. In Slovenia, companies have also been standing for a quality business operation, which is coordinated by internationally recognised methods, systems and standards. Companies can confirm a successful operation of quality system by gaining a certificate. Quality system operation is estimated by independent institutions (certification organs). In the last decade, quality systems have achieved a huge growth, resulting from the fact that they transformed from basic control activity in production and organisation of companies into one of the most important management functions. Nowadays, in most cases they present a constituent part of a strategy and organizational culture of a company. In recent period, more and more companies have become aware of the importance of quality and business excellence for products and services. However, it is anything but easy to achieve business excellence, and because of that companies that want to achieve certain quality level or business excellence have to pay a lot of attention to that /17/. A successful establishment of a quality system in a service company may particularly offer possibilities for improving service quality and customer satisfaction, productivity improvement, effectivity and cost reduction and higher market share, etc.
PRESENTATION OF RESEARCH, RESULTS AND DISCUSSION

Data was collected by the method of an interview. The survey was conducted on the basis of the answers of 7 respondents whom we had sent the survey questions which were answered via e-mail. The interview was conducted on a basis of the questions formed and ranked in advance, which were the same for all the interviewers.

DO YOU THINK THERE IS A NEED OF THE HOTEL FOR THE ELDERLY WHICH WOULD OFFER SERVICES TO PERSONS AGED 50 AND ABOVE?

WHAT SHOULD A HOTEL BE LIKE IN ORDER TO BE ACCESSIBLE TO THE ELDERLY? IN WHAT WAY ARE IN YOUR OPINION THE ELDERLY TAKEN CARE OF IN TOURISM? (ACCESSIBILITY, STAFF QUALIFICATIONS, CATERING SUPPLY, REGULARITY)? WHERE DO YOU USUALLY TRAVEL TO?

Presentation of the research results
WHAT SHOULD A HOTEL BE LIKE IN ORDER TO BE ACCESSIBLE TO THE ELDERLY?

Ana (65 years old, The Association of Pensioners Moravče): From movement-impaired people’s point of view, who need a wheelchair, there could be less stairs in hotels. Instead of that there should urgently be a wheelchair ramp so that a movement-impaired person would be able to drive to the reception. There should not be heavy doors as well. In the reception a part of the counter should be set at a lower position so that a person in a wheelchair would be able to communicate normally with the receptionist. The windows in rooms should be placed lower, and so should be seats in the shower so that a person with disability could sit on it. Rooms should be in mild colours for persons with mental disorders. It is also important that rooms should only be partly isolated in order to achieve there would not be too much noise, since people suffering from mental disorders can get afraid when under pressure or when hearing unusual sounds. For people with celiac disease it is the most important that cooks in the restaurants know the disease and are competent to prepare broad selection of food. Similar can refer to any other diets. Milka (63 years old, The Association of Disabled Persons Prevalje) says: The deaf and hard of hearing people could benefit from having a person mastering the sign language near them; also pictorial or written representation of instructions could contribute to a better understanding. Blind and partially sighted persons could use bold inscriptions, the enlargement of letters, audial instructions, menus in Braille, separately (audial as well as well as touch support) labelled floors. For movement-impaired persons who use a wheelchair accessibility is of particular importance. Floor numbers should be placed lower in elevators, wheelchair ramps should be arranged in the way that enables a movement-impaired person to move to the door. Elevators at pools are of key importance in a health spa; doors in hotel rooms should be large enough; there should be lift beds, cupboards instead of wardrobes, fencing around the walls, a special safety catch in the bathroom; moreover, a toilet, a mirror (placed at a lower position) and a seat in the shower should be arranged in an appropriate manner. In restaurants there should be enough space between tables so that a person in a wheelchair could move smoothly past other people. The height of the tables should also be adjusted; counters at the reception and in the bar should be placed low enough to enable a person sitting in a wheelchair see a person on the other side of the counter. Machines should be placed low enough to enable a person in a wheelchair to use them. There should not be doors with high thresholds either. A protection should be placed on electrical sockets and on the windows on higher floors. In a hotel/a restaurant there should be chefs who know exactly what kind of food can be prepared for people with celiac disease. Food should also be adjusted to diabetics. It is also desired to have access to medical help near the hotel, which is important for all the persons with special needs, especially if they are of weak health. Olga (69 years old, Diabetes Association Velenje) says following: From the movement-impaired persons’ point of view the car park has to provide the labelled, reserved parking places, accessible surfaces and paths without differences in altitudes, or there should be alternative solutions provided (wheelchair ramps, lifting platforms) beside potential
stairs; entrance to the hotel should be suitably designed (a cover, automated door, flat surface in front of the door …). The reception counter should be designed appropriately (partly lowered to enable normal communication); by the central toilets there should also be a toilet for disabled persons, as well as the accessibility and the use of all common use areas, such as dining room, social rooms should be provided (level access, wide enough corridors, wisely designed equipment …). Storeys should be connected by correctly dimensioned elevators, rooms should contain adjusted and flexible equipment, such as selection of the bed, bathroom equipment, accessibility of all devices and lowered threshold of the balcony doors. Mira (70 years old, Association of Blind and Partially Sighted Maribor) claims that a hotel should provide oral and Braille designation of an elevator; menus should also be available in Braille or in the auditory form, as well as the numbers on the doors should be in Braille. Partially sighted persons would also require the beginning and the end of the glass doors labelled by vivid colours. Menus and notification should also be large printed. Jožica (72 years old, Association of Pensioners Maribor) suggests that there should be wheelchair ramps placed near the entrance to enable the access to the hotel. In case where there is no elevator there should be a room on the ground floor that would be adjusted to people in wheelchair, namely with a raised bed, wider door and adjusted toilets, which require a raised toilet, a lift and adjusted shower area.

