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Analysis of Development Potential of Health Resort Enterprises on the Example of Przedsiębiorstwo Uzdrowisko Ciechocinek S.A. in Aleksandrów County

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Key words: Health resort tourism, Polish spas, conditions for the management

Abstract

The purpose of this article is to present the key environmental conditions influencing the management of a health resort enterprise on the example of Przedsiębiorstwo Uzdrowisko Ciechocinek S.A. operating in the Aleksandrów County in the Kujawsko-Pomorskie Voivodeship. The article outlines the profile of the company and presents the most important environmental factors in the assessment of the authors, based in particular on statistical data. The considerations were based, among others, on the studies of the Central Statistical Office and the Voivodeship Statistical Office in Bydgoszcz. Global trends, which are currently noticeable on the market of tourist services, including health resorts, indicate a strong interest in the sector commonly referred to as "health tourism". This is determined mainly by the fact that the population is aging, the emphasis on prevention, a healthy lifestyle, spa and wellness fashion and increased awareness of health care, also among young people. These issues should form the basis for the creation of a comprehensive offer of spa, medical and tourist services. It is not possible to develop such an offer without raising the standard of facilities, without an increase in the quality and the diversity of services offered and close cooperation of health resort entities with local governments¹.

¹ Prepared on the basis of: Long-term Business Plan of Przedsiębiorstwo Uzdrowisko Ciechocinek S.A. for the years 2018-2022.

Introduction

The potential of Polish spas cannot be overestimated. Very well educated and experienced medical staff, richness of natural healing resources, the location of spas in attractive tourist regions of the country and a favourable price level of services are undeniable advantages to effectively compete with foreign resorts in the struggle for a commercial client interested in health tourism in the broad sense of this expression. Health resorts must be effectively managed and self-financed enterprises, stimulating the economic development of the region, developing innovative products and services and defining, together with the local government, the directions of development of a given place.

Health resort tourism should be an important element in the cooperation of scientific and research communities, higher education, business environment institutions, enterprises related to the medical industry and regional and local authorities. Only considering the above we can speak of a complete product under the name of "Polish health resort brand", which will be recognized in Europe and worldwide.

2. Basic information about Przedsiębiorstwo Uzdrowisko Ciechocinek S.A.

The beginnings of spa treatment - bathing activity under medical supervision - in Ciechocinek date back to the first half of the 19th century, when in 1836, 4 copper bathtubs were installed in the local inn, using natural brine water resources for treatment. Other important dates in the history of Ciechocinek are the years 1824-33 and 1859, when three brine graduation towers were built, and the year 1832, in which the full exploitation of the salt brewing plant began, which together with the graduation tower complex created a unique plant producing salt on an industrial scale. The main initiator of this undertaking is considered to be the then director of the Faculty of Industry and Craftsmanship Stanisław Staszic. In the course of the production activity, the therapeutic properties of brines and the therapeutic effects of brine graduation towers were discovered. This resulted in a gradual change in the character of the town from an industrial to a health resort, which with time began to play a leading role.

The systematic increase in the number of patients arriving in Ciechocinek after the opening of two bathing buildings made it necessary to adopt systemic solutions necessary for the further functioning of the health resort treatment in this place. In connection with this, by decision of the royal governor, in 1842 the first state institution was established to manage the local facilities and therapeutic activities - the General Committee for Procuring the Means for Development of the Mineral Waters Department in Ciechocinek with its seat in Warsaw. In 1850, the General Committee established the Temporary Directorate of Mineral Waters in Ciechocinek, which was transformed a year later into the Mineral Waters Management. The year 1881 brought further administrative changes. At that time, the collective control in the Management was changed to a one-man position of a paid director and the accompanying council. The first elected chairman of the council was Dr Roman Ignatowski

- the precursor of health resort treatment in Ciechocinek, while the first appointed director was Bolesław Raczyński. Over the years, thanks to the recognized therapeutic values and systematic expansion of the spa infrastructure, the rank of Ciechocinek has increased. In 1916 it was granted town charter.

