

**The Effect of Managerial Competencies on Service
Quality
Field Study on (The Jordanian Private Hospitals at
Amman)**

أثر الكفايات الإدارية على جودة الخدمة دراسة ميدانية في
(المستشفيات الأردنية الخاصة في عمان).

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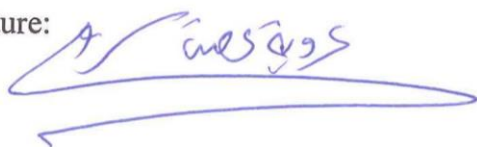
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Thesis Committee Decision

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Dedication

لم يكن اسمي على هذه الصفحات من هذا البحث العلمي صدفة، نحن من ولدنا في ازقة المخيمات باحثين عن شغفنا عن احلامنا، نحن من نقش فينا منذ سنواتنا الاولى على مقاعد الدراسة في مدارس وكالة الغوث للاجئين الفلسطينيين ان العلم والتعلم هو رساله هو طريقنا للوصول الى حقنا في امنا فلسطين، نحن من سنورث قضيتنا جيل بعد جيل الى ان تكون فلسطين حرة، نحن من تعلمنا انتزاع اهدافنا من قلب العدم.

اهدي هذا البحث لمن كنت ولا زلت اسعى لان ارضيه وهو تحت التراب، والدي المناضل الفدائي عصمت سرور الى روحك اهدي هذا الجهد، الى روعي ابني عصمت العربي اهديك عمري كله يا امي ، الى امي ثورة واخوتي (يافا واقداس وشهد وشهيد وقدامه) الى كل عائلتي، الى الاصدقاء الجدار المنيع العالي الذي استند عليه .

الى فلسطين وطني، الى شهداء القضية الفلسطينية الى الشهيد المثقف باسل الاعرج الى اسرى القضية الفلسطينية في سجون الاحتلال وفي السجون العربية ،الى اسرى نفق الحرية (زكريا الزبيدي ،محمد العارضة، محمود العارضة، يعقوب القادري، ايهم كممجي، مناضل نفيعات)، الى كل المخيمات الفلسطينية الى عربتنا.

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The Effect of Managerial Competencies on Service Quality Field Study on (The Jordanian Private Hospitals at Amman)

Prepared by: Oroba Ismat Sroor

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Abstract

The purpose of the current study to investigate the effect of managerial competencies on service quality on Jordanian private hospitals. The study covered, the largest (5) hospitals were selected, which include (200) beds or more, namely (Jordan, Islamic, Ibn al-Haytham, Specialization, Istiklal), Where the researcher relied on the descriptive and analytical approach while conducting this study.

The results showed that the variables of managerial competencies are applied in hospitals, as they apply communication skills within the hospital, and that managers adapt quickly to changing priorities, and also showed that senior management sets goals related to the hospital's strategic plan and showed that employees are aware of the strategic future plans of the hospital, and the result shows Also, the dimensions of service quality are also implemented in hospitals.

There is a statistically significant effect at the level ($\alpha \leq 0.05$) of Managerial competencies on service quality, Where managerial competencies are include the following variables (Communication competencies, Teamwork competencies, Self-management competencies, Strategic action competencies, Planning competencies) and Service Quality are include the following variables (Tangibles, Assurance, Reliability, Empathy, Responsiveness).

The study recommend that managers have to work actively to continuously improve their performance, as well as all employees need to participate in the hospital strategic planning. Manager takes the employee opinion before making any decision in addition to hospitals use of the latest technology in patients treatment will improve the competancies. Therefore every patient is a source of concern to the hospital staff, as they have the quick respons to patients, and getting the high focus on emergency cases.

Keywords: Service Quality, Managerial Competencies, Private Hospitals.

أثر الكفايات الإدارية على جودة الخدمة دراسة ميدانية في (المستشفيات الأردنية الخاصة في عمان)

إعداد: عروبة عصمت سرور

إشراف: الدكتور سمير موسى الجبالي

الملخص

هدفت إلى تقصي أثر الكفاءات الإدارية على جودة الخدمة في المستشفيات الأردنية الخاصة وغطت الدراسة اختيار أكبر (5) مستشفيات والتي تضم (200) سرير فأكثر وهي (الأردن، إسلامية، ابن الهيثم التخصصي، الاستقلال)، حيث اعتمد الباحث على المنهج الوصفي التحليلي في إجراء هذه الدراسة.

أظهرت النتائج أن متغيرات الكفايات الإدارية يتم تطبيقها في المستشفيات ، حيث أنها تطبق مهارات الاتصال داخل المستشفى ، وأن المديرين يتكيفون بسرعة مع الأولويات المتغيرة، وأظهرت أيضاً أن الإدارة العليا تضع أهدافاً تتعلق بالخطة الإستراتيجية للمستشفى وأظهرت أن الموظفين على دراية بالخطط الإستراتيجية المستقبلية للمستشفى ، وتظهر النتيجة أيضاً تنفيذ أبعاد جودة الخدمة في المستشفيات.

واظهرت النتائج ان هناك تأثير ذو دلالة إحصائية عند مستوى الدلالة ($\alpha \leq 0.05$) للكفايات الإدارية على جودة الخدمة حيث تشمل الكفايات الإدارية المتغيرات التالية (كفايات الاتصال، كفايات العمل الجماعي، كفايات الإدارة الذاتية، كفايات العمل الاستراتيجي، كفايات التخطيط) وجودة الخدمة تشمل المتغيرات التالية (الملموسة، والتأكيد، والموثوقية، والتعاطف، والاستجابة).

وأوصت الدراسة بأن يعمل المدراء بنشاط لتحسين أدائهم بشكل مستمر، وأن يشارك جميع الموظفين في التخطيط الاستراتيجي للمستشفى، وأن يأخذ المدير رأي الموظفين قبل اتخاذ أي قرار، وأن يستخدم المستشفى أحدث التقنيات في علاج المرضى، أن كل مريض هو مصدر اهتمام لموظفي المستشفى، وأن الموظفين سريعون في الاستجابة للمرضى، بحيث يقدم الموظفون في حالات الطوارئ أكبر قدر ممكن من المساعدة.

الكلمات المفتاحية: جودة الخدمة، الكفايات الادارية، المستشفيات الخاصة.

Chapter ONE

Introduction

Background:

Globally, healthcare plays a significant role in economic growth and stability, and the success of the health sector relies on the medical staff with high expertise and competencies. Accordingly, they contribute to the development of the health sector, which is thus reflected in the country's growth (Walt&Gilson,1994). Nonetheless, good health is not only good medical practice or expertise; it is also the ability of hospital managements to manage the hospital resources(Ochonma&Nwatu, 2018) such as human, strategy, financial and material.

Hospital management refers to that job position that is based on planning, coordination and control processes and resources in hospitals (Ying, Yang, &Jianming, 2020). Therefore, the hospital managers are usually responsible for running the medical and non-medical facilities efficiently and effectively to achieve the hospital's goals, such as human, material, financial resources, information, ideas, and time. However,Adindu (2013) revealed that healthcare management skills and competencies were not taken in medical schools or part of the core curriculum. Therefore, the poor performance and deteriorating healthcare services are caused by a lack of funding and inadequate management skills of healthcare resources(Berawi, 2021).

Successful management is the one that can manage hospitals in abnormal events (natural disasters) such as earthquakes, diseases, fires, and floods. Therefore, disasters affected people's lives, the community's functions, and the economy, affecting hospitals

copied with their resources. For example, the Covid-19 pandemic has impacted the health systems worldwide and the precipitously increasing requirements for care services for people infected with Covid-19(Haldane et al., 2021). Hence, when disasters overwhelm health systems, and hospitals cannot provide the required health care services, direct death rates increase, and the health system collapses, as witnessed by some countries. Thus, decision-makers must make difficult choices in order to deal with the COVID-19 pandemic and other disasters.

As chief executives and heads of the department in Amman, clinicians in Jordan face several challenges in managing their hospitals during poor health conditions. They lack adequate preparation and training to provide good plans and strategies, effective policymaking and enhancing decision making that enable effective management and coordinating of hospital resources and facilities for hospitals' suitable performance that enhances hospitals services delivery.

Therefore, the success of the health sector depends mainly on managers equipped with medical and management skills and competencies, which contributes to the development of the health sector and thus is reflected in the quality of service provided to their patients. Thus, this study aims to investigate the effect of the managerial competencies of managers on the service quality of Jordanian private hospitals.

Problem Statement:

Hospitals are complex and facing challenges to cope with external and internal environments such as pandemic, epidemiological transitions, new technologies and changes in health market(Kalhor et al., 2016a). Therefore, the management required to be pre-trained to

act in response to these challenges (Gregory et al., 2003; Hanlon, 2001). Therefore, the hospitals' managers are typically accountable for the medical and non-medical services (Kalhor et al., 2016a). In addition, successful managers can manage hospitals in unusual conditions, for instance, the Covid-19 pandemic (Berawi, 2021). It has affected the health systems worldwide due to the increasing need for care services for those infected with Covid-19 (Haldane et al., 2021)

According to Savic and Robida (2013) The lack of management skills and competencies among managers to allocate resources efficiently and effectively affected the health care service quality and outcomes. This is due to the healthcare management skills and competencies were not being taken in medical schools or part of the curriculum in schools (Adindu, 2013). Thus, some hospitals couldn't provide the required health care services for their patients (Kalhor et al., 2016b), as witnessed by some hospitals in Jordan due to poorly managing the resources As the researcher was cited in the current study to show the problem she researched study titled Managers' Competences in Private Hospitals for Investment Decisions during the COVID-19 Pandemic, The COVID-19 pandemic poses unprecedented challenges to healthcare systems around the world. In this context, manager involvement in decision making is associated with better analysis to achieve better results. This research aims to fill a relevant gap in the literature concerning the importance of managers' competences, in private hospitals, in investment decisions and establishing a relation with hospital performance during the COVID-19 pandemic and future work to ensure the sustainability of the patient care process. Semi-structured interviews were held with an administrative (or financial) director in Brazil, Canada and Portugal and analyzed by the conventional content analysis method and coded, the administrator's generalist

training can affect understanding of the applicability of administration concepts to this segment (health), causing delays in the hospital's decision-making. Then again, having an excellent doctor in charge of a hospital is no guarantee of the best management, as understanding the factors affecting adoption of the best management practices is fundamental to improving hospital results. Besides basic training, relevant aspects such as capacities and skills can be developed, and many leaders who are doctors can have management skills, qualities or approaches that have a positive effect on hospital quality and the value of the care provided. The results show the case of interdisciplinary training where managers contribute to the efficient use of resources and help maintain quality of care, such as hospital investment and financing where performance analysis is reflected in on decision-making. Therefore, the study will investigate the impact of managerial competencies on service quality to minimize the risk that could happen in hospitals and enhance service delivery.

Study Objectives

This study objectives to investigate the effect of managerial competencies on service quality at Jordanian private hospitals. Accordingly, it will explore the effect of managerial competencies and their dimensions (Strategic Action, Self-management, Communication, Teamwork, Planning) on service quality (Tangible, Reliability, Responsiveness, Assurance, Empathy). While the study objectives:

1. Provide a theoretical framework about the effect of managerial competencies on service quality, supporting academics and researchers about the importance of managerial competencies for hospital managers.

2. Due to the limited number of previous service quality models related to managerial competencies, this study objectives to drive a framework for implementing managerial competencies and their effect on service quality.
3. Evaluate the level of managerial competencies and service quality in Jordanian private hospitals.
4. Raise the awareness of enhancing managerial competencies among hospital managers to enhance hospital services to their patients.
5. Help managers to have good plans and strategies, effective policy making and enhancing decision-making that enables them to coordinate hospital resources and facilities for hospitals' suitable performance that enhances hospitals service quality.

Study Significance and Importance

The present study is one of the primary and leading studies that study the effect of managerial competencies on service quality at Jordanian private hospitals, and even the effect of managerial competencies on service quality for any health care center in Jordan. Further more, this study Objectives to gain valuable insight into the effect of managerial competencies on service quality at Jordanian hospitals, other healthcare centres or clinics, and managers who make the decisions. This study also maybe interest academic studies related to the decision making concerning the service quality.

Therefore, the value of this study arises from the following scientific and practical considerations:

1. Drive the attentiveness to the managerial competencies and their influence on enhancing service quality of Jordanian private hospitals.
2. Highlight the importance of the managerial competencies variable and its effect to minimize hospital risks by enhancing managers decisions.
3. Support other research in managerial competencies and their importance either on enhancing the health sector or other sectors.
4. Support the decision-makers in the health sector or even other sectors and give recommendations for providing good services.