IN WHAT WAY ARE IN YOUR OPINION THE ELDERLY TAKEN CARE OF IN TOURISM? (ACCESSIBILITY, STAFF QUALIFICATIONS, CATERING SUPPLY, REGULARITY)?

There is still much to be done – beginning with hotel stays and following by offering larger rooms that fall into higher price range and should be regulated in correspondence with that. Regarding the accessibility, when booking the hotel stay it often happens that the hoteliers ensure the accessibility for movement-impaired persons, however, it may happen that a window, for example, is often placed in the position that is impossible to be reached by a movement-impaired person. They also state that a hotel is accessible to blind and partially sighted persons; however, it often happens that there are not room numbers or floor numbers in elevators in Braille. There is a lack of qualified staff, namely people who master sign language, resulting from the fact that it does not bear employing them. This language is extremely difficult to be learnt, so employing a person who master the sign language would present a significant additional expense. There should at least be a possibility of hiring an interpreter in case one of the guests needed such help. Catering supply is also inadequate; there are no large printed menus. Internal infrastructure would already be sufficiently organised by not having stairs in front of the entrance to the hotel, or by arranging a wheelchair ramp which would enable a person in a wheelchair the access to the building. Considering the accessibility, I would like to expose that we always encounter one or other form of obstacles. In such cases, when this was not provided by the organiser or the supplier, these persons themselves have to find as safe as possible way to move to particular place or to particular sight. Tourism supply could be improved in many ways to benefit persons with special needs; particularly the accessibility to many a facility could be arranged in more appropriate way. Staff in tourism for the elderly or persons with special needs are underqualified, so these persons constantly need an accompanying person who they know well and who is competent to work with them. Regarding the catering supply, not all the hotels have appropriate adjustments, which is why choosing locations that are to the fullest possible extent adjusted to their inmates is a deliberate decision. In Slovenia, not enough attention is given to celiac patients. According to that, tourism workers would need more educational seminars, considering the fact that a chef in case they know about the disease but still prepare inappropriate dish, may answer for the patient’s problems, of course if it is the matter of a serious form of the celiac disease. With the respect to the last question they stated that persons with celiac disease should be offered appropriately labelled meals. It should be marked that the meal does not contain gluten, moreover, the ingredients consisting a meal and the label that a meal has been prepared under conditions that disable gluten contamination should be evident. Ex-
ternal appearance does not play the role for celiac patients. It is important that kitchen staff know the gluten free diet, its traps, and know how to prepare a delicious meal. This knowledge is not negligible for waiting staff as well. Considering the opinion of the interviewer, the access to tourism sights for persons with other disabilities is inadequate. More transport suppliers and more buses adjusted to people with special needs (having wheelchair ramps) and more wheelchair ramps for people in wheelchairs are required. There should also be more literature intended for the blind and partially sighted, and more interpreters for deaf and speech-disabled persons. I believe the access to tourism sights for deaf and hard of hearing persons is inadequate, because they are able to see, however, there is no one who could present more information about the history of a certain sight. I agree with the fact there are no tourism workers qualified to work with hard of hearing persons. Speaking of catering supply, I would remark that I am not familiar with the case where the supply would be adjusted to special needs – except of their own capacities. Hotels should provide the option of inductive loop for hard of hearing persons, and hiring an accompanying person mastering sign language – a language of deaf people’s hands. Mira (70 years old, Association of Blind and Partially Sighted Maribor): More effort could be put into improving the accessibility to tourism sights in many ways. It would already be helpful to colour the doors in vivid colours, or to label the paths so that a partially sighted person would be able to orient more easily. Milka (63 years old, Association of Disabled Persons Prevalje): I believe things are getting better on the area of accessibility to tourism sights. What we would need, are more access points for wheelchairs and better adapted public sanitation. In that respect I believe the problems with the accessibility in Slovenia have been decreasing, considering the higher number of lifts. However, there are sometimes cases when there are no wheelchair ramps to enable the access to facilities.