In 1918 Ciechocinek regained independence, and the health resort as a whole was taken over by the Ministry of Health, which in 1919 established the State Resort Institution in place of the existing governing bodies. The interwar period was a time of great and intensive development of the resort. In 1935, Ciechocinek was able to accept as many as ca. 6.000 patients, and the State Spa Institute itself had at that time more than 400 bathtubs in four bathroom facilities. The year 1939 and the outbreak of the Second World War brought further changes in the functioning of the resort, the name of which was changed to Hermannsbad. The town served as a military hospital for the Germans, as well as a health resort, but only for German citizens.

After the liberation on 21st January 1945, the health resort was reactivated. Fortunately, the war did not cause great devastation, the most important objects for medical activity survived. In 1954, the Directorate of the State Health Resort changed its name to the State Enterprise "Uzdrowisko Ciechocinek". This name functioned until the end of 1998, when as a result of activities related to the commercialization of the company its name was changed to Przedsiębiorstwo Uzdrowisko Ciechocinek S.A. The State Treasury became the owner of the spa company. The company was entered in the commercial register in the District Court for the city of Włocławek, 5th Commercial Department on 31.12.1998 under the number RHB 1186 Division B. In December 2012 another ownership change took place in Przedsiębiorstwo Uzdrowisko Ciechocinek S.A., which became the property of the Kujawsko-Pomorskie Voivodship by way of communalisation.

Currently, the activity of Przedsiębiorstwo Uzdrowisko Ciechocinek S.A. is divided into 3 basic groups:

- 1) health resort treatment implemented in 4 sanatorium and hospital facilities (as a basic profile),
- 2) production activity carried out by Zakłady Produkcji Zdrojowej (Salt Brewery, Mineral Water Bottling Plant and Health Resort Mining Plant),
- 3) management of real estate owned by the company, i.e. the "Europa" commercial and residential complex in the town centre, the historic Bristol building with the Mineral Water Pump Room, the historic Palace in the Spa Park and the so-called "Dovecote", where, among others, employee apartments are located.

The article refers mostly to the main profile of activity, i.e. health resort treatment. It is not only predominant in terms of financial turnover, but above all it is associated with the biggest problems forcing managers to implement a number of strategic actions. In particular, it should be pointed out that the rates per person per day of stay financed by the National Health Fund have been maintained for years at the level not covering the actual costs incurred by PUC S.A. As a result, the company loses out on stays financed by public funds and has to invest in the development of other sources of revenue.

This requires far-reaching strategic decisions. The company itself, although operating in the form of a joint-stock company, depends on non-market factors. The problem signalled is a common problem, affecting basically all Polish health resort entities established as a result of communalisation².

Taking into account the criterion of its geographical location, Ciechocinek resort belongs to the group of lowland health resorts situated at an altitude not exceeding 200 meters above sea level³. The activity in the field of health resort treatment⁴ of Przedsiębiorstwo Uzdrowisko Ciechocinek S.A. includes treatment and rehabilitation of children and adults with the following health problems:

- 1) locomotor system: rheumatic diseases, post-traumatic diseases, congenital defects, muscle atrophy, spinal curvature, motor dysfunctions,
- 2) peripheral and central nervous system: paresis, paralysis, strokes, neuralgia, post-traumatic states, postsurgery states,
- 3) cardiovascular system: stable ischemic heart disease, hypertension, peripheral vascular diseases: atherosclerosis, Raynaud's disease, vascular neuroses,
- 4) upper respiratory tract: chronic bronchitis, larynx, pharynx, nose, sinuses,
- 5) metabolic diseases: diabetes, osteoporosis, obesity.