Therefore, this study is directed to answer the following main question: Do managerial competencies effect the service quality at Jordanian private hospitals?

Study Questions

The problem of study can be identified by answering scientifically and in detail the following questions:

Study questions:

1. What is the availability level of managerial competencies in Jordanian private hospitals?
2. What is the availability level of quality service in Jordanian private hospitals?

Study Hypothesis

The mentioned above question will be answered through testing the following hypothesis:

The main hypothesis **H1**: Managerial competencies has aEffect role in Enhancing Service Quality in amman privet hospitals at $\alpha \leq 0.05$

- **H1.1:** Communication Competency have aEffectrole in Enhancing Service Quality $\alpha\leq 0.05$.
- **H1.2:** Teamwork Competency have aEffect role in Enhancing Service Quality $\alpha\leq 0.05$.
- **H1.3:** Self-management Competency have aEffectrole in Enhancing Service Quality $\alpha\leq 0.05$.
- **H1.4:** Strategic action Competency have aEffect role in Enhancing Service Quality $\alpha\leq 0.05$.
- **H1.5:** Planning Competency have aEffect role in Enhancing Service Quality $\alpha\leq 0.05$.

Study Model

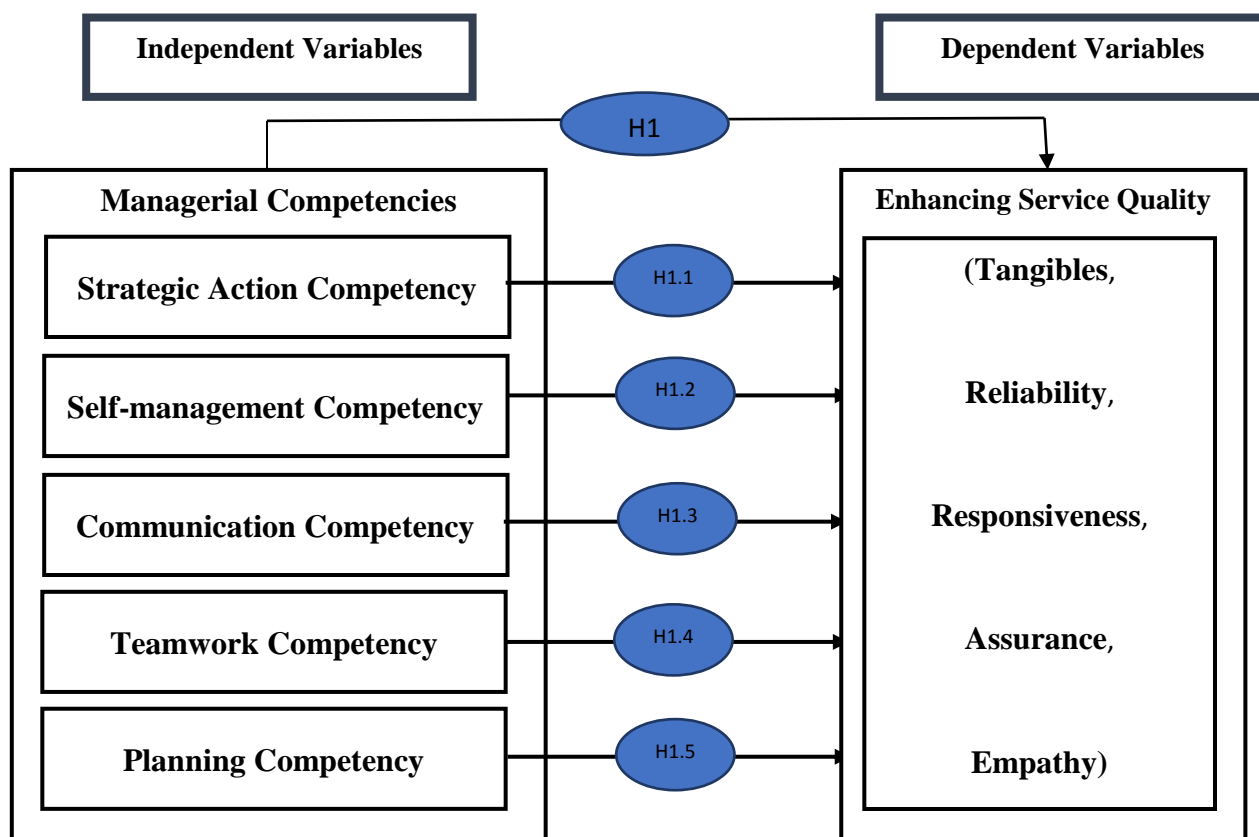


Figure (1) Study Model

Sources: McFarlin (2019), Vijay & Ajay (2011), Turner (2014), Brits and Veldsman (2014), Fitzgerald and Theilheimer (2013), Bhardwaj and Punia (2013) and Yoo (2005).

Study Limitations and Delimitations:

Human Limitation: This study will be carried on chief executives and department heads who work at Jordanian hospitals.

Place Limitation: This study will be carried on Jordanian hospitals located at Amman.

Time Limitation: This study will be carried within the period between summer and 1nd semester of academic year 2020/2021.

Study Delimitation:The study was carried out in Amman-Jordan; therefore, generalizing results of one sector and other similar sectors. However, widening the analyses to other countries in different sectors represents potential future research works. Also, this study idea can be done within the same sectors by using additional testing and techniques with larger collected data. Therefore, including other sectors will help to minimize the risk of other sectors to generalize the results.

Conceptual and Operational Definitions of Key Words:

Managerial competencies

According to Hellreigel et al. (2004), managerial competencies refer to managers' behaviours that reveal attitudes, skills, knowledge, and synergy that will enhance their results and add value for themselves. Brits and Veldsman (2014), illustrated competencies as a combination of the knowledge, skills and attributes needed to carry out a particular job. In Pareek (2014), the individual needs skills, attitudes, behaviours, and knowledge to manage any organisation effectively. They include strategic action competencies, global

awareness competencies, planning competencies, self-management competencies, communication competencies and teamwork competencies.

- **Strategic action competencies:**

Strategic action competencies refer to the manager's ability to take hold of the organization's strategy and make sure that all employees' goals and efforts align with the organization's strategy McFarlin (2019). Creative thinker leadership needs to convey organizational skills, knowledge collectively, and strategic capacity to help managers grow up and succeed in their companies. McFarlin (2019) indicated that the main key parts strategic action competencies are forecasting and foreseeing other competitors' actions.

- **Self-management competencies:**

Self-management competencies are the important individual traits and abilities that would help managers or own businesses to oversee their businesses effectively and efficiently (Vijay & Ajay, 2011). This comprises self-control and stress tolerance, self-motivation (Vijay & Ajay, 2011), determination and self-belief (Turner, 2014), self-management (Vijay & Ajay, 2011), and emotional intelligence and self-awareness (Vijay & Ajay 2011).

- **Communication competencies:**

Communication competencies are the ability of managers or business owners to communicate with others through nonverbal, verbal, and written communication competencies McFarlin (2019). Therefore, the managers should have the required communication talents to communicate in the business world to achieve business goals McFarlin (2019).

- **Teamwork competencies:**

Fitzgerald and Theilheimer (2013) indicated that teamwork competencies are the willingness of individuals to work with others as part of one team to achieve the aims or targets of the team.

- **Planning competencies:**

Bhardwaj and Punia (2013) found that planning competencies are the ability to plan the organization needs that would be achieved effectively and efficiently to harmonize appropriately and to involve all relevant resources. Also, it is determining the needed activities and resources to achieve the organization aims and goals.

Service Quality

The five dimensions or factors of quality service are tangibles, reliability, responsiveness, assurance, and empathy. The definitions of five dimensions are as follows (Yoo, 2005):

1. Tangibles: Appearance of physical facilities, equipment, personnel, and communication materials
2. Reliability: Ability to perform the promised service dependably and accurately
3. Responsiveness: Willingness to help customers and provide prompt service
4. Assurance: Knowledge and courtesy of employees and their ability to convey trust
5. Empathy: Caring, individualized attention the firm provides its customers

Chapter TWO

Theoretical Framework and Previous Studies

Managerial Competencies

History of Competencies

According to Chouhan & Srivastava, Back in 1953, American management guru David McClelland first recognized what he called "competence" as human trait. In 1959, Robert White and later McLagen, Richard Boyatzis, Sean Spencer, and David Ulrich developed the concept of competencies for the survival and sustained competitive advantage of the organization.

In 1973 David McClelland, Harvard professor of psychology and founder of McBer and Company (now part of the Hay Group), wrote a seminal research paper: "Testing for Competence Rather than Intelligence," causing an industry stir in psychology. McClelland's research found that while traditional tests of academic ability and content were good predictors of academic performance, they rarely predicted performance in the workplace. It raised questions about the reliability of intelligence tests as a predictor of job success and stated that "the correlation between intelligence test scores and job success can often be an artifact, the product of their joint association with class status." McClelland went on to argue that the best predictor of outstanding performance at work is the underlying, enduring personal characteristic, which he calls "competencies." Since then, McClelland's and later Hay Group have conducted 30 years of global competency research, and McBer research results have been cross-culturally verified. Therefore, the history of competence can be traced back to the early 1970s, when industrial psychologists and human resource managers

were looking for ways to predict job performance. McClelland launched a competency modeling movement in the United States by outlining accepted alternatives to intelligence testing as an approach to predicting "competency ." McClelland's research (1973, 1998) focused on applications in the education sector, but there was growing interest in business and industry. McClelland's thinking provided a compelling argument against the assumption that intelligence tests alone are sufficient to assess individual results. It was the elements of accountability and effectiveness inherent in his thinking that stimulated attention outside the classroom. Since his research, the competence-based approach has also been widely used and applied in various fields such as primary and secondary education, higher education and organizational research. (Chouhan & Srivastava, 2014)

The use of the term competency and its surge in "business speech" is due to Richard Boyatzis (1982) and his book "The Competent Manager". Boyatzis defines competency as "the fundamental characteristics of a person who delivers effective and / or superior performance at work." It has been suggested that latent characteristics may include motivation, traits, skills, one aspect of self-image or social role, or knowledge system. Spencer and Spencer further promote Boyatzis' original work. (Richard Boyatzis, 1982)

They define competence as a potential characteristic of an individual that is causally related to the effective and/or outstanding performance of the reference standard in the work or situation." (Spencer, 1993)

Definitions of competence

Definitions:

McClelland (1973) He defined competence as a personality trait or set of habits that lead to more efficient or superior labor productivity, in other words, an ability that gives an obvious economic value to a person's efforts at work. (McClelland, 1973).

Klemp (1980) Competencies are defined as "the fundamental characteristics of a person who delivers effective and / or superior performance at work. (Klemp, 1980)

Boyatzis (1982, 2007) The term "competency" is adopted as "a potential characteristic of an individual, which is accidentally (a change in one variable leads to a change in another variable) related to outstanding performance at work , He pointed out that good managers often possess 19 common abilities. He divides these 19 general management capabilities into five different clusters, as a goal and action management, leadership, human resource management, directing subordinates and focus on others. (Boyatzis ,1982, 2007)

Hornby and Thomas (1989): Competence is the ability to effectively perform management-related functions in the work environment(Hornby & Thomas,1989).

Jacobs (1989): Competence is an observable skill or ability to successfully complete a management task.(Jacobs,1989)

Hogg B (1989): Competencies are the qualities of a manager that lead to the evidence of skills and abilities that lead to effective performance in a professional field. Competence also includes the ability to transfer skills and abilities from one area to another. (Hogg,1989).

Spencer and Spencer (1993): Competencies are skills and abilities that you can do, acquired through work, life experience, study or training. (Spencer, Spencer, 1993).

Page and Wilson (1994): after reviewing 337 citations regarding competencies, We defined it as "the skills, abilities, and personal characteristics that an effective "or" good "manager needs." One thing to note about this definition is that it includes directly observable and testable competencies such as knowledge and skills, as well as low-rated competencies related to an individual's characteristics or individual competencies (Page and Wilson, 1994)

Gilbert (1996): The ability to consistently produce the most effective and effective results required to achieve the larger organizational goals (the valuable results of behavior). (Gilbert, 1996)

McLagan (1997) defines competencies as the demonstrated knowledge, skills, abilities, attitudes and other attributes that underlie effective work. (McLagan, 1997).

