COMPARATIVE ANALYSIS OF LEGAL FRAMEWORKS AND SAFETY STANDARDS IN HEALTH RESORTS: SLOVENIA, CROATIA AND AUSTRIA

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Abstract

Purpose – Health tourism is increasingly establishing itself as one of the fastest-growing and, at the same time, one of the most complex segments of contemporary tourism. The purpose of this paper is to analyse and compare the legal frameworks and safety standards governing the operation of health resorts and wellness facilities in Slovenia, Croatia, and Austria, with particular emphasis on the relationship between legislation and international standards.
Methodology/Design/Approach – The study is based on a qualitative methodology employing descriptive and comparative methods. The analysis draws on secondary sources, including national legislation, secondary legislation, international ISO standards, and scholarly literature in the fields of safety and risk management.
Findings – The findings identify three regulatory models: a normative model in Slovenia, a hybrid model in Croatia, and an integrated model in Austria. The systems differ primarily in the relationship between legislation and standardization, as well as in the approaches used to manage safety risks.
Originality of the research – The paper provides a systematic comparative analysis of national approaches and contributes to a better understanding of the role of standardization in safety management within health and wellness tourism.
Keywords health tourism, health resorts, safety management, standardization, regulatory frameworks

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INTRODUCTION

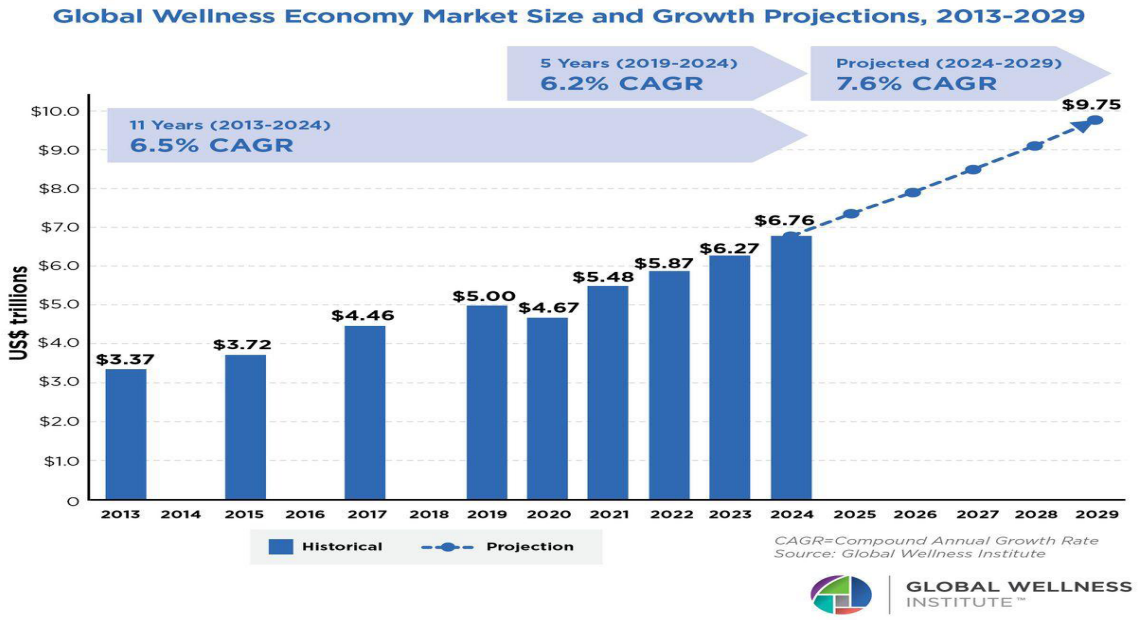
In recent years, there has been a growing interest in services related to health maintenance, prevention, and well-being, which has significantly influenced the development of various tourism products. At the same time, ensuring the safety of guests and service users has become one of the key challenges, as users are frequently exposed to specific risks associated with healthcare services, the use of swimming pool complexes, saunas, and other wellness facilities.