3. Conditions for the management of a health resort enterprise on the example of Aleksandrów County

According to the results of the research conducted by the Central Statistical Office for 2017, Aleksandrów County with Ciechocinek Health Resort ranks second in Poland in terms of the level of accommodation occupancy, which is 69.3%⁵, giving way only to Inowrocław County, where this percentage is estimated at 70.80%. It should be noted that in 2016 it amounted to 72.3%, which was the highest result in Poland⁶. Both analyses were made on the basis of data for the upper quintile group, i.e. 76 Counties with the highest occupancy rate of the accommodation base. A list of 8 Counties with the highest occupancy rate of accommodation is presented in Chart 1.

² I.e. in practice they have become the property of individual voivodships. The legal basis for this type of activities is Art. 4b of the Act of 30 August 1996 on *Commercialization and Privatization* (Journal of Laws, 2002 No. 171 item 1397 as amended).

³ Ministry of Health, Areas recognised as health resorts, from: J. Kraś, *Istota i znaczenie turystyki uzdrowiskowej w Polsce*, Seminare, Wydawnictwo TNFS, tom 29, Łomianki 2011, p. 151-152. According to this classification, the following health resorts are also distinguished: seaside resorts situated not more than 3 km from the sea; piedmont resorts situated at an altitude of 200 to 400 metres above sea level; mountain resorts situated at an altitude of 400 to 800 metres above sea level.

⁴ A health resort is a separate area which, in order to use and protect the natural therapeutic raw materials found there, has been granted the status of a health resort and within the territory of which health resort treatment is conducted. Pursuant to Article 34 of the Act of 28 July 2005 on resort health care, health resorts and health resort protection areas, the status of a health resort may be granted to an area which meets all of the following conditions:

¹⁾ has deposits of natural medicinal raw materials with proven therapeutic properties on principles specified in the Act;

²⁾ has a climate with medicinal properties confirmed in accordance with the rules set forth in the Act;

³⁾ within its territory there are spa treatment facilities and resort medical equipment, prepared to conduct health resort treatment;

⁴⁾ meets the requirements for the environment specified in the provisions on environmental protection;

⁵⁾ has technical infrastructure for water and sewage management, energy management, public transport and waste management.

⁵ Central Statistical Office, *Turystyka w 2017*, Information and statistical studies, Warsaw 2018, p. 61.

⁶ Central Statistical Office, *Turystyka w 2016*, Information and statistical studies, Warsaw 2017, p. 71.

The following places, after the Aleksandrów County, are occupied respectively by the following Counties: Busko, Lubaczów, Kołobrzeg, Krosno, Świnoujście and Warsaw⁷.

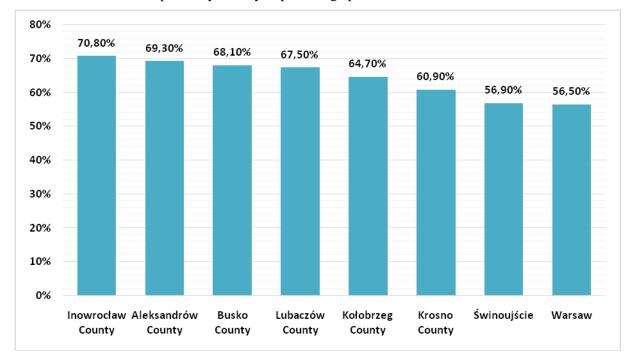


Chart 1. The use of bed places by County in percentage points

Prepared on the basis of: Central Statistical Office, *Turystyka w 2017 r.*, Information and statistical studies, Warsaw 2018, p. 61.

It is noteworthy that all of the mentioned Counties, with the exception of Warsaw, have health resorts in their area. This proves that the demand for accommodation in the area of health resorts is higher than the average demand for them on a nationwide scale. This is a consequence of a wide range of conditions, including favourable climatic conditions and infrastructure conducive to the regeneration of the human body.