Dubois (1998): Competencies are traits such as knowledge, skills, thinking, and thinking patterns that improve performance when used alone or in various combinations. (Dubois, 1998)

Evarts (1998) : The fundamental characteristics of a manager who is causally related to his / her excellent performance at work (Evarts, 1998)

Woodall and Winstanley (1998) : maintain competence "the skills, knowledge and understanding, qualities and attributes, values, beliefs and attitudes that lead to effective

management of performance in a specific environment, situation or role.(Woodall and Winstanley ,1998)

Swanson & Holton (2001) :competencies reflect task-specific actions found within an individual's particular domain of knowledge.(Swanson, 2001)

Rice (2006): Competency-based leadership development is deliberately focused on a clear career orientation, not just drifting, according to him, which reflects leadership development among US healthcare executives. Meanwhile, he emphasized that a disciplined approach to career growth improves organizational performance.(Rice,2006).

Rothwell et al. (2004)Efforts to solve competency problems in American projects have evolved from the early focus on the distinction between best-class (model) and fully successful performers to the link between organizational strategy and organizational and personal performance.

The interest in competence-based approaches is growing. Training and development professionals use competency models to clarify organization-specific competencies, to improve human performance and to combine individual skills with the core competencies of the organization.

Gaspar (2012) Competency-based selection methods have proved to be sound, structured, and comprehensive. Candidates are evaluated based on their ability to demonstrate when they are introduced into the organization.Performance management and competency systems help employees diagnose their future training and development needs and assist HR executives in making decisions such as promotions and transfers. (Robert, 2012)

Managerial competencie

Managerial competencie is defined as the ability to perform the skills necessary to properly perform a particular job(Miller & Drake,1982),

According Martina,, Hana, & Jiri (2012) Competency is a term commonly used by people to claim their potential in actual activity.

There are many definitions of this term at present, in principle there are two types:

The first is Characterize competencies the scope of authority associated with a particular person or body and power **The second** meaning of competencies relates to the capacity, that is, the ability to carry out a certain activity, to possess certain general and specific characteristics and abilities, to be qualified in the given field.

In general, it is a set of specific knowledge, abilities, skills, traits, motivations, attitudes, and values that are essential for an individual's growth and successful participation in the organization. This actually means what you need to do to achieve the level of performance you need.

This refers to aspects of competency performance that are determined by the level of input (knowledge, abilities, skills, traits, motivations, attitudes, values) and measured by analysis of outputs (actual behavior and outcomes).

According to their development, competencies can be divided into three main stages of development:

The first stage includes personal competencies (White, 1959; McClelland, 1973; Boyatzis, 1982; Schroder, 1989; Woodruffe, 1992; Spencer & Spencer, 1993; Carroll & McCrackin, 1997).

The second stage is based on the possibility of using competency models to manage competencies within your organization (Mansfield, 1996; McLagan, 1997; Lucia & Lepsinger, 1999; Rothwell & Lindholm, 1999).

The third stage is to identify core competencies, that is, the sum of the key organizational competencies of the organization that can be used to gain a competitive advantage (Pralhad & Hamel, 1990; Ulrich & Lake, 1991; Gallon, Stillman, & Coates, 1995; Coyne, Hall, & Clifford, 1997; Rothwell & Lindholm, 1999; Delamare & Wintertone, 2005).

The survey was focused on management competencies which is a specific type of individual competencies. (Martina, Hana, & Jiri, 2012).

Boyatzis (1982) Managerial competencies are The activities, knowledge, skills, or attitudes necessary to improve management performance, and perhaps personal characteristics. (Boyatzis, 1982).

Schroder (1989) Use similar competencies to classify and distinguish between basic competencies and high-performance competencies. Basic competencies are defined as the knowledge and skills essential to performing the job of a manager. They involve specific tasks and ensure the personal efficiency of the manager. High-performance competencies are relatively stable behaviors that enable entire teams, led by a manager, to achieve superior results above standard. High performance competencies is further subdivided into

cognitive ability, motivation ability, direction ability and performance competencies.(Schroder ,1989)

Competence is defined as an ability or a capability ; It's made up of a variety of different behaviors arranged around a corepattern.Competencies require both intent and action Outstanding performers are distinguished from average performers by three groupings of abilities. (Spencer,1993) (Boyatzis,2008)

Spencer and Spencer (1993) managerial competencies are a specialized subset of competencies expresses the intent to have certain effects.These particular intents are especially important to managers. (Spencer and Spencer, 1993)

Hogg (1993) managerial competencies lead to evidence of abilities and skills,which Lead to effective performance in the occupational field. (Hogg ,1993)

Boyatzis (2008) Outstanding Managers in the last 30 years seem to need the competencies threshold clusters(an assortment of basic cognitive competencies ,expertise , experience,and knowledge) and the competence clusters, which are very different from average performers(social intelligence competencies ,cognitive competencies, emotional intelligence competencies). (Boyatzis ,2008)

Managerial competencies The knowledge and skills of staff are still the sole constants that characterize a company's success. Managerial competences are depending on the knowledge and abilities of managers, which can either restrict or support their growth and are quickly becoming a vital component of a company's survival.(Allredge and Nilan, 2000)

evaluating the competency

Munyewende et al (2016) Listed six main areas for evaluating the competency of nursing managers in primary health care clinics including (planning and priority setting, problem-solving, communication, staff management and financial management,) and argued that training programs need to place more emphasis on the financial management competence. (Munyewende et al, 2016)

Tongmuangtunyatep et al (2015) Developed a competence scale for chief nurses in community hospitals It consists of five factors (communication, professional ethics, leadership, management and healthcare environment management). (Tongmuangtunyatep et al, 2015)

In-depth understanding of competency types as per (Jennings et al 2011) 10 Nursing competencies Skills Identified personal qualities, interpersonal skills, thinking skills, setting the vision, communicating, initiating change, developing people, health care knowledge, and management and business skills (Jennings et al 2011).

Definitions of dependent variable:

In essence, quality is analyzed based on four management perspectives: (1) the user-based approach (2) the manufacturing-based approach, (3) the product-based approach, and (4) the value-based approach. In these approaches, quality is seen as an operational, technical, and manageable issue. (Pakdil, 2020)

Quality Definition

quality : (Kelemen 2003) From a management perspective, quality is an independent process that can be planned, managed and controlled by related functions and departments. (Kelemen, 2003)

According to Juran, quality basically means “*fitness for use*”. (Juran and Gryna ,1980)

Juran and Godfrey (1999) Define quality as the absence of defects. which mean, According to their definition, quality also means that there will be no mistakes that need to re-run the process. which are also known as rework or or that result in field failures, customer dissatisfaction and customer demands.(Juran& Godfrey ,1999)

Crosby (1979): defines quality as “*conformance to requirements*” It addresses the important role of “*zero defects*” in quality literature and suggests the benefits of “*doing it right the first time*”.

Deming focuses on the impact of senior management on quality transformation, while Juran emphasizes the impact of middle management Quality responsibility. and he Develop philosophy that quality should be the responsibility of everyone, every position and every department, because quality improvement is the responsibility of everyone in the organization. (Juran and Gryna ,1980)

According to (Pakdil 2020) in (Fig. 1.1) Deming's Chain Reaction focuses on the relationships between quality, performance, cost, and sustainability in business organizations.(Pakdil , 2020)

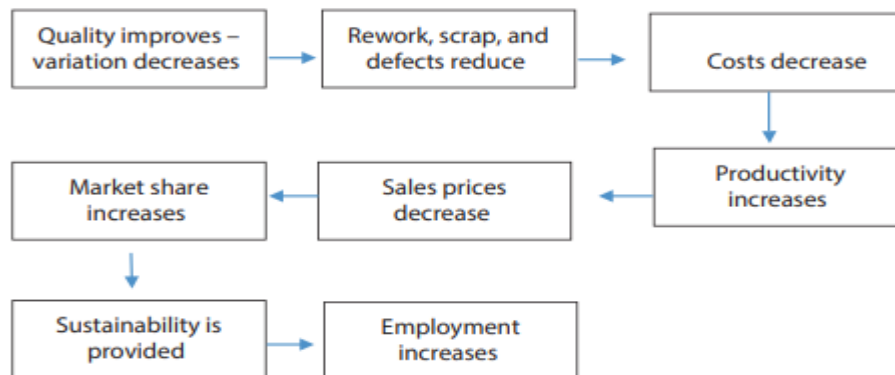


Fig 1.1 Deming’s Chain Reaction. (Deming, 1986)

According to (Pakdil 2020) in (Fig. 1.2) The PDCA (Plan-Do-Control-Act) cycle is an important part of the continuous improvement concept and is also known as the Deming wheel, Deming cycle and Shewhart cycle. PDCA is at the core of continuous quality improvement activities.(Pakdil , 2020)

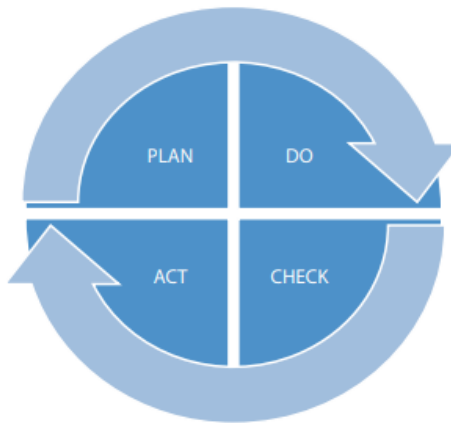


Fig. 1.2 Deming cycle(Deming, 1986)

Deming (1986) 95% of defects are due to system related causes while only 5% are due to human related causes. In other words, if the organization designs the system so that employees do not make mistakes or failures, the system will have less variability and defects. As systems improve, the number of defects and defects will decrease.

In other words, if the organizations design their systems in a way that do not let the employees make mistakes or fail, the systems will produce lower variation and defects. (Deming ,1986)

Taguchi (1986) stated that “quality is the loss a product causes to society after being shipped, other than losses caused by its intrinsic functions.”

There are two categories of Taguchi quality definitions. (1) loss caused by variability of function and (2) loss caused by harmful side effects. By Taguchi's definition, society includes all relevant employees, stakeholders such as , customers, unions ,related government agencies, and producers.(Taguchi ,1986)

Service quality Definition:

Lewis and booms (1983) He said service quality is a measure of how well the level of service provided meets customer expectations. (Lewis &booms ,1983)

Krajewski&Ritzman (2000) They define service quality from the perspective of the service provider and from the perspective of the beneficiaries of the service. From the perspective of the service provider, quality is the consistency of the service with the previously set standards for the service, and from the beneficiary (customer) perspective, the quality of the service is the consistency of the service with its purpose. (Krajewski&Ritzman , 2000)

Alexandris, et al. (2004) He said service quality is an important predictor of respondent loyalty and adds to the existing set of evidence of the importance of quality service to maintain loyal consumers. (Alexandris,et al ,2004)

Hu, et. al. (2009)service quality includes five aspects:empathy, assurance, responsiveness, concreteness, and reliability. (Hu, et.al, 2009)

Kumowal, et. al. (2016) Service quality determines how far the difference is between reality and customer expectations for the services they have. (Kumowal, et. al,2016)

Mosadeghrad (2013) stated that high-quality service is available, fair and satisfies both providers and customers : providing accurate service at the right time with a minimum chance of loss leads to the satisfaction of both the receiver and service provider (Mosadeghrad ,2013)

Measuring service quality

Oliver's (1980) Disconfirmation model, as the gap between expectations and perception of the level of service performance. they suggest that the overall quality of service can be measured by the SERVQUAL scale, which uses five general dimensions : empathy (Ease of access, approachability and effort to understand customer needs), assurance (The competence and credibility of the system in providing courteous and safe service) ,reliability (the ability to reliably and accurately perform the promised service); responsiveness (willingness to help clients and prompt service) ;and tangibles (the appearance of personnel, communications materials, physical facilities, and equipment). (Oliver's ,1980)

Parasuraman et al. (1988) The most famous model of service quality It has five dimensions and can be interpreted as follows: (empathy ,assurance, responsiveness, tangibility, and reliability). (Parasuraman et al , 1988)

Ali, et. al.,(2021) In relation to service quality issues, there are five dimensions of service quality or ranges, which are very important for customer satisfaction, and in another sense, customer loyalty is in the aspect of service quality impact, including: (empathy) Two important points in this dimension are confident with attention or trust The company has a responsibility to make them satisfied of loyalty and good trust

,assurance refers to the trust and confidence of the customer, which means that any company or market needs a strong ability to inspire customers with good confidence, responsiveness Propensity to support customers and help them provide prompt service. The company's rapid response will attract customers to deal with customer needs, problems, its tangibility This is very important because the customer and tangible issues are related to getting the customer's attention to quality of service by matching the tangibles associated with these services provided by the tangible service leads. It is the presence of physical materials, devices, personnel and correspondence), and reliability is the capacity to continuously and accurately achieve the promised service. This decrease implies that the business provides its guarantees in terms of delivery, organization of services, problem solving and cost). (Ali, et.al, 2021)

Previous Studies:

Ochonma & Nwatu (2018) study titled: **Assessing the predictors for training in management amongst hospital managers and chief executive officers**. A cross-sectional study of hospitals in Abuja, Nigeria, aimed to investigate the factors that may affect hospital managers obtaining training and experiences in management in Nigeria. Descriptive and Inferential statistics were used to summarize the results. The data was collected from 125 management staff of 25 hospitals. This study found that management training amongst managers in Nigerian hospitals is essential to **enhance planning and policymaking**. Also, the results indicated that the hospitals' managers need both informal and formal training in health management that would enable them efficiently to manage the hospitals' responsibilities to deliver proper services. Therefore, the authors

recommend offering a short course in hospital management in the university of a healthcare programh.