The development of modern society, marked by significant demographic changes, population ageing, increasing stress levels, the rise of chronic diseases, and greater awareness of the importance of prevention and healthy lifestyles, has substantially contributed to the growing demand for services that combine medical, rehabilitation, and wellness components. Health tourism is therefore no longer a marginal segment of tourism. It has become a strategically important activity that contributes to economic development, regional competitiveness and the sustainable use of natural resources. (Boros et al., 2012; Global Wellness Institute [GWI], 2024). Health tourism is generally understood as an umbrella concept that includes both medical tourism and wellness tourism. Medical tourism is primarily associated with medical procedures, treatment and rehabilitation, whereas wellness tourism focuses on prevention, relaxation, regeneration and the enhancement of physical and mental well-being (Boros et al., 2012; Liao et al., 2023). Although both forms remain tourism-oriented and involve accommodation, food services and other complementary tourism services, their boundaries are increasingly blurred, as wellness facilities incorporate preventive and diagnostic services, while healthcare institutions integrate wellness-oriented approaches into rehabilitation and prevention (Global Wellness Institute, 2024; Smith, 2021). Nevertheless, wellness tourism remains primarily preventive and well-being oriented, whereas travel involving invasive or clinically demanding procedures falls within the domain of medical tourism (Kebadie, 2026). Wellness offerings in health resorts and other wellness facilities are diverse and may include accommodation, food and beverage services, physical activities, swimming pools, saunas, cosmetic and body-care services, as well as certain healthcare-related services such as therapies, inhalations, baths, or preventive examinations. Due to this diversity, safety requirements vary across individual service areas. Food and beverage services are typically regulated through hygiene standards, pools and saunas require technical, organizational, and sanitary measures, while healthcare-related services involve a higher level of professional supervision.

Slovenia, Croatia, and Austria have a long tradition of spa and health tourism, although the development of this sector has evolved within different institutional and tourism frameworks. In Slovenia, health resorts have traditionally been closely connected with healthcare and rehabilitation, while since the 1990s they have increasingly expanded toward recreational, wellness, and experience-based tourism (Horvat, 2010). In Croatia, wellness tourism is strongly linked to the hotel industry, particularly in coastal regions such as Istria, Kvarner, Split, and Dubrovnik, where wellness services represent an important complementary tourism product (Težak Damijanić, 2020). Austria represents one of the more institutionally developed European spa tourism systems, characterized by a strong connection between healthcare, rehabilitation, prevention, and tourism services (Smith & Puczkó, 2022). Following the COVID-19 pandemic, health and safety became even more important in travel decision-making, as

tourists became more sensitive to health risks, hygiene protocols and destination safety perceptions (Awais-E-Yazdan et al., 2025). Recent market analyses confirm the macroeconomic significance of the wellness economy. According to GWI (2024), the global wellness economy reached approximately USD 6.8 trillion in 2024, with projections of nearly USD 9.8 trillion by 2029. Wellness tourism is one of the key tourism-related sectors within this economy, which further confirms the need for systematic safety regulation and risk management in health and wellness tourism (Figure 1).

Figure 1: **Global Wellness Economy Market Size and Growth Projections 2013–2029**



Source: Global Wellness Institute, 2025

Safety is a central concern in the development of health and wellness tourism. Tourism is a highly sensitive activity, significantly affected by various security risks, including terrorism, natural disasters, health crises, and other extraordinary events. Research indicates that safety incidents typically have long-term negative effects on tourism demand and the perceived image of destinations (Zhang et al., 2025). Safety increasingly functions as an important factor in tourism decision-making, particularly in the post-pandemic context, as tourists have become more sensitive to health risks and destination safety perceptions (Awais-E-Yazdan et al., 2025).

The contemporary understanding of safety in tourism extends beyond the physical protection of guests and encompasses a broader social and ethical context, in which safety is often prioritized over values such as freedom, privacy, and authentic tourist experiences (Repnik et al., 2025). A bibliometric analysis of safety research in tourism demonstrates a clear shift from traditional understandings of safety as protection against crime toward a broader concept that includes risk perception, health safety, and destination crisis management (Toker & Emir, 2023). In health resorts and wellness facilities, this relationship becomes even more complex, as healthcare services, tourism activities, and the private sphere of guests intersect within the same environment. For this reason, employees in health resorts must demonstrate a high level of sensitivity to perceived guest safety, as it is directly linked to trust, satisfaction, and the likelihood of repeat visits.

Safety in health resorts is inherently multidimensional, encompassing healthcare and hygiene safety, pool and spa infrastructure, occupational health and safety, personal and health-related data protection, and organizational and information security. Perceived safety significantly influences guests' decision-making when choosing a health resort or hotel, with higher-category accommodation facilities placing greater emphasis on comprehensive safety systems (Awais-E-Yazdan et al., 2025; Dai et al., 2025). This confirms that safety is not merely a legal obligation but also a strategic element of quality, reputation, and competitiveness.

More recent empirical studies confirm that perceived safety protocols significantly reduce perceived risk and increase trust and booking intentions in hospitality services (Shin & Kang, 2020). This further reinforces the notion that safety is not only a regulatory requirement but also a strategic factor of service quality and market differentiation. Consequently, modern health resorts increasingly adopt a systemic approach to safety management, based on the integration of legal requirements, organizational measures, and international standards. Effective risk management requires the integration of safety at all levels of governance and business processes (Repnik et al., 2025; Mekinc & Repnik, 2025), which is why health resorts represent complex organizations in which legal frameworks and safety standards significantly shape operations, service quality, and the long-term sustainability of health and wellness tourism.