WHERE DO YOU USUALLY TRAVEL TO?

Ana (65 years old, The Association of Pensioners Moravče): In summer we usually go to the seaside in Izola, where bathing areas are accessible to movement-impaired persons. We also go to Bled, especially where the access is enabled. Once a year we go skiing. Last year we stayed at some apartments in Italy; there was properly arranged infrastructure for the blind, deaf and disabled persons; this year we went to Austria where the apartments as well as the cableway, which is especially designed for the elderly, were designed properly. Olga (69 years old, Diabetes Association Velenje): We usually travel with our association which organises excursions or trips considering eating limitations, namely appropriate diet gluten free food is offered to us. We do not need accompanying persons since our trip leaders are qualified for appropriate food selection. Staff that are planned to serve us food should be instructed about special food requirements, because they take full responsibility for the preparation of food, so that they will not harm guests due to lack of knowledge. Jožica (72 years old, Association of Pensioners Maribor): In the framework of our association there is preventive one week recuperation organised three times a year. The association also coordinates approximately five trips a year that I also attend. Mira (70 years old, Association of Blind and Partially Sighted Maribor): Regarding the fact we want to travel, our association organises trips for its group of persons with special needs. We also have accompanying persons qualified to guide a blind or a partially sighted person. A blind or a partially sighted person takes their assistant’s elbow, and the latter one takes care of the obstacles, tell the person where and when to step on a stair, talks about where they are walking and describes what they see. By doing so, they try to display the environment to the blind person.

DO YOU THINK THERE IS A NEED OF THE HOTEL FOR THE ELDERLY WHICH WOULD OFFER SERVICES TO PERSONS AGED 50 AND ABOVE?

Ana (65 years old, The Association of Pensioners Moravče): Since hotels are not adjusted to all the needs of the elderly, there is quite a significant need of the elderly hotel. Milka (63 years old, Association of Disabled Persons Prevalje): Hotels for the elderly should be located on locations the elderly like to go to, in short, hotels for the elderly are needed all over
Slovenia, not only on one location. Olga (69 years old, Diabetes Association Velenje): Hotels for the elderly present a considerable need of Slovenian tourism, therefore the Ministry should give incentives in this regard. There are no hotels for the elderly in Slovenia, and this is why we need them. They should only offer the arrangements to persons above the age of 50, meaning they should be adjusted to the elderly only.