Faraji-Khiavi, Ghobadian, &Moradi-Joo(2015)study titled: The association between effectiveness of the management processes and quality of health services from the perspective of the managers in theuniversity hospitals of Ahvaz, Iran. This study investigates the relationship between knowledge management and health services quality in Iran among managers. The population consisted of 120 healthcare managers from hospitals, Three questionnaires were used for data collection. The results indicated that the knowledge management processes play an avital role in enhancing the health services quality. Furthermore, the authorssuggested that the hospital invest heavily in developing culture, innovation, teamwork, communication, and creative thinking to improve the health services in hospitals.

Supic, Bjegovic, Marinkovic, Milicevic, &Vasic(2010)study titled: Hospital management training and improvement in managerial skills:Serbian experience. This study aimed to improve the top managers' managerial skills in hospitals after providing a training programme in management. The data was collected from 107 managers from 20 hospitals. The managers self-assessed the improvement in their managerial skills before and after the training programme. The results found that managers skills had improved after taking the training programme. Also, the improved skills include organizing routines activities, guiding others, motivating, supervising, and situation understanding and analysis.

Toygar&Akbulut(2013) study title: Managerial Skills of Hospital Administrators: Case Study of Turkey. The study was conducted to explore problem-solving and decision-

making skills in hospital management. Also, the impact of other managerial skills on problem-solving and decision-making. The population of the study consisted of 494 hospital managers from 26 hospitals in Turkey. The results showed that managers' problem-solving and decision-making skills strongly correlate with other managerial skills such as motivation, team performance, and commitment.

Karamitri, Kitsios, & Talias (2020) study title: Development and Validation of a Knowledge Management Questionnaire for Hospitals and Other Healthcare Organizations. This research study aimed to identify knowledge management concepts and investigate the organizational factors affecting all aspects of hospitals' knowledge creation process. The authors introduce a new Applied Knowledge Management Instrument (AKMI) questionnaire and a pilot test was conducted and the data was collected from 261 health professionals. The questionnaire consisted of 9 dimensions perceptions of KM, knowledge synthesis and sharing, cooperation, intrinsic and extrinsic motivations, barriers, leadership, and organizational culture. The results found that Learning is a crucial component of the knowledge management process. Also, the competitive advantage can be achieved through knowledge creation. Therefore, the developed questionnaire could be considered a tool to help policymakers enhance healthcare performance.

Moghaddam et al. (2019) study titled: **Managerial competencies of head nurses: a model and assessment tool.** The aimed of this study is to provide an effective tool for evaluating the management competencies of the head nurses of the hospital departments. This study was cross-sectional First, a competency model was developed through a literature review, Delphi technique, and an expert group. Then, using an analytic hierarchy

process, the competencies were weighed and prioritized. Finally, based on the model, a tool was developed to measure the competencies of chief nurses. The validity and reliability of the instrument was also checked. The proposed structure includes 27 competencies, grouped into four main management tasks: planning, organization, leadership and control. The results showed that strategic thinking was given the highest priority (0.1221) and the lowest priority was given to fact-based decision making (0.007). Based on the results of the impact assessment and the content fidelity factor, the content of all questions has been validated. In addition, 11 questions have been omitted or modified through the use of the Content Credibility Index. This study found that Nursing management plays an important role in today's healthcare institutions, so further discussion is needed on the leadership and management competencies of nurse managers. In fact, hospital chief nurses need to not only perform clinical practice, but also perform administrative tasks entrusted to them as part of their administrative responsibilities. In order to complete the task effectively, they should have the basic competencies to guide them in this direction.

Kalhor, R., Tajnesaei, M., Kakemam, E., Keykaleh, M. S., & Kalhor, L. (2016) Kalhor study titled: **Perceived hospital managerial competency in Tehran, Iran: is there a difference between public and private hospitals?** . This study aims to assess the competency level of hospital managers and compare their competency in public and private hospitals, This was descriptive-analytic study conducted in 2015. A survey of 127 public and private hospital managers in Tehran Province, Iran, was conducted using a self-administered questionnaire. The results show that Iran's public sector lacks management capabilities, and there is a small gap between the public sector and the private sector. Managers currently working in Iranian hospitals need to improve their current and

future management competencies by implementing formal academic programs, management courses, and new innovative management development programs and close mentoring and coaching. Workshops should be held to let managers understand the latest developments in management theory and practice, so as to improve their knowledge and skills required for hospital management. At the academic level, it is recommended to revise the HCM courses. (Kalhor et al ,2016)

Chouhan&Srivastava (2014) study titled: **Understanding Competencies and Competency Modeling — A Literature Survey** .This paper aims to explore the concept of competence in depth, tracing its history and its role in the current situation.so The competency mapping process helps organizations develop clear strategies for developing employee competencies. The study reviewed leading global articles on this topic in order to gain an in-depth insight into the assignment of competencies in organizations. here is the snapshot from a comprehensive literature survey.the studt result is Developing and applying competency models is a proven approach to investing in talent to achieve a more effective and productive workforce. Competencies can be used to translate strategies into individual work-related skills and behaviors that people can easily understand and implement. Knowledge and use of the information contained in the competency model, as well as awareness of the strengths and weaknesses of individual competencies, allows individuals to manage future work or career success, navigate current career paths, and new careers. You can apply information to find out about opportunities, Consider utilizing transferable competencies. (Chouhan&Srivastava,2014)

Righolt, A. J., Walji, M. F., Feine, J. S., Williams, D. M., Kalenderian, E., & Listl, S. (2020) study titled: **An International Working Definition for Quality of Oral Healthcare**, The aim of the study was to establish a working definition of oral care quality that will help drive further improvements in the quality of oral care in healthcare. A 3-stage approach was used, which consists of the following: 1) literature screening. 2) expert-based compilation of an initial list of topics; and 3) a World Café, which took place during the annual general meeting of the International Association for Dental Research (IADR) in 2018. The study result is that the care offered should be tailored to the needs and preferences of the patient. Practical definition of oral health care quality consisting of 7 domains—patient safety, effectiveness, efficiency, patient centeredness, equitability, timeliness, access to care. (Righolt et al., 2020)

Pillay, R. (2010) study titled: **The skills gap in hospital management: a comparative analysis of hospital managers in the public and private sectors in South Africa**. As part of the overall management development process, this study aims to identify key skills in healthcare service management and evaluate the administrator's self-assessment proficiency in each of these skills. We also looked at the impact of past training on perceived competency levels. A cross-sectional survey using a self-administered questionnaire was conducted among 404 hospital managers in the South African public and private sectors. The study result is The biggest difference between average importance and average skill ratings for public sector managers was HR management skills, task-related skills, and self-management skills. The main deficits for private sector managers were in human resource management skills, self-management skills, and health care skills. It has been found that informal management development programs are more valuable for

improving management skills. These findings reflect the reality of the local health service environment and the needs of health managers. It will contribute to the conceptualization, design and implementation of health management plans aimed at improving the current and future management and leadership capabilities of the South African health sector. (Pillay, 2010)

Faraji-Khiavi, F., Ghobadian, S., & Moradi-Joo, E. (2015) study titled **The association between effectiveness of the management processes and quality of health services from the perspective of the managers in the university hospitals of Ahvaz, Iran**, Introduce knowledge management as a key element of organizations quality improvement. The aimed of this study is to clarify the relationship between the effectiveness of the knowledge management process and the quality of medical services from the perspective of a manager in a teaching hospital in Ahvaz.

In this correlation and study, the study population consisted of 120 managers at the Medical Sciences Ahvaz University Hospital. Due to the small number of population, the census was carried out. Three questionnaires were used to collect data: demographic characteristics, the effectiveness of knowledge management processes and the quality of medical services. The study result is estimation of average scoring of the effectiveness of knowledge management processes and its components were relatively appropriate. Quality of medical services was estimated as relatively appropriate. Relationship of quality of health services with the effectiveness of knowledge management processes showed a medium and positive correlation ($p < 0.001$). Managers with different genders showed significant differences in knowledge development and transfer ($P = 0.003$). (Faraji, 2015)

Alshourah, S. (2021) study titled **Total quality management practices and their effects on the quality performance of Jordanian private hospitals** .This study aimed assesses the level of implementation of Total Quality Management (TQM) and decides to investigate the relationship between total quality management (TQM dimensions) and quality performance in accredited Jordanian private hospitals.A questionnaire was used as the main data collection point in the study.A total of 330 respondents were used, with 140 respondents from five private Jordanian hospitals.The results showed a high level of application of TQM in private Jordanian hospitals. Besides, significant differences were found between the dimensions of TQM with the quality of performance.The study found that leadership commitment and quality support, strategic quality planning, information and data, training and participation, customer focus and continuous improvement had a significant quality on performance. This study could draw attention to an important TQM strategy that can help hospital managers better understand the benefits of TQM practice and therefore deliver quality improvements in their hospitals.(Alshourah, 2021)

Kakemam, E., Janati, A., Mohaghegh, B., Gholizadeh, M., & Liang, Z. (2021).)study titled **Developing competent public hospital managers: a qualitative study from Iran**. This study aimedThe hospital needs well-trained and competent managers to be responsible for strategic development, overall operations and service provision.This paper reports on the results of a recent study that focuses on identifying managerial competencie needed by middle and senior executives in public hospitals in Iran.The qualitative research design included position description analysis and focus group discussions with middle and senior-level public hospital managers in Iran.The study identified 11 to 13 key tasks required by middle and senior-level managers and confirmed that the position descriptions used by

current Iranian hospitals might not truly reflect the actual core responsibilities of the management positions. The study also confirmed seven core managerial competencies required to perform these tasks effectively. These core competencies included evidence-informed decisionmaking; operations, administration and resource management; knowledge of healthcare environment and the organisation; interpersonal, communication qualities and relationship management; leading people and organisation; enabling and managing change and professionalism. (Kakemam, 2021).

Marques, I., Serrasqueiro, Z., & Nogueira, F. (2021). **Managers' Competences in Private Hospitals for Investment Decisions during the COVID-19 Pandemic** , The COVID-19 pandemic poses unprecedented challenges to healthcare systems around the world. In this context, manager involvement in decision making is associated with better analysis to achieve better results. This research aims to fill a relevant gap in the literature concerning the importance of managers' competences, in private hospitals, in investment decisions and establishing a relation with hospital performance during the COVID-19 pandemic and future work to ensure the sustainability of the patient care process. Semi-structured interviews were held with an administrative (or financial) director in Brazil, Canada and Portugal and analyzed by the conventional content analysis method and coded, the administrator's generalist training can affect understanding of the applicability of administration concepts to this segment (health), causing delays in the hospital's decision-making. Then again, having an excellent doctor in charge of a hospital is no guarantee of the best management, as understanding the factors affecting adoption of the best management practices is fundamental to improving hospital results. Besides basic training, relevant aspects such as capacities and skills can be developed , and many leaders who are

doctors can have management skills, qualities or approaches that have a positive effect on hospital quality and the value of the care provided. The results show the case of interdisciplinary training where managers contribute to the efficient use of resources and help maintain quality of care, such as hospital investment and financing where performance analysis is reflected in decision-making.

What Differentiate the Current Study from Previous Studies?