Safety in wellness facilities must be addressed throughout the entire facility life cycle, from design and permitting to daily operation. At the operational level, safety depends on maintenance, water quality monitoring, staff training, incident prevention, and data protection. This is further supported by minimum technical requirements for hospitality activities (Pravilnik o minimalnih tehničnih pogojih za opravljanje gostinske dejavnosti, 2017) and occupational health and safety systems based

on legal requirements (Zakon o varnosti in zdravju pri delu [ZVZD-1], 2011). Such requirements are particularly relevant in wellness activities involving physical activity, such as exercise, swimming, and hiking, where user safety depends on adequate infrastructure, especially swimming pools, and compliance with technical and organizational standards (Gavurova & Polishchuk, 2025). Modern wellness facilities increasingly rely on technical security systems and video surveillance, which additionally raises questions related to privacy and legal compliance.

The tourism and spa sector increasingly relies on international standards and integrated risk management systems to address contemporary safety, health and digitalization requirements (Ritchie & Jiang, 2021). In health resorts and spa-wellness facilities, HACCP and ISO 22000 support food safety and hygiene, EN 15288 addresses swimming pool safety, ISO 45001 covers occupational health and safety, ISO/IEC 27001 supports information security and data protection, while ISO 28000 contributes to broader security management and organizational resilience. These standards translate safety requirements into documented procedures, risk assessment, staff responsibilities, monitoring and corrective measures, thereby complementing legislation and strengthening safety culture, business continuity and guest trust (Cooper, 2000; Antonsen, 2009; Gostič, 2012; Vršec, 2011).

Based on the presented theoretical foundations, it is evident that health and wellness tourism is evolving as a complex activity in which tourism, healthcare, organizational, and safety dimensions intersect. Although the literature confirms the increasing importance of safety as a key factor of quality, trust, and competitiveness, the issue of systematic and comparable regulation of safety at the level of legal frameworks and standards remains open. Different countries define the legal status of health resorts and wellness facilities in different ways, which is reflected in uneven safety regulation, varying levels of standardization, and differing roles of international standards in risk management.

The central research problem of this paper therefore concerns understanding how safety aspects of health and wellness tourism are regulated within selected countries and what role legal regulations play in comparison with non-mandatory, yet increasingly important, international standards. This leads to the following research question: *How do legal frameworks and safety standards in the field of health resort and wellness activities differ across the selected countries, and to what extent do they contribute to systematic and integrated safety management in health resorts?* Addressing this question is essential for understanding the relationship between legal regulation, standardization, and the actual level of safety in contemporary health and wellness tourism.

1. METHODOLOGY

Slovenia, Croatia and Austria were selected due to their geographical proximity, shared Central European context and long-standing spa and health tourism traditions. These differences make them suitable cases for comparing how legal bases and safety standards shape safety management in health resorts and spa-wellness facilities. Slovenia represents a more healthcare-integrated and legally defined model, Croatia reflects a more tourism-oriented and less institutionally integrated framework, while Austria represents a highly developed and strongly standardized spa tourism system. This study is based on a qualitative comparative research methodology aimed at analysing legal frameworks and safety standards governing health resorts and spa-wellness facilities in Slovenia, Croatia, and Austria. A descriptive method was employed for the systematic presentation of regulatory arrangements, institutional mechanisms, and safety standards, while a comparative method was used to identify similarities and differences among the analysed countries. The analysis relied exclusively on secondary sources, including national legislation and secondary legislation related to healthcare, tourism, occupational safety, public health, and personal data protection, strategic and development documents, international and European standards (e.g., ISO standards, HACCP, EN standards), and academic and professional literature in the fields of health tourism, safety management, and standardization. The three countries were selected as comparable yet institutionally distinct cases, enabling an analysis of different safety governance models in health tourism. Sources were selected according to four criteria: relevance to the research topic, timeliness, cross-country comparability, and institutional credibility. Only officially published and publicly accessible documents and sources were included in the analysis.

The collected material was analysed through qualitative content analysis using a structured comparative framework. The analytical categories were derived from the literature on tourism governance, safety management and regulatory systems. These categories were used to examine how each country defines the legal status of health resorts and spa-wellness facilities, how regulatory responsibilities are distributed, and which safety requirements apply across key operational domains, including occupational health and safety, hygiene and sanitation, swimming pool and bathing safety, personal data protection, and information security. Particular attention was also given to the role and implementation of international standards, institutional supervision, stakeholder responsibilities, and the relationship between legislation and standardization in shaping safety governance. To ensure systematic cross-country comparison, a unified comparative framework was applied throughout the study. The analysis focused particularly on the relationship between legislation and standards, especially whether standards function primarily as a complement to legislation or as an integrated mechanism of safety governance. The study also distinguishes between mandatory systems embedded in legislation (e.g., HACCP requirements) and voluntary standards, such as ISO-based certification systems, whose implementation depends on organizational strategies and national regulatory environments.