The high occupancy rate of accommodation facilities in the Aleksandrów County indicates two trends. First of all, it allows to conclude that there is a relatively high demand for accommodation services in the county with their stable supply⁸. Secondly, there is an upward trend in the percentage of use of accommodation facilities in the Aleksandrów County with a simultaneous increase in the number of accommodation facilities subject to classification according to the criteria of the Central Statistical Office. According to the survey methodology, only establishments with 10 or more bed places are included in the survey population. The state of the matter is shown in Chart 2. It compares the occupancy rate in the Aleksandrów County with the same rate established for the whole Poland and the number of accommodation establishments meeting the conditions resulting from

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⁷ Warsaw and Świnoujście are cities with County rights.

⁸ It is counted in the number of beds, not taking into account here the activities of inpatient treatment brand in the County.

the methodology of the Central Statistical Office⁹. An increase in the number of accommodation facilities in Poland is observed, with the level of use of accommodation facilities increasing from 64% (2010) to 69.2% in 2017. It is therefore said about an increase of 5.2 percentage points over a period of 8 years. As far as the use of accommodation facilities in Poland is concerned, it increased from 34.3% in 2011 to 39.3% in 2017. The increase in the use of accommodation in Aleksandrów County in the years 2010-2017 is slightly higher than the increase in this indicator for the whole accommodation base in Poland (see values and trend lines in Chart 2), while taking into account the period 2010-2016 the value for Aleksandrów County was almost double the value calculated for the whole country. The statistics presented above indicate that investments in accommodation facilities in the Aleksandrów County are expected in the near future.

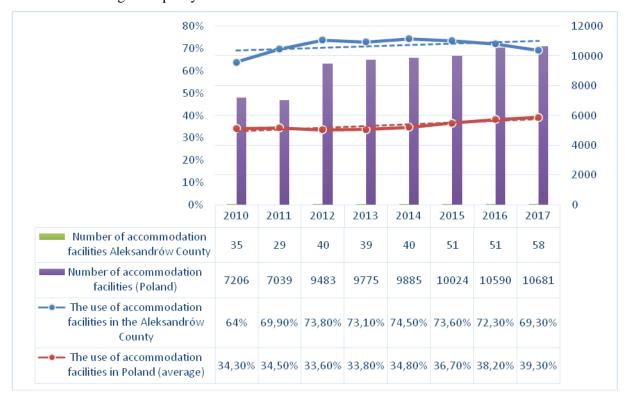


Chart 2. Percentage occupancy rate with trend lines and number of establishments

Own elaboration on the basis of: Statistical Office in Bydgoszcz, *Turystyka w województwie kujawsko-pomorskim w roku 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017*; Central Statistical Office, *Turystyka w 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017*.

⁹ The term 'accommodation facility' includes hotels, motels, guesthouses, other hotel facilities, excursion homes, hostels, youth hostels, school youth hostels, holiday centres, holiday resorts, training and recreation centres, houses of creative work, tourist cottages, campsites, camping grounds, health resorts, guest rooms (private accommodation), agritourism accommodation, other non-classified facilities.

In the Aleksandrów County there are 58 accommodation facilities with at least 10 beds ¹⁰. However, in the whole Kujawsko-Pomorskie Voivodeship 406 such objects were recorded ¹¹. In 2016, 148,423 tourists used accommodation facilities in the Aleksandrów County, of which less than 2.5% were foreign tourists ¹². This value is relatively low. For comparison, there are health resorts located in Zachodniopomorskie Voivodeship, in particular Kołobrzeg County, where nearly 30 of overnight stays are provided to foreign tourists. The relation of the indicated values in the Aleksandrów district, combined with the favourable location of the health resort and its developmental and infrastructural potential, is a prerequisite for careful development of the offer for potential patients from abroad. By the way, it is pointed out that the above-mentioned scope of activities is already being undertaken by the Przedsiębiorstwo Uzdrowisko Ciechocinek, which continues to implement the assumptions of the development strategy adopted for 2013-2017.