This study might be considered as the first study to research The Effect of Managerial Competencies on service quality in the Jordanian private hospitals at Amman.

1. **Managerial competencies and service quality concepts:** It is obvious that the current study is one of the few studies which considers the effect of managerial competencies on quality services in the private hospital at Amman city. The current study expects that managerial competencies will raise the service quality in Jordanian private hospitals at Amman city.
2. **Purpose:** exceptionally this study aims to investigate the effect of managerial competencies on service quality at Jordanian private hospitals. Accordingly, it will explore the effect of managerial competencies and their dimensions (Strategic Action, Self-management, Communication, Teamwork, Planning) on service quality (Tangible, Reliability, Responsiveness, Assurance, Empathy).
3. **Environment:** Most past studies have been implemented in different countries outside the Jordan. The current study will be executed in Jordan, as one of the middle eastern countries.

4. **Industry:** It seems that not many studies have been established in hospitals. This study is dedicated to Jordanian private hospitals.
5. **Methodology:** The current study is based on descriptive and inferential methodology, most of previous researches were built on actual data and reports.
6. **Variables:** Most of previous studies and researchers take different managerial competencies, but in this research consider the most effective five managerial competencies (Strategic Action, Self-management, Communication, Teamwork, Planning).
7. **Population:** Most previous researches were targeted the public sector; the current study has been made in private managerial sector.
8. **Comparison:** This research will show the effect of (Strategic Action, Self-management, Communication, Teamwork, Planning) on service quality (Tangible, Reliability, Responsiveness, Assurance, Empathy), in the COVID pandemic period.

According to Jordan hospitals association website, (6 January 2022)

Private hospitals in Jordan

Jordan, despite its small size and limited resources, was able to achieve great achievements that made it a destination for treatment seekers from different countries of the world. As the Jordanian people are known for, Jordan is a country that is open to the world and easy to visit. It is characterized by a medium geographical location and enjoys political and security stability. Moreover, private hospitals in Jordan, which enjoy a good reputation at the global level, apply the highest international and local quality standards to ensure the quality of services provided and the safety of patients.

All of this contributed to making Jordan the first destination for medical treatment in the Middle East and North Africa, as Jordan won the award for the best medical tourism destination for the year 2014.

- There are 70 private hospitals in Jordan
- The number of employees in the private hospital sector is about 35,000 employees
- The number of doctors working in private hospitals is about 2350
- The number of nurses working in private hospitals is about 5900 nurses

Medical tourism in Jordan

Medical tourism in Jordan is considered a national achievement that raised the Kingdom's name globally, and it is an essential tributary to the national economy and one of the most important sources of national income.

Jordan has succeeded in occupying the first place in the Middle East and North Africa region as an attractive center for medical tourism.

In an effort to maintain Jordan's lead and attract more patients from traditional markets and enter new markets, the Private Hospitals Association has implemented various marketing activities and campaigns to promote Jordanian medical tourism targeting many countries such as Kuwait, Saudi Arabia, Sultanate of Oman, Algeria, United Arab Emirates and Kazakhstan, where the Association participated in conferences and medical exhibitions organized in those countries, and she met with a number of health officials in them. It also hosted delegations from a number of those countries to learn about the level of health services in private hospitals. Medical tourism in Jordan has also been promoted through

social media and various media to reach the largest possible number of citizens of the targeted countries.

It should be noted what the health sector has achieved in Jordan during the past decades, which included many achievements and successes at the regional level, including:

- Performing the first open heart surgery in the Arab world in 1970
- Performing the first kidney transplant in the Arab world in 1972
- The first test tube baby operation in the Arab world in 1987
- The first operation in Jordan to separate Siamese twins in 2021.

Jordan's continuation in achieving more of these achievements and in developing its health services, which have become up to the global level, has led to it being recognized by specialized international bodies and organizations for its role in achieving a prominent position for it on the map of the health industry.

This recognition was represented in Jordan receiving the Best Medical Tourism Destination Award for 2014, which was awarded during the International Medical Tourism Conference based on a nomination submitted by the Private Hospitals Association, and this award was covered in various international media.

Jordan was also elected to head the World Council for Medical Tourism in the month of 10/2015, and this council includes in its membership 30 countries concerned with medical tourism from different countries of the world.

In addition to its membership in the Federation of Arab Hospitals, the Private Hospitals Association joined in 2020 the membership of the International Federation of Hospitals, in

cooperation with the Accreditation Council for Health Institutions and in coordination with private, governmental, military and university hospitals, in a move that would enhance Jordan's position at the international level in the health field, and showcase its achievements medical.

The Private Hospitals Association organized the World Conference on Medical Tourism in Amman in 2017, under the patronage of His Majesty King Abdullah II Bin Al Hussein. More than 650 participants from 42 Arab and foreign countries participated in this conference. The participants in the conference decided to adopt the "Amman Declaration" to expand the umbrella of health travel, which includes 8 axes including medical tourism, dental tourism, hospital tourism, resort tourism, healthy eating tourism, sports tourism, retirement tourism and tourism available to all.

The association also organized the World Forum for Medical Tourism and Health Travel in 2019, which was attended by more than 700 participants from 52 Arab and foreign countries. The forum aimed, among other things, to promote the "Amman Declaration" to expand the umbrella of health travel and to contribute to Jordan's attraction of more patients and non-patients from different countries of the world.

Among the factors that contributed to making Jordan an attractive center for medical tourism in the Middle East and the region:

- Good reputation in providing distinguished treatment services at competitive prices that are much lower than their counterparts in the region and the world.
- Availability of highly qualified Jordanian medical and nursing cadres who are committed to providing the highest quality medical services to patients.

- Jordanian private hospitals are equipped with the latest medical devices and technology in abundance, which led to the absence of waiting lists, allowing patients to obtain diagnostic and therapeutic services in the shortest possible time, which is considered one of the important points for Arab and foreign patients.
- Implementation of international and national quality standards, and many private hospitals have obtained the National Accreditation (HCAC) and the International Accreditation Certificate (JCI).

Many other factors contributed to encouraging patients from other countries to come to the Kingdom, including security stability, which is one of the important attractions that make people come to the Kingdom for treatment. The Gallup Institute report ranked Jordan the second in a region and sixth in the world in terms of feeling safe and secure. On countries such as Sweden, Germany and the United States, in a list of 115 countries included in the report for the year 2021, and this is a very important factor for attracting patients, in addition to political stability and the existence of good diplomatic relations with most countries of the world and the possibility of many nationalities entering Jordan without a visa and speaking of its citizens It has more than one language and provides distinctive tourist, historical, religious and healing sites such as the Dead Sea and Ma'in Baths, in addition to its mild weather most days of the year.

Jordan is known for major complex operations such as cardiovascular surgery, kidney and liver transplantation, obesity, treatment of tumors, addiction, psychiatry and fertilization, which encourages foreign patients to come to the Kingdom for treatment,

especially with their confidence in Jordanian medicine, doctors and hospitals, which confirms the importance of marketing Jordan therapeutically.

In support of medical tourism, the Medical Responsibility Law was approved, and the Board of Trustees for Health Tourism and Recovery was established, which includes the various sectors concerned with medical and hospital tourism, to manage a unit operating under the umbrella of the Tourism Promotion Authority, in a move aimed at strengthening the procedures for marketing Jordan as a destination for medical and hospital tourism, and following up on all matters related to this tourism.

- Revenues from medical tourism in the Kingdom are distributed among the various sectors, where the health sector benefits with 35 percent of these revenues, while other sectors, including hotels, airlines and restaurants, benefit by 65 percent.

Investment in private hospitals

The investment environment in the Kingdom has contributed to stimulating private investment in the sector, and this has reinforced the success of the Jordanian experience in the field of medical tourism. The number of private hospitals in the Kingdom has exceeded 60 percent of the total number of hospitals in the Kingdom, and this percentage is unique to Jordan from most countries in the world, as the volume of investment amounted to more than 3 billion dinars.

In addition to the employees occupied by these hospitals, there are 60,000 people working in the support sectors related to the health sector, which is considered one of the sectors with the highest added value.

Private hospitals worked to provide infrastructure and medical and administrative staff to serve Arab and foreign patients, in addition to spending large sums of money on marketing activities and promoting Jordan as an attractive center for tourism.

There are many factors that encourage investment in the private hospital sector, in addition to its ability to attract Arab and foreign patients, in addition to the availability of internationally qualified Jordanian medical and nursing cadres committed to providing the highest quality medical services to patients.

Private hospitals invested in introducing the latest and most advanced medical devices at a large financial cost, which contributed to the absence of waiting lists, allowing patients to obtain diagnostic and therapeutic services in the shortest possible time and at low and competitive prices, which is considered one of the important incentives for Arab and foreign patients to come to Jordan for treatment.

This also contributed to helping doctors make accurate diagnosis and perform surgeries in the shortest possible time and with a high success rate.

Private hospitals also invested in providing infrastructure and medical administrative cadres to serve Arab and foreign patients, in addition to spending large sums of money on marketing activities and promoting Jordan as an attractive center for medical tourism.

Security and political stability is also an important factor in attracting investors, in addition to other factors that encourage investment, including the presence of free trade agreements between Jordan and many countries of the world, a strong banking system, the presence of a multicultural Jordanian society, in addition to the strategic location of the

Kingdom, the presence of excellent infrastructure, and the increasing demand for Private hospital services, highly qualified healthcare providers, air ambulance service, and investment incentives. The investment law exempts all construction requirements and supplies for building or expanding hospitals from sales tax and customs.

The results of investment in the public health sector were clear in terms of improving health indicators in the Kingdom, as the average life expectancy increased during the past twenty years from 66 years to 73 years, while the child mortality rate decreased from 34.6 to 17 per thousand live births, and the maternal mortality rate decreased From 40 to 19 per 100,000 live births, while the vaccination rate was 99 percent.

These figures are considered a positive indicator of the contribution of the public and private health sector to improving the level of health in the Kingdom.

Noting that health spending in the Kingdom amounts to about 9 percent of the gross domestic product.

Chapter THREE

Study Methodology

This chapter deals with a description of the study's methodology through which it can achieve its objectives, the study's approach and society, the sample that was selected and its characteristics.

Research Methods

What is meant by the study methodology is “a method of effective organization of a group of diverse ideas aimed at revealing the reality of the formation of this phenomenon” (Anderson & Poole, 2019) Where the researcher relied on the (descriptive) approach and the (inferential) approach in conducting this study in order to identify the effect of managerial competencies on the quality of service in private Jordanian hospitals in Amman. Analyzing, measuring and interpreting data and arriving at an accurate description of the phenomenon or problem in a holistic manner that is useful in generalizing the facts or knowledge that has been extracted and helps to a reasonable amount of future prediction of the phenomenon and provide solutions and proposals to address it.

Population & Sample

The study population consisted of administrative cadres working in private hospitals, and according to the annual statistical report of the Ministry of Health, the number of private hospitals in the capital reached (46) hospitals, and for the large size of the study population, the largest (5) hospitals were selected, which include (200) beds or more, namely (Jordan, Islamic, Ibn al-Haytham, Specialization, Istiklal), where the researcher prepared (Online Questionnaire) and published it via (Google Form) to all workers in

administrative cadres in cooperation with Human Resources Management, (Purposive Sample), “The Purposive sample is used to obtain information from a specific segment capable of providing information, either because of their location, or because some of the criteria set by the study are available to them, and (204) questionnaires were received, all of which are valid. For the purposes of statistical analysis.

Data Sources

1) Secondary Data:

The researcher used books, references and scientific research related to the subject of the study, and the global information network (Internet) various databases were also used to obtain the latest international research on the subject of the study.

2) Primary Data :

The study tool was the questionnaire, which was developed in a manner commensurate with the variables of the study, by reviewing previous studies related to the subject of the study, where the questionnaire consisted of the following parts:

First: Questions related to demographic information (gender, age, educational qualification, years of experience, administrative level).

Second: The questions related to the study variables were divided as follows:

Questions related to measuring the independent variable management competencies and their dimensions (communication competencies, teamwork competencies, self-management competencies, strategic work competencies, planning competencies)

Questions related to the dependent variable Service Quality and its dimensions (tangibles, **Reliability**, **Responsiveness**, **Assurance**, empathy)

The study tool was formulated in the form of a questionnaire whose final form consisted of (56) items divided into: (30) items that measure managerial competencies, and (26) items that measure service quality. The study adopted the Five Likert Scale in the questionnaire to give flexibility More for the sample members in the selection, as its value ranged between (1-5), which is shown in Table (1).