The findings were synthesised into comparative categories and interpreted within a broader framework of health tourism governance and safety management at the system level. Based on the structured comparative analysis, three regulatory models were identified: a compliance-oriented model in Slovenia, a hybrid model in Croatia, and an integrated governance model in

Austria. The methodological approach enables the transferability of the analytical framework to other countries or regions and provides a transparent basis for future comparative research in the field of safety management in health and wellness tourism.

2. COMPARATIVE ANALYSIS OF REGULATORY FRAMEWORKS AND SAFETY STANDARDS IN HEALTH RESORTS / SPA-WELLNESS FACILITIES

This chapter presents a comparative analysis of the regulatory frameworks and safety standards applicable to health resorts and spa-wellness facilities in Slovenia, Croatia, and Austria. The analysis focuses on the legal status of health resorts, the underlying normative framework, relevant legislation, secondary legislation, and operational safety regimes that define the conditions for ensuring the safety of employees and service users. Particular attention is also devoted to the role of international standards as a complement to legislation and to their function within safety management systems.

The comparison is not limited to identifying legal provisions, but focuses on how regulatory requirements are translated into operational safety management. Therefore, the analysis interprets legislation and standards through three analytical dimensions: the degree of legal formalization, the role of standards in operationalizing safety requirements, and the extent to which safety management is integrated into organizational governance.

2.1 Legal Frameworks and Safety Standards in Health Resorts in Slovenia

2.1.1 Legal Status of Health Resorts and the Underlying Normative Framework

In Slovenia, health resorts have a specific legal status, as, pursuant to the Natural Healing Resources and Natural Health Resorts Act, they are defined as healthcare institutions whose primary activity is the prevention of illness, treatment, and medical rehabilitation through the use of natural healing resources under continuous medical supervision (ZNZS, 1964). Such an arrangement means that safety management in health resorts is primarily situated within the domain of healthcare activity, while health resorts are also permitted to carry out tourism, hospitality, and other ancillary activities, provided that these do not interfere with their primary healthcare function (ZZDej, 2005).

A distinctive feature of the Slovenian model is therefore the integration of healthcare and tourism functions, which requires a high degree of normative regulation and a clear separation between medical and ancillary activities within the same organization. Such an arrangement directly affects the scope and stringency of the safety requirements applicable to health resorts (ZVZD-1, 2011).

This indicates that the Slovenian model is primarily compliance-oriented: safety is ensured mainly through clearly defined legal obligations, institutional supervision, and formal separation between healthcare and ancillary tourism activities.

2.1.2 Key Laws Relevant to the Safety of Health Resorts

In addition to the Natural Healing Resources and Natural Health Resorts Act, Slovenian health resorts must, in the course of their operations and safety management, also comply with a broader body of legislation governing healthcare activities, employee safety, and the safety of service users. Among the most important are the Healthcare Services Act (ZZDej, 2005) and the Occupational Health and Safety Act (ZVZD-1, 2011), which establishes employers' obligations regarding a safe working environment, risk assessment, employee training, and preventive measures.

Regulations governing building construction, fire safety and personal data protection also form an important part of the normative framework (GZ-1, 2021), fire safety (ZVPoz, 2006), and personal data protection (ZVOP-2, 2022; Regulation (EU) 2016/679, 2016). Due to the processing of health-related and other sensitive personal data of guests, health resorts are subject to additional obligations in the field of information and data security.

Particular emphasis is placed on sanitary and hygienic conditions in pool complexes, saunas, and other wellness areas, where safety depends on water quality monitoring, technical maintenance, and institutional supervision by competent public health and inspection authorities.

2.1.3 Secondary Legislation and Operational Safety Regimes

The Slovenian system for ensuring safety in health resorts is further elaborated through numerous regulations that govern specific safety-related areas in detail. Of particular importance are regulations in the field of occupational health and safety (ZVZD-1, 2011), which specify requirements relating to work equipment, personal protective equipment, first aid, exposure to chemical, biological, and physical factors, as well as the organization of work processes.

From the perspective of guest safety, regulations governing bathing facilities and pool water are also of central importance, as pools and saunas constitute one of the core elements of health resort services and, at the same time, a significant source of risk (slips, falls, drowning, and microbiological hazards). The normative framework in this area defines hygiene regimes, technical requirements, water quality monitoring, and the obligations of bathing facility operators (NIJZ, 2022).

2.1.4 The Role of Standards as a Complement to Legislation

Although Slovenian legislation establishes relatively high minimum safety requirements for health resorts, in practice standardization is increasingly gaining prominence as a complement to the normative framework. International standards enable a systematic approach to safety management that goes beyond the mere fulfilment of legal obligations.