It is still necessary to briefly describe tourists visiting the Ciechocinek resort. According to estimates from 2015¹³, around 40% of tourists are retired. Only Inowrocław (48.3%) achieved a higher result in the Kujawsko-Pomorskie Voivodeship. For comparison, this percentage is 9.7% for the city of Toruń and 9.8% for Bydgoszcz, while for 14 of the 17 surveyed areas of the Kujawsko-Pomorskie Voivodship it does not exceed 20%. Studies also indicate that 33.4% of visitors to Ciechocinek are of post-productive¹⁴age. This is a result of a naturally developing demand for health resort services - at least in the case of patients whose stay is financed from public funds (e.g. by the National Health Fund). According to the same survey, 72.7% of tourists visiting Ciechocinek live outside the Kujawsko-Pomorskie Voivodeship. A higher percentage share was recorded only for Włocławek (75.7%). Ciechocinek is also characterised by one of the lowest percentages of so-called one-day stays in Kujawsko-Pomorskie voivodship, i.e. no overnight stays. It is estimated at 27.5% of all stays in the resort. Therefore, 72.5% of tourists stay in Ciechocinek for at least one night, and as much as 41% for 10 or more nights.

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¹⁰ According to the status for 31 July 2017. Statistical Office in Bydgoszcz, Turystyka w województwie kujawsko-pomorskim w roku 2017, Bydgoszcz 2018.

Statistical Office in Bydgoszcz, *Turystyka w województwie kujawsko-pomorskim w roku 2017, Bydgoszcz 2018.*

¹² Exactly this value is: 2.4996%.

¹³ R. Brudnicki, M. Barczak, Monitoring ruchu turystycznego w województwie kujawsko-pomorskim – 2015. Raport z badania dla kujawsko-pomorskiej organizacji turystycznej, 2015, p. 35.

¹⁴ The percentage of retired persons and persons of post-working age differ slightly due to the adopted methodology. A person of post-productive age is a man over 65 years of age or a woman over 60 years of age. Pension rights can be obtained below this age on the basis of Polish law. It is also possible to enter post-working age without taking advantage of pension rights.

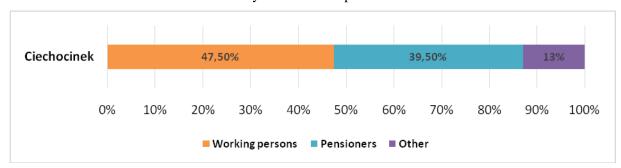


Chart 3. Estimated structure of tourists by declared occupational status

Prepared on the basis of: R. Brudnicki, M. Barczak, *Monitoring ruchu turystycznego w województwie kujawsko-pomorskim* – 2015. Raport z badania dla kujawsko-pomorskiej organizacji turystycznej, 2015, p. 35.

The stay in Ciechocinek resort is determined primarily by its spa function, which is reflected in the relatively high percentage of alone arrivals (31.4%). However, one cannot overlook the growing weekend and Christmas tourism - arrivals with the closest family account for 44.5% of all arrivals, while arrivals with friends 12.4%, and arrivals with a partner 8.7% ¹⁵. These values also cannot be omitted when creating a market offer. It is also worth mentioning that almost 80% of the tourists surveyed indicate a passenger car as the main means of transport ¹⁶. This trend determines the inevitable necessity of expanding the parking space in the Ciechocinek health resort.

Table 1. Three key strengths and weaknesses of Ciechocinek health resort according to *Monitoring* of tourist traffic

Strengths	Weaknesses
1. Greenery, flowers, parks, fountains	1. Low number of toilets
2. Graduation towers3. Clean air, microclimate	2. Low quality of infrastructure (pavements, availability of garbage dumps, availability of parking
	spaces)

Prepared on the basis of: Prepared on the basis of: R. Brudnicki, M. Barczak, *Monitoring ruchu turystycznego w województwie kujawsko-pomorskim – 2015. Raport z badań dla kujawsko-pomorskiej organizacji turystycznej*, 2015.