Table (1): Likert Scale

Strongly Agree	Agree	Somewhat Agree	Disagree	Strongly Disagree
5	4	3	2	1

The Likert scale was processed according to the following equation: (Subedi, 2016)

$$\text{Class length} = \frac{\text{Limits Class Upper} - \text{Limits Class Lower}}{\text{number of levels}} = \frac{(5-1)}{3} = 1.33$$

Class Length+ less weight=1.33+1=2.33 It becomes the first degree of approval (1-2.33) and at a low level To move to the second category 2.33+1.33=3.66 It becomes the second degree of approval (2.34-3.66) And at an average level To move to the third category 3.66+1.33=5 It becomes the third degree of approval (3.67-5) And at a high level.

Validity

he study tool was presented to a group of academic arbitrators with expertise and specialization whose names are shown in Appendix No. (1) to express their opinion on it in

terms of: the suitability of the questions to the content and the adequacy of the study tool in terms of the number of paragraphs, its comprehensiveness, the diversity of its content, the evaluation of the level of language formulation, or any other observations they deem appropriate. With regard to the amendment, change or deletion as the arbitrator deems necessary.

The arbitrators' notes were studied and modifications were made, such as: clarification of some terms, amending some paragraphs to make them appropriate, and correcting some language errors.

Construct Validity

Structural validity is one of the measures of validity of the tool that measures the extent to which the objectives that the tool wants to reach, and checks whether the tool is able to measure its content for which it was designed, where the value of the correlation coefficient (Pearson Correlation) was extracted: which shows the extent of the correlation of each of the paragraphs. The scale with the total score of its axis as well as determines the ability of each paragraph of the scale to distinguish. Paragraphs that are negative or whose correlation coefficient is less than (0.25) are considered low and it is preferable to delete them (Linn, & Gronlund, 2012). Table (2) shows the result of structural validity.

Table (2): Degrees of correlation between the scale items and their axis

Dimensions of the Independent Variable: (Managerial Competency)									
Communication) (Competencies		Teamwork) (Competencies		Self-management) (Competencies		Strategic Action) (Competencies		Planning) (Competencies	
A		B		C		D		E	
Paragra ph	<i>correlat ion</i>	Paragra ph	<i>correlat ion</i>	Paragra ph	<i>correlat ion</i>	Paragra ph	<i>correlat ion</i>	Paragra ph	<i>correlat ion</i>
1	0.533	1	0.836	1	0.549	1	0.751	1	0.705
2	0.646	2	0.865	2	0.747	2	0.752	2	0.783
3	0.761	3	0.856	3	0.752	3	0.770	3	0.772
4	0.770	4	0.638	4	0.694	4	0.792	4	0.765
5	0.761	5	0.812	5	0.662	5	0.750	5	0.699
6	0.802			6	0.693				
7	0.714			7	0.753				
				8	0.728				
Dimensions of the dependent variable :(Service Quality)									
(Tangibles)		(Assurance)		(Reliability)		(Empathy)		(Responsiveness)	
F		G		H		I		J	
Paragra ph	<i>correlat ion</i>	Paragra ph	<i>correlat ion</i>	Paragra ph	<i>correlat ion</i>	Paragra ph	<i>correlat ion</i>	Paragra ph	<i>correlat ion</i>
1	0.762	1	0.793	1	0.803	1	0.773	1	0.818
2	0.808	2	0.799	2	0.890	2	0.787	2	0.793
3	0.791	3	0.818	3	0.883	3	0.814	3	0.789
4	0.792	4	0.810	4	0.826	4	0.817	4	0.836
5	0.723	5	0.851			5	0.852		
						6	0.819		
						7	0.755		
						8	0.769		

We note from Table (2) that the value of the correlation coefficient for the items of administrative competencies ranged between (0.533-0.865), and the quality of service ranged between (0.723-0.890), all of which exceed (25%) and bear a direct trend (+) and this result is an indication of excellence for all items The scale is therefore considered structurally valid.

Reliability

The stability of the tool used to measure the variables included in the questionnaire has been confirmed by calculating the value of the (Cronbach Alpha Coefficient), where the result is statistically acceptable if its value is greater than (0.70), and the closer the value is to (1) one. 100%, this indicates higher degrees of stability for the study tool, (Sekaran&Bougie, 2016).

Table (3): Reliability coefficients for the study tool items based on Cronbach Alpha

Variable Name	Variable	Cronbach Alpha	number of paragraphs
Independent	(Communication Competencies)	0.839	7
	(Teamwork Competencies)	0.861	5
	(Self-management Competencies)	0.848	8
	(Strategic Action Competencies)	0.815	5
	(Planning Competencies)	0.797	5
	(Managerial Competency)	0.918	30
Dependent	(Tangibles)	0.834	5
	(Assurance)	0.871	5
	(Reliability)	0.872	4
	(Empathy)	0.898	8
	(Responsiveness)	0.822	4
	(Service Quality)	0.933	26
All paragraphs of the study tool		0.953	56

The above table shows that the value of (Cronbach Alpha) ranged between (79.7%-93.3%), and we find that the result of (Cronbach Alpha) for all paragraphs is (95.3%), so the study tool can be described as stability, and that the data obtained through it is suitable for measuring variables. They are excellent values as they are higher than the acceptable percentage (70%) and are subject to a high degree of reliability.

Test Normal Distribution

The value of the Skewness coefficient was extracted, and this test is used to measure the symmetry of the distribution, and the value that lies outside the range (± 1) indicates that the distribution is skewed to a large extent, and the value of Kurtosis has been extracted, and the distribution is normal if the value of the skewness does not exceed ± 1.96 (at the 0.05 level) (Field, 2013). The results were as shown in Table (4).

Table (4): Test results (Skewness& Kurtosis)

Variable	Skewness	Kurtosis
(Communication Competencies)	0.594-	0.231
(Teamwork Competencies)	0.521-	0.365
(Self-management Competencies)	0.563-	0.211
(Strategic Action Competencies)	0.378-	0.285
(Planning Competencies)	0.571-	0.357
(Managerial Competency)	0.658-	0.476
(Tangibles)	0.559-	0.028-
(Assurance)	0.576-	0.171
(Reliability)	0.665-	0.418
(Empathy)	0.826-	1.183
(Responsiveness)	0.611-	0.401
(Service Quality)	0.694-	0.532

Based on the test data shown in Table (2), it is clear that the data distribution was normal, as the (Skewness) values did not fall outside the range (± 1) and did not exceed the value of (Kurtosis) (± 1.96) at the (0.05) level. Figure (1) shows normal distribution.

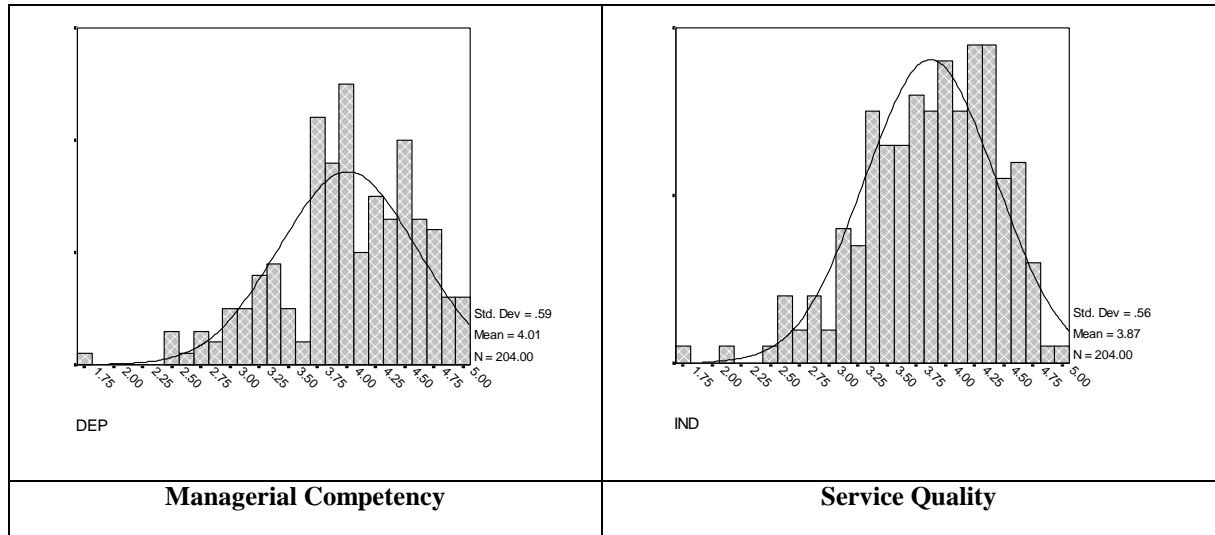


Figure (1) is the normal distribution of the study variables

Multicollinearity

To ensure the lack of multiple linear correlation, the (Variance Inflation Factor) and (Tolerance) were extracted. From (0.2) the values of the variance inflation coefficient were less than (5), which is an indication that there is no high correlation between the independent variables and this indicates the acceptance of the values and that they are suitable for conducting multiple linear regression analysis (Hair et.al.2018).

Table (5): Test results(Multicollinearity) between the independent variables

Independent Variables	VIF	Tolerance
(Communication Competencies)	2.609	0.383
(Teamwork Competencies)	2.179	0.459
(Self-management Competencies)	2.708	0.369
(Strategic Action Competencies)	2.767	0.361
(Planning Competencies)	2.497	0.400

To confirm the previous result, Pearson correlation coefficients were used between the dimensions of the independent variable to ensure that there was no high multiple linear correlation between the independent variables and the results shown in Table (6).

Table (6): Matrix of correlation coefficients (Pearson) for independent variables

Variables	Communication Competencies	Teamwork Competencies	Self-management Competencies	Strategic Action Competencies	Planning Competencies
Communication Competencies	1.00				
Teamwork Competencies	0.671	1.00			
Self-management Competencies	0.699	0.616	1.00		
Strategic Action Competencies	0.662	0.656	0.716	1.00	
Planning Competencies	0.670	0.599	0.689	0.704	1.00

Table (6) shows that the highest correlation between the independent variables is (0.716) and it was between the two variables (Strategic Action Competencies) and (Self-management Competencies), while the values of the correlation coefficient between the other independent variables were less than that and this indicates the absence of the correlation phenomenon High multiple linearity among the independent variables, as their values were less than (80%), and therefore the sample is free from the problem of high multiple linearity (Gujarati et.al, 2017).

Autocorrelation

This test verifies that the data is free from the autocorrelation problem in the regression model, which weakens the model's predictive ability. This is confirmed by conducting the Durbin-Watson Test, where its value ranges between (zero) and (4). If the value of (Durbin-

Watson) ranges between (1.5-2.5), this indicates that there is no autocorrelation problem. And it is acceptable, and Table (7) shows the results of this test, as it becomes clear that the Durban-Watson value calculated for the study's hypotheses was greater than (1.5) and less than (2.5) at a significance level of 5%, which indicates the absence of the autocorrelation problem and its validity to be used in the model Regression (Hair et.al.2018).

Table (7): The results of the autocorrelation test (D-W) for the study hypotheses

hypotheses	The calculated D-W value
H ₁	2.139
H _{1.1}	1.939
H _{1.2}	1.818
H _{1.3}	2.041
H _{1.4}	2.048
H _{1.5}	1.978
Result: no autocorrelation problem	

Statistical methods used in the study:

To answer the study's questions and test its hypotheses, the Statistical Package of Social Sciences (SPSS) was used to conduct descriptive and inferential analysis and test hypotheses through the use of the following statistical methods:

Descriptive Statistics: to display the characteristics of the sample members and describe their answers, which are shown in Table (8).

Table (8): Descriptive statistics tests and their uses

Test type	use
Frequencies and percentages	It was used to measure the relative frequency distributions of the characteristics of the sample members and their answers to the questionnaire statements
Arithmetic mean	It was used as the most prominent measure of central tendency to measure the average answers of the sample members to the questions of the questionnaire.
standard deviation	It was used as one of the measures of dispersion to measure the deviation in the answers of the sample members from their arithmetic mean.

Inferential Statistics: In order to be able to apply the statistical methods and indicators shown in Table (9).