Particularly relevant to Slovenian health resorts are ISO 28000 for security management (ISO 28000, 2007), ISO/IEC 27000 for information security (ISO/IEC 27000, 2018), ISO 45001 for occupational health and safety (ISO 45001, 2018), and HACCP for food safety (HACCP, 2003). Their application enables the structured identification, evaluation, and control of safety risks and contributes to greater transparency of operations. These standards are considered relevant because they correspond to the main operational risk domains identified in health resort activities: occupational safety, food safety, information security, security management, and hygiene-related risks. In this analysis, they are treated as governance instruments that translate general legal duties into auditable procedures, documentation, monitoring, and corrective measures.

2.1.5 The Functional Significance of Standardization

In the Slovenian model, standards do not replace legislation; rather, they function as instruments for upgrading an already existing and strictly regulated system. They enable health resorts to demonstrate effective safety management, improve internal processes, and strengthen safety culture among employees. At the same time, they constitute an important element of trust for guests and business partners and contribute to the long-term competitiveness of Slovenian health resorts in the international health and wellness tourism market. The main strength of this model is legal clarity and a high level of formal protection. Its limitation, however, is that safety management may remain focused on proving compliance rather than on continuous, process-based risk improvement.

2.2 Legal Frameworks and Safety Standards in Health Resorts in Croatia

2.2.1 Legal Status of Health Resorts and the Underlying Normative Framework

In Croatia, spa and wellness facilities generally operate as tourism providers incorporated into the system of tourism and hospitality activities, except where they provide medical services within healthcare institutions (e.g., special rehabilitation hospitals or health resorts) (Zakon o ugostiteljskoj djelatnosti, 2015; Zakon o pružanju usluga u turizmu, 2017). Unlike the Slovenian model, in which health resorts have the status of healthcare institutions, the Croatian arrangement is based on a functional differentiation of activities, whereby the legal regime governing the use of facilities and services is determined according to the content and purpose of the specific service.

Such an arrangement means that safety in spa and wellness facilities is not regulated by a single specific law, but rather derives from a combination of legislation in the fields of tourism, hospitality, occupational safety, sanitary and hygiene requirements, consumer protection, and personal data protection (Zakon o zaštiti na radu, 2014; GDPR, 2016). Consequently, safety in Croatian spa and wellness facilities has a distinctly sectoral and fragmented character, which increases the importance of clear organizational arrangements and internal safety mechanisms. This makes the Croatian model more hybrid than purely normative: safety does not derive from one central regulatory framework, but from the coordination of several sectoral regimes that must be integrated at the organizational level.

2.2.2 Key Laws Relevant to the Safety of Health Resorts

The core legal framework governing the operation of spa and wellness facilities as tourism providers is constituted by the Hospitality Activity Act (Zakon o ugostiteljskoj djelatnosti, 2015) and the Act on the Provision of Tourism Services (Zakon o pružanju usluga u turizmu, 2017), which define the conditions for carrying out activities, the categorization of facilities, and providers' obligations toward guests. An important pillar of safety assurance is also the Occupational Safety Act, which sets out employers' obligations relating to the provision of a safe working environment, employee training, and risk assessment and management (Zakon o zaštiti na radu, 2014).

Regulations on sanitary and hygienic safety, building and fire safety, and personal data protection are also relevant, particularly because spa and wellness providers may process personal and health-related guest data under the GDPR framework (GDPR, 2016).

2.2.3 Secondary Legislation and Operational Safety Regimes

Similarly to Slovenia, a substantial portion of safety requirements in Croatia is established through secondary legislation. Of particular significance is the regulation governing the sanitary-technical and hygiene conditions of swimming pool facilities and the health suitability of pool water, since pools, saunas, and water attractions represent a central component of the spa and wellness offer while also constituting an important source of risk for guests and employees (Pravilnik o minimalnih tehničnih pogojih in o obsegu storitev za opravljanje gostinske dejavnosti, 2017).

Operational safety regimes also relate to the hygienic maintenance of premises, the use and maintenance of technical equipment, the handling of hazardous substances, injury prevention, and the provision of first aid. In the area of occupational health and safety, requirements are implemented through regulations governing work equipment, personal protective equipment, exposure to harmful factors, and the organization of work processes in tourism facilities (Zakon o zaštiti na radu, 2014).

2.2.4 The Role of Standards as a Complement to Legislation

Due to the fragmented nature of the legal framework, standardization plays a particularly important role in Croatian spa and wellness facilities. International standards enable providers to establish a comprehensive and transparent safety management system that goes beyond minimum legal requirements and fills potential regulatory gaps.