The table above lists the most frequently indicated strengths and weaknesses of Ciechocinek health resort. Strengths include brine graduation towers, which are managed by PUC S.A. This facility was recognized by the respondents as a showcase of the health resort, its most characteristic tourist object. All tourist and spa facilities in Ciechocinek take advantage from its existence. The convenient location of the Ciechocinek health resort was also emphasized - in fact, the climatic values indicated earlier

¹⁶ Prepared on the basis of: R. Brudnicki, M. Barczak, *Monitoring*.... op. cit., p. 68.

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¹⁵ Prepared on the basis of: R. Brudnicki, M. Barczak, *Monitoring....* op. cit., pp. 62-63.

in this article. Among the health resort's weaknesses are infrastructural aspects, including insufficient number of toilets and poor quality of infrastructure, including too few parking spaces.

It should be noted that the solution of the above infrastructure problems is reflected in three strategic objectives within the Strategy for the Development of the Municipality of Ciechocinek 2016-2020¹⁷. These objectives are entitled "Economic Development Based on The Full Use of The Health Resort Potential of The Commune", "Improvement of The Town's Spatial Order Through Investments in Technical Infrastructure" and "Strengthening Social Capital and Development of Social Infrastructure". Their implementation would solve many key problems for the development of the health resort operations. The detailed measures include, among others, increasing the number of parking spaces, repairing pavements, or revitalization of green areas and renovation of historic buildings. The effect of the implementation of this strategy is to make Ciechocinek the most recognizable health resort brand in Poland. In other words, extensive efforts have been made to develop Ciechocinek's long-term competitive advantage over other health resorts 18. Its value will increase with the development of the trend referred to in the next paragraph.

According to data published by the Central Statistical Office, 33.9% of patients 19 staying in inpatient spa treatment facilities are *non-refundable*, i.e. they finance their stay from private funds. This trend is an upward trend, stimulated both by an increase in demand for this type of services and the need to reduce the share of unprofitable sanatorium stays financed by public funds in the portfolio of health resort companies. Fully paid stays are a profitable service and allow for minimising losses on publicly funded stays. Private patients, however, require a higher standard of accommodation rooms and adequate quality of service. This is natural. In order to meet such requirements, it is necessary to incur capital expenditure on adaptation of accommodation facilities. Such persons expect an adequate standard, higher than in the case of a publicly funded stay. The stay of 56.3% of patients is financed from the National Health Fund. Chart 4 presents the ongoing upward trend in the number of non-refundable patients in Polish health resorts.

On a Polish scale, in 2017, 808.1 thousand people benefited from health resort treatment. Out of which 734.4 thousand people (less than 91%) were inpatient patients - treated in sanatoriums and spa hospitals. The data presented in Chart 5 coincide with macroeconomic trends, in particular the positive correlation of these with the actual increase in the wealth of the society is identified. The results indicate that the number of non-refundable patients remains in an upward trend. In 8 periods it increased by 89 thousand (almost 54%) compared to 2010. It seems that the indicated upward trend will be maintained and the demand for fully paid stationary stays in sanatoriums and health resort hospitals will grow. Taking advantage of this opportunity by communalised health resort companies requires careful preparation.

¹⁷ Strategia Rozwoju Gminy Miejskiej Ciechocinek 2016-2020.

¹⁸ On competitive advantages: P. Cegliński, The concept of competitive advantages. Logic, sources and durability, "Journal of Positive Management", 2016, Vol. 7 No. 3, pp. 57-70.

19 According to the methodology of the Central Statistical Office (GUS), a patient is a person using therapeutic services in health resort

treatment institutions on the basis of a referral or on the basis of a certificate of no contraindications to use a given type of health services.