Table (9): Tests of inferential statistics and their uses

Test type	Use
Skewness & Kurtosis	For normal distribution test.
Pearson Correlation	To test the correlation coefficients of the independent variables and the construct validity test to show the extent to which the degree of each paragraph is related to the total degree of its axis, and in order to determine the ability of each paragraph of the scale to be distinguished.
Cronbach Alpha	To test the study tool Stability.
Multiple Linear Regression	To test the effect of independent variables on the dependent variable.
(VIF) Variance Inflation Factor	To test non-interference of the independent variables of the study with the test of the power of the study model build
Durbin–Watson Test	To test the autocorrelation problem between the random errors included in the regression equation and the model's predictive ability
Simple Linear Regression	To test the effect of one independent variable on the dependent variable

Chapter FOUR:

Data analysis and hypothesis testing results

Description of the characteristics of the study sample

This part of the study aims to indicate the frequencies and percentages of the demographic characteristics of the respondents, and the following is an explanation of the sample answers.

Repetition

Table (10): Describe the characteristics of the demographic study sample:

Variable	NO	Category	Repetition	%
Gender	1	Female	64	%31.4
	2	Male	140	%68.6
	Total		204	%100
Age	1	less 26	-	-
	2	26- less 31	10	%4.9
	3	31-Less 35	22	%10.8
	4	35-Less 40	79	%38.7
	5	40-Less 45	58	%28.4
	6	45 or above	35	%17.2
	Total		204	%100
Education Level	1	Diploma or less	50	%24.5
	2	Bachelor	125	%61.3
	3	Master	24	%11.8
	4	Doctorate	5	%2.5
	Total		204	%100
Years of Experience	1	Less than 5	9	%4.4
	2	5-10	30	%14.7
	3	11-15	87	%42.6
	4	16 and above	78	%38.2
	Total		204	%100
Managerial level	1	Low level	84	%41.2
	2	Med Level	96	%47.1
	3	High level	24	%11.8
	Total		204	%100

It is noted from Table (10) that the highest percentage of the sample was males, which constituted (68.6%) and their number (140), and that the percentage of (31.4%) of females was (64). It was also found that (38.7%) of the study sample members are between the ages of 35- less than 40 years and their number is (79), while (4.9%) are between the ages of 26- less than 31 years and their number is (10). It was also found that (61.3%) of the study sample have scientific qualifications with a bachelor's degree, and their number is (125), while (2.5%) of them hold a doctorate and their number is (5). We note that (42.6%) of the study sample members have experience ranging between 11-15 years, and their number is (87), while (4.4%) have less than 5 years of experience, and their number is (9), and it was found that (47.1%) of the study sample within Middle management, and their number (96), while (11.8%) within the senior management, and their number (24)

Description of the study variables

First: Description of the independent variable (managerial competencies):

This part aims to show the arithmetic averages, standard deviations, the degree of approval, and the rank of the dimensions of the independent variable at the arithmetic averages to describe the trends of the study sample towards the dimensions of managerialcompetencies. The results were as shown in Table (11)

Table (11): Arithmetic averages, standard deviations, and the degree of approval towards the dimensions of managerial competencies

(Managerial Competency)	Mean	S. D	Application	Ranking
(Communication Competencies)	3.95	0.618	High	1
(Teamwork Competencies)	3.79	0.727	High	5
(Self-management Competencies)	3.87	0.628	High	3
(Strategic Action Competencies)	3.84	0.644	High	4
(Planning Competencies)	3.88	0.678	High	2
General indicator	3.87	.5610	High	

It is clear from Table (11) that the values of the arithmetic averages for the independent variable (Communication Competencies) with high degrees ranged between (3.79-3.95), where after (communication competencies) got the highest and with a high degree of approval, and after (teamwork competencies) the least and with a degree High from approval, and the general index of **managerial** competencies reached (3.87). Thus, it is clear that the level of administrative competencies in private Jordanian hospitals in Amman came within the high level, and this result represents the answer to the first question in the study problem, and the following is a detail of the dimensions of **managerial** competencies.

1) Communication Competencies:

Table (12) shows the arithmetic mean, standard deviation, and rank of the respondents' answers towards the dimension (communication competencies), which was measured based on (7) items.

Table (12):The arithmetic mean and standard deviation of the response of the study sample members towards communication competencies

No. A	Paragraphs	Mean	S. D	Application	Ranking
1	Communication skills within the hospital has a significant impact on staff behavior.	4.14	0.788	High	1
2	The staff share examples of times when they had to present complicated data.	3.84	0.898	High	7
3	The manager has maintained effective communication with the hospital staff	3.87	0.895	High	6
4	To connect efficiently with others, managerial staff use proper conversation impressions.	3.94	0.840	High	4
5	When the staff need to convince the staff, they describe the situations.	3.96	0.892	High	3
6	The manager communicates well with the staff	3.96	0.835	High	2
7	The manager provides feedback to staff about their progress and development at work.	3.93	0.902	High	5
Overall index		3.95	0.618	High	

The table indicates that this dimension achieved an arithmetic mean (3.95) of the total scale area, and a standard deviation of (0.618), which indicates that the level of (communication competencies) came within the high level from the point of view of the study sample. It was found from the results in Table (12) that paragraph No. (1), which states that "Communication skills within the hospital has a significant impact on staff behavior." ranked first with a mean of (4.14) and a standard deviation of (0.788), and on the other hand, the paragraph got No. (2), which states that "The staff share examples of times when they had to present complicated data." on the lowest arithmetic mean, which was (3.84) and with a standard deviation of (0.898).

2) Teamwork Competencies:

Table (13) shows the arithmetic mean, standard deviation, and rank of the respondents' answers towards the dimension (teamwork competencies), which was measured based on (5) items.

Table (13):The arithmetic mean and standard deviation of the response of the study sample members towards teamwork competencies

No. B	Paragraphs	Mean	S. D	Application	Ranking
1	The manager takes the staff opinion of before making any decision.	3.65	1.056	Medium	5
2	The manager shares ideas and exchanges them with the staff.	3.75	0.922	High	4
3	The manager in the hospital shares responsibilities with the employee.	3.75	0.890	High	3
4	The manager adapts fast with priorities changing.	3.95	0.817	High	1
5	The flexibility of the staff helps me work well and effectively.	3.87	0.829	High	2
Overall index		3.79	0.727	High	

The table indicates that this dimension achieved an arithmetic mean (3.79) of the total scale area, and a standard deviation of (0.727), which indicates that the level of (teamwork competencies) came within the high level from the point of view of the study sample members. It was found from the results in Table (13) that paragraph No. (4), which states “The manager adapts fast with priorities changing.” occupied the first rank with an arithmetic mean of (3.95) and a standard deviation of (0.817), and on the other hand, paragraph No. (1) which states that “The manager takes the staff opinion of before making any decision.” on the lowest arithmetic mean, which amounted to (3.65) and with a standard deviation of (1.056).

3) Self-management competencies:

Table (14) shows the arithmetic mean, standard deviation, and rank of the respondents' answers towards the dimension (self-management competencies), which was measured based on (8) paragraphs.

Table (14):The arithmetic mean and standard deviation of the response of the study sample members towards self-management competencies

No. C	Paragraphs	Mean	S. D	Application	Ranking
1	the managers work actively to improve their constantly.	4.03	0.768	High	2
2	the managers realize that if they want to go to a higher and different level, that requires different skills.	4.05	0.838	High	1
3	the managers always want to get feedback.	3.73	1.013	High	7
4	the managers invest in their mistakes and turn them into strengths points.	3.62	1.056	Medium	8
5	the managers accept criticism.	3.95	0.892	High	3
6	the managers are not offensive in self-defense.	3.79	0.888	High	6
7	the managers accept talking about errors and shortcomings.	3.87	0.844	High	5
8	the managers develop their competencies in the hospital based on the hospital's strategy.	3.93	0.882	High	4
Overall index		3.87	0.628	High	

The table indicates that this dimension achieved an arithmetic mean (3.87) of the total scale area, with a standard deviation of (0.628), which indicates that the level of (self-management competencies) came within the high level from the point of view of the study sample. It was found from the results in Table (14) that Paragraph No. (2), which states “the managers realize that if they want to go to a higher and different level, that requires different skills.” occupied the first rank with an arithmetic mean of (4.05) and a standard

deviation of (0.838), and on the other hand, Paragraph No. (4), which states "the managers work actively to improve their constantly.", got the lowest arithmetic mean, which amounted to (3.62) with a standard deviation of (1.056).

4) Strategic actioncompetencies:

Table (15) shows the arithmetic mean, standard deviation, and rank of the respondents' answers towards the dimension (strategic work competencies), which was measured based on (5) paragraphs.

Table (15):The arithmetic mean and the standard deviation of the response of the study sample members towards the competencies of strategic work

No. D	Paragraphs	Mean	S. D	Application	Ranking
1	The staff Inquire about the hospital's strategic plan.	3.84	0.907	High	4
2	Hospital Strategies are clear to all staff.	3.92	0.758	High	2
3	Top Management sets objectives related to hospital strategic plan.	3.93	0.818	High	1
4	Top management adopts creative strategic plans	3.85	0.763	High	3
5	Top management determine the activities necessary to achieve hospital's goals	3.65	0.978	Medium	5
Overall index		3.84	0.644	High	

The table indicates that this dimension achieved an arithmetic mean (3.84) of the total scale area, and a standard deviation of (0.644), which indicates that the level of (strategic work competencies) came within the high level from the point of view of the study sample. It was found from the results in Table (15) that Paragraph No. (3), which states that "Top Management sets objectives related to hospital strategic plan." occupied the first rank with a mean of (3.93) and a standard deviation of (0.818), and on the other hand, it got

Paragraph No. (5), which states that "Top management determine the activities necessary to achieve hospital's goals" on the lowest arithmetic mean, which amounted to (3.65) and with a standard deviation of (0.978).

5) Planning Competencies:

Table (16) shows the arithmetic mean, standard deviation, and rank of the respondents' answers towards the dimension (planning competencies), which was measured based on (5) items.

Table (16):The arithmetic mean and standard deviation of the response of the study sample members towards planning competencies

No. E	Paragraphs	Mean	S. D	Application	Ranking
1	All staff Involving in hospital strategic planning.	3.63	0.987	Medium	5
2	The staffrealize hospital's future strategic plans.	4.00	0.918	High	1
3	All staffCatching the hospital prograded updates.	3.93	0.918	High	3
4	Staff participates in identifying hospital needs.	3.95	0.852	High	2
5	Top management determine the activities necessary to achieve hospital's goals	3.88	0.880	High	4
Overall index		3.88	0.678	High	

The table indicates that this dimension achieved an arithmetic mean (3.88) of the total scale area, and a standard deviation of (0.678), which indicates that the level of (planning competencies) came within the high level from the point of view of the study sample. It was found from the results in Table (16) that paragraph No. (2), which states that "The staff realize hospital's future strategic plans." ranked first with a mean of (4) and a standard deviation of (0.918). On the other hand, paragraph No. (1) which states that "All staff

Involving in hospital strategic planning.” has the lowest mean, which is (3.63) and with a standard deviation of (0.987).

Second: Description of the dependent variable (quality of service):

This part aims to indicate the arithmetic means, standard deviations, the degree of approval, and the rank of the dimensions of the dependent variable at the arithmetic means to describe the trends of the study sample towards dimensions of service quality. The results were as shown in Table (17)

Table (17): Arithmetic averages, standard deviations, and the degree of agreement towards the dimensions of service quality

(Service Quality)	Mean	S. D	Application	Ranking
Tangibles	4.00	0.635	High	4
Assurance	4.03	0.660	High	3
Reliability	4.05	0.684	High	2
Empathy	3.96	0.665	High	5
Responsiveness	4.05	0.638	High	1
Overall index	4.01	.5900	High	

It is clear from table (17) that the arithmetic mean values of the dependent variable (service quality) with high degrees ranged between (3.96-4.05), where after (response) got the highest and with a high degree of approval, and after (sympathy) the least and with a high degree of approval And the general indicator of service quality was (4.01), thus it is clear that the level of service quality in Jordanian private hospitals in Amman came within the high level, and this result represents the answer to the second question in the study problem, and the following is a detail of the dimensions of service quality.

1) Tangibles:

Table (18) shows the arithmetic mean, standard deviation, and rank of the respondents' answers towards the (concrete) dimension, which was measured based on (5) items.