Among the most commonly applied standards are ISO 28000 for security management (ISO 28000, 2007), ISO/IEC 27000 for information security (ISO/IEC 27000, 2018), ISO 45001 for occupational health and safety (ISO 45001, 2018), and HACCP for food safety in the hospitality segment of spa and wellness services (HACCP, 2003). The application of the European standard EN 15288 for pool safety is also of particular importance, as it contributes to the harmonization of technical and organizational requirements in aquatic facilities (EN 15288, 2018). In the Croatian context, the relevance of these standards lies less in their formal legal status and more in their ability to connect dispersed legal obligations into a coherent safety management system. They help providers define responsibilities, document procedures, and demonstrate that risks are managed systematically despite the fragmented regulatory environment.

2.2.5 The Functional Significance of Standardization

In the Croatian model, standards do not operate merely as an extension of legislation, but often as the key connecting element between different regulations governing the operation of spa and wellness facilities. Standardization enables the systematic identification and management of safety risks, improves internal organization, and contributes to greater legal and operational predictability.

For providers of spa and wellness services, standards also represent an important competitive advantage, as they increase the confidence of domestic and international guests and enable the comparability of service quality and safety on the international health and wellness tourism market. In this sense, standardization in Croatian spa and wellness facilities functions as a key mechanism for ensuring safety, quality, and the long-term sustainability of the activity.

Since this study is based on secondary sources, it does not empirically measure the actual implementation of these standards among individual providers. Rather, it assesses their regulatory and functional significance within the Croatian safety governance framework.

2.3 Legal Frameworks and Safety Standards in Health Resorts in Austria

2.3.1 Legal Status of Health Resorts and the Underlying Normative Framework

In Austria, health resorts (Kurorte, Heilbäder) and related spa and wellness facilities have a specific and relatively clearly structured legal position situated at the intersection of the healthcare system and tourism activity (Kurortegesetze, n.d.). Unlike Croatia and, to some extent, Slovenia, the Austrian model is strongly federal in nature, as a significant part of regulation falls within the competence of the federal provinces. Through specific laws and secondary legislation, the provinces regulate the status of health resorts, the conditions for the use of natural healing resources, and the scope of permitted medical and wellness services (Kurortegesetze, n.d.).

Spa and wellness facilities operating within recognized health resorts or connected with medical rehabilitation are generally integrated into the healthcare system, whereas independent wellness hotels and spa centres operate as tourism providers. Despite this differentiation, a distinctive feature of the Austrian model is that safety and quality standards are largely harmonized regardless of whether the activity is medical or tourism-related. This indicates a more integrated governance logic, in which legal regulation, technical requirements, and organizational quality systems are more closely connected than in the Slovenian and Croatian models.

2.3.2 Key Laws Relevant to the Safety of Health Resorts

At the federal level, the core legal framework is formed by legislation in the fields of healthcare, occupational health and safety, building construction, fire safety, consumer protection, and personal data protection (ASchG, 1994; GewO, 1994; GDPR, 2016). Federal legislation establishes the basic obligations concerning employee safety, the technical safety of facilities, and the protection of personal and health-related data, the latter being implemented in accordance with the European legal framework, particularly the General Data Protection Regulation (GDPR) (GDPR, 2016).

The federal provinces adopt their own legislation in the field of health resort activity, which regulates in greater detail the conditions for the operation of health resorts, the use of thermal and mineral waters, hygiene regimes, and medical supervision (Kurortegesetze, n.d.). Such a two-tier arrangement allows adaptation to local natural and infrastructural characteristics while simultaneously ensuring a high level of legal certainty for service providers and users.

2.3.3 Secondary Legislation and Operational Safety Regimes

The operational dimension of safety is regulated through detailed federal and provincial requirements, particularly in relation to hygiene, pool and bathing safety, water quality, and the technical safety of buildings.

In the field of occupational health and safety, requirements are implemented through systematic risk assessment, regular employee training, and monitoring of the use of work equipment and protective equipment. Safety regimes are generally integrated into the daily operation of facilities, thereby reducing dependence solely on formal external supervision and strengthening the internal accountability of management.

2.3.4 The Role of Standards as a Complement to Legislation

In the Austrian model, international standards play a highly important and systemic role. Standardization does not operate merely as a voluntary extension of legislation, but is often integrated into the regulatory and supervisory framework, especially in larger health resort and hotel systems. The use of standards enables the harmonization of practices among the federal provinces and facilitates the comparability of service quality and safety.

Particularly relevant to Austrian spa and wellness facilities are ISO 28000 for security management (ISO 28000, 2007), ISO/IEC 27000 for information security (ISO/IEC 27000, 2018), ISO 45001 for occupational health and safety (ISO 45001, 2018), and HACCP for food safety (HACCP, 2003). In the field of aquatic facilities, the European standard EN 15288 is widely used, complementing national and provincial technical requirements (EN 15288, 2018). The role of these standards is interpreted through their connection with key safety domains rather than as evidence of uniform implementation in all facilities. They are relevant because they support comparable procedures, documentation, risk assessment, and quality assurance across a federal regulatory environment.