6 THE PRESENTATION OF DISCUSSION AND FINDINGS

Participants in our survey pointed out that a hotel for the elderly should contain less stairs, instead, there should urgently be a wheelchair ramp to enable a movement-impaired person to drive to the reception. There should not be heavy door as well. In the reception a part of the counter should be set at a lower position so that a person in a wheelchair would be able to communicate normally with the receptionist. The windows in rooms should be placed lower, and so should be seats in the shower so that a person with disability could sit on it. Rooms should be in mild colours for persons with mental disorders. It is also important that rooms should be only partly isolated in order to achieve there would not be too much noise, since people suffering from mental disorders can get afraid when under pressure or when hearing unusual sounds. For people with celiac disease it is the most important that cooks in the restaurants know the disease and are competent to prepare a broad selection of food. Similar can refer to any other diets. They pointed out that the deaf and hard of hearing people could benefit from having a person mastering the sign language near them; blind and partially sighted persons could use bold inscriptions, enlargement of letters, audial instructions, menus in Braille, separately labelled floors; doors in hotel rooms should be large enough; there should be lift beds, cupboards instead of wardrobes, fencing around the walls, a special safety catch in the bathroom; moreover, a toilet, a mirror (placed at a lower position) and a seat in the shower should be arranged in an appropriate manner. In restaurants there should be enough space between tables so that a person in a wheelchair could move smoothly past other people. The height of the tables should also be adjusted; counters at the reception and in the bar should be placed low enough to enable a person sitting in a wheelchair see a person on the other side of the counter. Machines should be placed low enough to enable a person in a wheelchair to use them. There should not be doors with high thresholds either. The interviewers also stated that it is highly recommended to place a protection on electrical sockets and on the windows on higher floors. In a hotel/a restaurant there should be chefs who know exactly what kind of food can be prepared for people with celiac disease. Food should also be adjusted to diabetics. It is also desired to have the access to medical help near the hotel, which is important for all the elderly, especially if they are of weak health. The interviewers also emphasised that hotels are not adjusted to all the needs of the elderly, and because of that there is a significant need of the elderly hotel. Moreover, hotels for the elderly should be located on locations the elderly like to go to, in short, hotels for the elderly are needed all over Slovenia, not only on one location. Furthermore, hotels should only offer the arrangements to persons above the age of 50, meaning they should be adjusted to the elderly only.

The main question within this paper was »What should a hotel for the elderly be like in order to be accessible for the elderly?«. Based on the analysis we have also made a few suggestions for the improvements:

- When building the hotel itself, special attention should be drawn to wheelchair ramps in front of the facility; rooms as well should be arranged in a way that a person in a wheelchair would be able to move smoothly. A bathroom, a shower and a toilet should be properly equipped.

- Deaf and hard of hearing person would feel better in spaces which are more acoustic, namely rooms where there is not much noise and reverberation. Hotels should provide the use of inductive loop. They should have at least one employee who would master the sign language and would help deaf and hard of hearing persons by choosing their meals.

- Providing accompanying persons who would be willing to demonstrate the happening and to accompany the blind to dif-
different tourism sights would improve their stay. It would be effective if specific sights (such as museums and churches) had an audial guide which would enable the blind the visit without guidance. In information centres there should be booklets including basic data and sights description in Braille.

- For persons with mental disorders there should be an isolated room in mild colours available, which would have a relaxing effect on the person. The suggestion is to establish at least two hotels in Slovenia which would be completely adopted to persons with mental disorders.

- Persons with celiac disease should be offered food in every restaurants. Chefs and waiting staff should be familiar with the preparation of food.

- Allergic persons as well should be offered food in every restaurant as well. When taking orders, the staff would get familiar with the guest’s type of allergy; according to that information cooks should be able to prepare the food in the way it would not make any harm to the guest.

- Diabetics do not require special arrangements, they only need enough menus appropriate for persons suffering from diabetes.

- There should be enough diverse dishes provided for vegans and vegetarians.