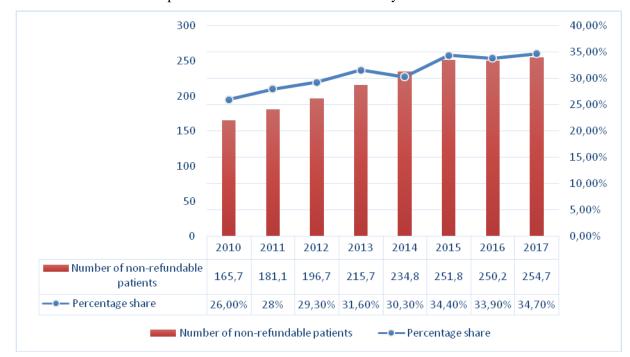


Chart 4. Non-refundable patients in Polish health resorts in the years 2010-2017

Own elaboration based on tabular data of the Central Statistical Office - *Zdrowie i ochrona zdrowia 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017.*

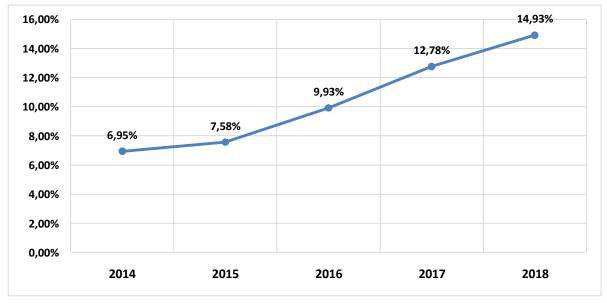


Chart 5. Non-refundable patients in Przedsiębiorstwo Uzdrowisko Ciechocinek S.A.

Own study by PUC S.A.

4. Summary

This article signalled as broadly as possible, taking into account the limitations resulting naturally from the accepted volume of this type of work, the strategic conditions for the management of a health resort entity in the Alexandrów County. The ongoing trends illustrated by the presented data clearly

indicate the need for spa companies to make a number of strategic changes. In particular, sales of fully paid spa stays are growing rapidly, accompanied by a decrease in the number of stays financed by public funds. The increase in demand for these services is accompanied not only by the growing demand for accommodation and treatment facilities, but also for the whole health resort as an area.

According to the trends observed on the market of spa services, there is a gradual shift from the use of financing of such services by the National Health Fund to the pursuit of medical activities on a commercial basis. This is connected, among other things, with the low degree of covering the costs incurred by health resort entities by the state health care financing system. Therefore, in order to improve its profitability in the medical business unit and thus generate income to guarantee its further development, the Company should increase the share of revenues from commercially provided services in the structure of operating income.

In conclusion, it should be noted that health resort treatment has been going through a crisis for several years, caused by many elements. The main factor of stagnation is considered to be the policy of financing health resort treatment by the main payer, which is the National Health Fund. However, the situation is more complex. The list of problems faced by Polish spas is much longer, including:

- lack of reliable valuation of health care services by the National Health Fund,
- lack of state policy in creating a brand of Polish health tourism (health resorts) despite significant advantages and many years of experience in this area,
- unstable state policy with regard to financing of health services (health resorts),
- decapitalisation of fixed assets and low self-financing capacity of development investments,
- relatively poor product offer (despite high potential in this respect),
- poor cooperation of local governments in supporting health and tourism activities,
- low (or non) awareness of local governments in terms of creating a coherent vision of health
 resorts and health resort communes in the perception of a health resort as a common and
 comprehensive tourist product,
- lack of modern resort accompanying infrastructure,
- insufficient activity of the tourism service sector in the field of medical tourism,
- lack of activity of Local/Regional/Municipal Tourist Organisations or lack of such entities.

The problems presented above require health resort companies to undertake continuous actions resulting in an increase in the efficiency of the use of their resources and the implementation and optimisation of modern techniques and technologies in health resort health resort medicine and in production based on natural health resort resources, including mineral waters, salt, sludge and therapeutic liquor, development of the hotel and treatment industry, development of staff competences and wider promotion of the "Polish health resort brand".

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