2.3.5 The Functional Significance of Standardization

In Austria, standards constitute a key link between legislation and practice. They enable systematic risk management, increase the transparency of operations, and contribute to a high level of trust among guests and the general public. Due to the strong international orientation of Austrian health and wellness tourism, standards also play an important role in positioning Austria as a safe and high-quality destination.

In comparative terms, the Austrian model appears integrated and balanced, as it combines a relatively strict normative framework with a high degree of standardization. In this system, standards do not fill regulatory gaps; rather, they function as instruments of harmonization, quality control, and the long-term sustainability of health resort as well as spa and wellness activities.

The comparative overview presented in Table 1 identifies three regulatory models—compliance-based, hybrid, and integrated—which distribute the relative weight of legislation and standardization in different ways. These differences are most clearly reflected in pool safety, occupational health and safety, and the processing of sensitive data, where standards operate either as complementary mechanisms or as integrated components of governance. Across the three countries, standardization performs three main functions: it translates general legal obligations into concrete operational procedures, supports internal accountability through documentation and monitoring, and strengthens external trust by making safety practices more transparent and comparable. The importance of these functions differs by country: in Slovenia, standards mainly upgrade compliance; in Croatia, they connect fragmented requirements; and in Austria, they form part of integrated governance.

Table 1: Comparative Overview of Legal Frameworks, Supervision, and Standards

Dimension	Slovenia	Croatia	Austria
Primary status of health resorts / spa-wellness facilities	Strong medical orientation linked to healthcare; also tourism/hospitality activities.	Primarily tourism/hospitality; medical services separate or specially licensed.	Strongly embedded in healthcare; influenced by Länder-level regulation.
Core regulatory logic	Highly normative; extensive legislation and inspections; standards complementary.	Fragmented framework; standards bridge gaps and operationalize requirements.	Integrated model; standards embedded in governance and linked to financing.
Key regulatory obligations	OHS, hygiene, water quality, fire safety, consumer & data protection.	Public health, bathing safety, OHS, tourism rules, consumer & data protection.	OHS, hygiene, water safety, fire safety, data protection with regional role.
Swimming pools and water	National rules + EN standards; strong monitoring.	Public health rules; EN/ISO guidelines + internal protocols.	Regional + technical standards; systematic risk management.
Hygiene and procedures	Detailed hygiene regulations; HACCP in food.	Public health + tourism rules; HACCP baseline.	Healthcare-linked hygiene; HACCP + quality systems.
Occupational health and safety	Extensive regulations (equipment, PPE, risks, etc.).	Similar framework; often implemented via internal systems.	Highly developed; often ISO 45001 integrated.
Data protection	GDPR + national; focus on sensitive data.	GDPR + national; relevant in booking and profiling.	GDPR + strict procedures; high maturity.
Role of ISO standards	Supplement to legislation (ISO, HACCP, etc.).	Key operational and market differentiation tool.	Fully integrated into governance and systems.
Compliance model	Compliance-first.	Hybrid model.	System-first.
Competitive dimension	Quality element; advantage if advanced.	Key differentiator.	Part of destination reputation.
Functional role of standardization	Upgrades and documents compliance with detailed legal requirements.	Connects fragmented legal requirements into operational safety systems.	Forms part of integrated governance, quality assurance, and risk management.

Source: Author's own elaboration (2026)

The comparative table highlights structural differences in how safety is governed across the three national contexts. Rather than reflecting different safety objectives, these differences primarily concern the institutional mechanisms through which safety is operationalized. Slovenia relies predominantly on a compliance-driven model grounded in detailed legislation, while Croatia demonstrates a more practice-oriented approach in which standards play a key role in structuring fragmented regulatory requirements. In contrast, the Austrian system reflects a higher degree of institutional integration, where standardization is embedded within routine governance processes. These variations suggest that the role of standards is not uniform but contingent upon the broader regulatory environment. Consequently, effective safety management in health resorts and spa and wellness facilities depends on the alignment between legal frameworks and the systemic application of standards. Table 1 therefore functions not only as a summary of national regulations, but also as the analytical basis for distinguishing three safety governance models. This distinction shows that the effectiveness of safety management depends not only on the number of legal provisions, but also on the extent to which legal requirements are translated into systematic operational processes.