7 CONCLUSIONS

Accessible tourism has many positive impacts on a national economy as well as on the people themselves. After all, people with special needs are just persons that only have limitations in particular areas. Like others, they have a desire to travel, see and discover new things and people. Why should that be impossible for them? Through the survey we have found out that the elderly like to travel very much, moreover, most of the associations organise trips and excursions for their members, so that they bring them to their centres which are adjusted, or they choose intentionally selected locations that are suitable for their members. We have found out that in Slovenia providing for the elderly is inadequate, especially considering the access to tourist attractions, as well there is lack of persons qualified for working with the target group. The interviewers point out that many improvements are still to be made, meanwhile, some of them observe that the position is improving. In Slovenia several institutions together with the suppliers are trying hard to improve tourist supply, since many associations actively participate in designing supply for persons with special needs. Reference should be made to ŠENT - Slovenian Association for Mental Health; their mission is to protect human rights and dignity of mental health service users, and psycho-sociological, employment and psychiatric rehabilitation as well as creating new workplaces for people at a disadvantage in the labour market (http://www.sent.si/). In Slovenia there are many options for a better adjustment of tourist supply for the elderly, furthermore, if we have a positive thinking about the elderly and accept them, we will appreciate what we are given in our lives; besides, we will be able to offer help more effectively to people who need more help or care in a specific segment, due to limitations they are facing. Reference should be made to the Hotel Vivat in Moravske Toplice that has a unique offer for the older population of tourists. It is the first hotel in Slovenia adjusted to persons suffering from hearing impairment. At the reception and the conference room they have set an inductive loop; in rooms they have established light bells, electronic TV loop, wireless headphone loop, and analogue alarm clock with a vibrating pillow (http://www.zveza-gns.si/dogodki/prvi-hotel-v-slovenijiprilojajoceobam). We have to know the reasons why the elderly chose not to travel. As the main reason, the elderly exposed health problems (41 %); followed by financial reasons (30 %); 19 % of them do not have desire to travel; 7 % of them do not have time for travelling; the rest of them mentioned other reasons (SURS, 2012). Based on that reasons, it is clear that a hotel which additionally offered medical care as well, and staying in which would preferably be covered by the health insurance, would encompass 70 % of the reasons that keep the elderly at home.

Notes

Mateja Brezner-Stegne: IS THE HOTEL FOR THE ELDERLY THE NEED OF SLOVENIAN TOURISM?

Media, Culture and Public Relations, 7, 2016, 2, 204-215

/4/ Ibid.
/6/ Ibid.
/17/ Ibid.
JE LI HOTEL ZA STARIJE OSOBE POTREBA SLOVENSKOG TURIZMA?

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Sažetak
Ovaj članak naglašava odgovor na pitanje »Je li hotel za starije osobe potreba slovenskog turizma« Danas je jasno da je upoznavanje s potrebama i razumijevanje ponašanja potrošača – starih osoba - doprinosi većem poslovnom uspjehu, dakle, što vodi do boljih i manje rizičnih poslovnih odluka na svim razinama organizacije. Udio starih stanovništva raste; starije osobe su heterogena skupina ljudi koji se razlikuju jedni od drugih prema njihovom zdravlju i funkcionalnom statusu, osobnim značajkama, kao i njihovej socio-ekonomskoj situaciji. Iako skupina starih ljudi može biti vrlo heterogena, važno je uzeti u obzir neke od njihovih karakteristika, koje se moraju prilagoditi njihovim potrebama. Dob za odlazak u mirovinu se podiže, stoga hoteli za starije moraju ponuditi usluge osobama u dobi od 50 i više godina, što znači da takvi hoteli ne bi trebali prodavati aranžmane za odmor za osobe mlađe od 50 godina, osiguravajući tako mir potreban starijim osobama. Dob za odlazak u mirovinu se podiže, stoga hoteli za starije moraju ponuditi usluge osobama u dobi od 50 i više godina, što znači da takvi hoteli ne bi trebali prodavati aranžmane za odmor za osobe mlađe od 50 godina, osiguravajući tako mir potreban starijim osobama. Koristeći kvalitativnu studiju, odnosno anketni upitnik, ocijenili smo da li bi stariji htjeli hotel koji će ponuditi usluge za ljude u dobi od 50 i više godina; kakvu uslugu bi htjeli i pod kojim uvjetima da bi odabrali takav hotel. Ovo je značajan doprinos, jer je znanstvenim pristupom naglašava razumijevanje starihijih putnika, uzimajući u obzir njihove potrebe i očekivanja u korištenju turističkih usluga.

Ključne riječi
hotel za starije osobe, starije osobe, ponuda, usluge, potrebe