3. DISCUSSION

The comparative analysis of legal frameworks and safety standards in health resorts and spa and wellness facilities in Slovenia, Croatia, and Austria reveals three distinct regulatory models that can be conceptualized as normative, hybrid, and integrated systems. Although all three models pursue the same fundamental objective—ensuring the safety of guests and employees in a complex health-tourism environment—they differ significantly in the mechanisms through which this objective is achieved. ensuring the safety of guests and service users. This distinction is consistent with international tourism safety and risk management research, which increasingly understands safety as a multidimensional governance issue involving legal compliance, risk perception, crisis preparedness, organizational resilience, and trust-building mechanisms (Toker & Emir, 2023; Ritchie & Jiang, 2021; Shin & Kang, 2020; Awais-E-Yazdan et al., 2025).

The Slovenian model is strongly norm-oriented, with safety primarily ensured through detailed legislation and an extensive body of secondary regulations. This approach provides a high level of formal compliance and clearly defined minimum requirements. However, it may also encourage a perception of safety as predominantly regulatory compliance rather than as a dynamic and continuously evolving management process. In this context, international standards such as ISO and HACCP primarily function

as complementary instruments, supporting improved transparency, risk traceability, and the development of organizational safety culture, but are not uniformly embedded across all providers.

In contrast, the Croatian model can be understood as hybrid, characterized by a more fragmented regulatory framework in which spa and wellness services are predominantly positioned within tourism and hospitality sectors rather than as part of the healthcare system. Consequently, safety governance emerges at the intersection of multiple regulatory domains, including public health, occupational safety, consumer protection, and technical regulations. Within such a dispersed institutional environment, international standards and internal safety protocols play a crucial role in operationalizing regulatory requirements. Rather than merely supplementing legislation, they function as integrative mechanisms that translate dispersed legal obligations into coherent organizational practices, enabling more systematic risk management and contributing to market differentiation, particularly in the international tourism context.

The Austrian model represents the most integrated approach, where health resort activities are closely embedded within the healthcare system and supported by a federal regulatory structure. In this setting, standardization and process-based safety management are not perceived as additional obligations but as inherent components of routine organizational governance. Compliance is therefore achieved not only through adherence to individual regulatory requirements but through the functioning of comprehensive management systems that integrate quality assurance, risk management, and data protection. This systemic integration contributes to a higher level of consistency, transparency, and comparability of safety practices, while simultaneously strengthening the international competitiveness of Austrian health tourism destinations.

This interpretation is consistent with safety culture and management system standards, which emphasize documented procedures, risk assessment, monitoring, corrective measures and continuous improvement (Cooper, 2000; Antonsen, 2009; ISO 45001:2018).

The findings further confirm that safety in spa and wellness environments requires coordinated management across interrelated domains such as water safety, hygiene, occupational safety and data protection. Health resorts thus operate as complex organizational systems in which safety risks are distributed across multiple operational processes and require coordinated, system-based management approaches.

Within this broader framework, swimming pools and bathing waters emerge as a particularly critical point of risk concentration. These environments combine physical hazards, microbiological risks, and increased liability exposure, making them central to both regulatory oversight and operational risk management. The manner in which these risks are managed provides a clear indication of the underlying regulatory logic, distinguishing between compliance-based and system-oriented approaches to safety.

Overall, the analysis confirms that the role of standards is context-dependent and closely linked to the structure of the national regulatory environment. Rather than representing a universal solution, standards function as adaptive instruments whose organizational significance varies according to institutional arrangements. Across all three countries, however, their contribution to improving process transparency, strengthening risk management practices, and enhancing safety culture remains a consistent and critical element.

The study is limited by its reliance on secondary sources and formal regulatory documents. It therefore does not empirically assess the actual implementation of standards in individual facilities, the perceptions of guests and employees, or the economic effects of safety management systems. In addition, the focus on three countries limits the generalizability of the findings, although it enables an in-depth comparison of different regulatory models.

CONCLUSION

This study examined legal frameworks and safety standards in health resorts and spa-wellness facilities in Slovenia, Croatia and Austria, with the aim of identifying different regulatory approaches to safety management in health tourism. The analysis identified three distinct regulatory logics: a compliance-oriented Slovenian model, a hybrid Croatian model and an integrated Austrian model. These models differ primarily in how they combine legal regulation, standardization and organizational safety management.

A key contribution of the study lies in demonstrating that international standards such as ISO and HACCP do not operate as uniform instruments across regulatory environments. Their function ranges from complementary tools supporting compliance, to mechanisms enabling the operational coherence of fragmented systems, and finally to embedded components of organizational governance. This highlights the importance of understanding standardization not only as a technical tool, but as an institutional mechanism shaped by broader legal and organizational contexts.

The findings also show that transparent and verifiable safety systems are not only regulatory requirements, but strategic factors influencing trust, reputation and long-term competitiveness. From a practical perspective, the study supports a balanced approach that combines clear regulation, standards and management practices, enabling organizations to move beyond minimum compliance toward continuous safety improvement. Future research should empirically examine how different regulatory models influence guests' perceived safety, employees' safety practices and the economic performance of health tourism destinations.

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