Table (18):The arithmetic mean and the standard deviation of the response of the study sample members towards tangibility

No. F	Paragraphs	Mean	S. D	Application	Ranking
1	The hospital employs cutting-edge technology to treat patients.	3.86	0.845	High	5
2	The hospital staff are elegant.	3.91	0.840	High	4
3	The hospital ensures that the environment is sterile.	3.98	0.859	High	3
4	The hospital takes care of cleanliness and maintenance of its facilities.	4.09	0.810	High	2
5	The hospital appearance indicates how good the services are	4.19	0.733	High	1
Overall index		4.00	0.635	High	

The table indicates that this dimension achieved an arithmetic mean (4.00) of the total scale area, and a standard deviation of (0.635), which indicates that the level of (tangibles) came within the high level from the point of view of the study sample. It was found from the results in Table (18) that paragraph No. (5), which states that "The hospital appearance indicates how good the services are" occupied the first rank with a mean of (4.19) and a standard deviation of (0.733), and on the other hand, the paragraph got No. (1), which states that "The hospital employs cutting-edge technology to treat patients." has the lowest arithmetic mean, which was (3.86) and with a standard deviation of (0.845).

2) Assurance:

Table (19) shows the arithmetic mean, standard deviation, and rank of the respondents' answers towards the (confirmation) dimension, which was measured based on (5) items.

Table (19):The arithmetic mean and standard deviation of the response of the study sample members towards confirmation

No. G	Paragraphs	Mean	S. D	Application	Ranking
1	The staff is gaining the patients' trust.	4.04	0.758	High	3
2	The staff immediately responds the inquiries of the patients.	4.05	0.789	High	2
3	The staff is kind to the patients.	4.00	0.815	High	4
4	The staff prompt in responding to patients' concerns in very high level of accuracy.	3.96	0.906	High	5
5	The hospital environment indicates professionalism.	4.09	0.783	High	1
Overall index		4.03	0.660	High	

The table indicates that this dimension achieved an arithmetic mean (4.03) of the total scale area, and a standard deviation of (0.660), which indicates that the level of (confirmation) came within the high level from the point of view of the study sample members. It was found from the results in Table (19) that paragraph No. (5), which states that "The hospital environment indicates professionalism." ranked first with a mean of (4.09) and a standard deviation of (0.783), and on the other hand, paragraph No. (4) which states that "The staff prompt in responding to patients' concerns in very high level of accuracy." on the lowest arithmetic mean, which was (3.96) and with a standard deviation of (0.905).

3) Reliability:

Table (20) shows the arithmetic mean, standard deviation, and rank of the respondents' answers towards the (reliability) dimension, which was measured based on (4) items.

Table (20):The arithmetic mean and standard deviation of the response of the study sample members towards reliability

No. H	Paragraphs	Mean	S. D	Application	Ranking
1	The hospital offers the services that were promised.	4.12	0.812	High	1
2	The hospital delivers a high level of consistency in its services.	4.03	0.784	High	2
3	The hospital is always attempting to resolve patient issues.	4.02	0.812	High	3
4	In emergency situations, the staff deliver the most possible assistance.	4.01	0.809	High	4
Overall index		4.05	0.684	High	

The table indicates that this dimension achieved an arithmetic mean (4.05) of the total scale area, and a standard deviation of (0.684), which indicates that the level of (reliability) came within the high level from the point of view of the study sample. It was found from the results in Table (20) that Paragraph No. (1), which states that “The hospital offers the services that were promised.” occupied the first rank with a mean of (4.12) and a standard deviation of (0.812), and on the other hand it got Paragraph No. (4), which states that "In emergency situations, the staff deliver the most possible assistance." on the lowest arithmetic mean, which was (4.01) and with a standard deviation of (0.809).

4) Empathy:

Table (21) shows the arithmetic mean, standard deviation, and rank of the respondents' answers towards the (sympathy) dimension, which was measured based on (8) items.

Table (21): The arithmetic mean and standard deviation of the study sample's response to empathy

No. I	Paragraphs	Mean	S. D	Application	Ranking
1	The hospital staff are friendly with the patient.	3.92	0.870	High	7
2	The hospital staff can understand the psychological state of the patient	3.95	0.795	High	4
3	The hospital staff gives individual attention to each patient.	3.93	0.851	High	5
4	The patient gets their time from the staff.	4.09	0.828	High	1
5	The staff is aware of each patient's unique requirements.	4.01	0.848	High	2
6	The hospital pays close attention to the needs of its patients.	3.97	0.806	High	3
7	Every patient is a source of concern for the hospital staff.	3.89	0.841	High	8
8	The staff fulfills patients' specific needs.	3.93	0.824	High	6
Overall index		3.96	0.665	High	

The table indicates that this dimension achieved an arithmetic mean (3.96) of the total scale area, and a standard deviation of (0.665), which indicates that the level of (sympathy) came within the high level from the point of view of the study sample. It was found from the results in Table (21) that paragraph No. (4), which states that "The patient gets their time from the staff." ranked first with a mean of (4.09) and a standard deviation of (0.828), and on the other hand, the paragraph got No. (7), which states that "Every patient is a source of concern for the hospital staff." has the lowest arithmetic mean, which is (3.89) and with a standard deviation of (0.841).

5) Responsiveness:

Table (22) shows the arithmetic mean, standard deviation, and rank of the respondents' answers towards the (response) dimension, which was measured based on (4) items.

Table (22): The arithmetic mean and standard deviation of the response of the study sample to the response

No. J	Paragraphs	Mean	S. D	Application	Ranking
1	The staff reacts rapidly to patient's needs.	4.03	0.725	High	3
2	The staff at the hospital is keen to help patients.	3.92	0.841	High	4
3	The hospital reacts quickly to changes.	4.15	0.789	High	1
4	The hospital maintains inventory based on demand.	4.11	.8010	High	2
Overall index		4.05	0.638	High	

The table indicates that this dimension achieved an arithmetic mean (4.05) of the total scale area, and a standard deviation of (0.638), which indicates that the level of (response) came within the high level from the point of view of the study sample. It was found from the results in Table (22) that paragraph No. (3), which states that “The hospital reacts quickly to changes.” ranked first with a mean of (4.15) and a standard deviation of (0.789), and on the other hand, paragraph No. (2) which states that “The staff at the hospital is keen to help patients.” had the lowest arithmetic mean, which was (3.92) and with a standard deviation of (0.841).

Test hypotheses of the study

Main hypothesis test result:

H1: Managerial Competency has a significant role in Enhancing Service Quality in Amman private hospitals at $\alpha \leq 0.05$

This hypothesis was tested using the (Multiple Linear Regression) test, which represents the answer to the third question in the study problem, and its results are as shown in Table (23).

Table (23): Results of testing the impact of Managerial competencies on service quality

dependent variable	Model Summary		ANOVA			Coefficient					
	R	R ²	F	F Sig	Df	Managerial competencies	B	Std. Error	Beta	T	Sig
Quality of service	0.788	0.621	64.852	*0.00	198/5	Communication competencies	0.152	0.068	0.159	2.248	*0.026
						Teamwork competencies	0.159	0.052	0.195	3.024	*0.003
						Self-management competencies	0.156	0.068	0.165	2.298	*0.023
						Strategic action competencies	0.164	0.067	0.179	2.455	*0.015
						Planning competencies	0.193	0.060	0.221	3.201	*0.002
*moral at level($\alpha \leq 0.05$)											
F tabular value(2.21) =					T Tabular value(1.96) =						

Table (23) indicates that there is a statistically significant effect of Managerial competencies on service quality, which appears through the value of (F.Sig) equal to (0.00), which is less than (0.05) and also through the calculated (F) value of (64.852), which is greater From its tabular and equal value (2.21). The value of the correlation coefficient (R) and equal to (78.8%) indicates that there is a strong relationship between the Managerial competencies in their dimensions and the quality of service in Jordanian private hospitals in Amman. (62.1%) of the variation in service quality in Jordanian private hospitals in Amman. It appears from the results of the coefficients table for this hypothesis that the value of the Beta coefficient for the communication competency dimension has reached ($\beta = 0.159$) and that the calculated (T) value is (2.248), which is greater than its tabular value (1.96) at the level (Sig = 0.026), which is significant, and that the value of The Beta coefficient for the teamwork competency dimension has reached ($\beta=0.195$), and the calculated (T) value is (3.024), which is greater than its tabular value (1.96) at the

(Sig=0.003) level, which is significant, and the Beta coefficient for the self-management competency dimension has reached ($\beta=0.165$) and that the calculated value of (T) is (2.298), which is greater than its tabular value (1.96) at the level (Sig = 0.023), which is significant, and that the value of the Beta coefficient for the strategic work competencies dimension has reached ($\beta=0.179$) and that the value of ($\beta=0.165$) The calculated T) is (2.455), which is greater than its tabular value (1.96) at the level (Sig = 0.015), which is significant, while the value of the Beta coefficient for the planning efficiencies dimension is ($\beta = 0.221$), and the calculated (T) value is (3.201), which is greater than Its tabular value is (1.96) at the level (Sig = 0.002) and it is significant.

Based on the foregoing, it is clear that there is a statistically significant effect at the level ($\alpha \leq 0.05$) of Managerial competencies with its dimensions on the quality of service in private hospitals in Amman.

First sub-hypothesis test results:

H.1.1: Communication competencies have a Effect role in Enhancing Service Quality $\alpha \leq 0.05$.

This hypothesis was tested using (Simple Linear Regression) , and its results are as shown in Table (24).

Table (24): Results of testing the impact of communication competencies on service quality

Dependent Variable	Model Summary		Coefficient				
	R	R ²	Data	B	Std.Error	T	T Sig
Service Quality	0.672	0.452	communication competencies	0.643	0.050	12.907	*0.00
($\alpha \leq 0.05$) Significant at the level							
T Tabular Value = (1.96)							

Table (24) indicates that there is a statistically significant effect of communication efficiencies on the quality of service, which appears through the value of (T.Sig) and equal to (0.00), which is less than (0.05) and also through the calculated (T) value of (12.907), which is the largest From its tabular and equal value (1.96). The value of the correlation coefficient (R) and equal to (67.2%) indicates that there is a strong relationship between communication efficiencies and service quality in Jordanian private hospitals in Amman. %) of the variation in service quality in Jordanian private hospitals in Amman. Based on the foregoing, it is clear that there is a statistically significant effect at the level ($\alpha \leq 0.05$) of communication competencies on the quality of service in private hospitals in Amman

Second sub-hypothesis test results:

H.1.2: Teamwork competencies have a Effect role in Enhancing Service Quality $\alpha \leq 0.05$.

This hypothesis was tested using(Simple Linear Regression) , and its results are as shown in Table (25).

Table (25): Results of testing the impact of teamwork competencies on service quality

Dependent Variable	Model Summery		Coefficient				
	R	R ²	Data	B	Std.Error	T	T
service quality	0.654	0.428	teamwork competencies	0.531	0.043	12.285	*0.00
($\alpha \leq 0.05$)Significant at the level							
T Tabular Value = (1.96)							

Table (25) indicates that there is a statistically significant effect of teamwork competencies on service quality, which appears through the (T.Sig) value, equal to (0.00), which is less than (0.05) and also through the calculated (T) value of (12.285), which is greater than its tabular value and equal to (1.96). The value of the correlation coefficient

(R) and equal to (65.4%) indicates that there is a strong relationship between teamwork competencies and service quality in Jordanian private hospitals in Amman. (42.8%) of the discrepancy in service quality in Jordanian private hospitals in Amman. Based on the foregoing, it is clear that there is a statistically significant effect at the level ($\alpha \leq 0.05$) of teamwork competencies on the quality of service in private hospitals in Amman.

Third sub-hypothesis test results:

H.1.3: Self-management competencies have aEffect role in Enhancing Service Quality $\alpha \leq 0.05$.

This hypothesis was tested using the Simple Linear Regression test, and its results are as shown in Table (26).

Table (26): Results of testing the impact of self-management competencies on service quality

Dependent Variable	Model Summary		Coefficient				
	R	R ²	Data	B	Std.Error	T	T Sig
service quality	0.677	0.459	self-management competencies	0.637	0.049	13.087	*0.00
($\alpha \leq 0.05$) Significant at the level T Tabular Value = (1.96)							

Table (26) indicates that there is a statistically significant effect of self-management competencies on the quality of service, which appears through the value of (T.Sig) equal to (0.00), which is less than (0.05) and also through the calculated (T) value of (13.087), which is greater than its tabular value and equal to (1.96). The value of the correlation coefficient (R) and equal to (67.7%) indicates that there is a strong relationship between self-management competencies and service quality in Jordanian private hospitals in

Amman. (45.9%) of the discrepancy in the quality of service in Jordanian private hospitals in Amman. Based on the foregoing, it is clear that there is a statistically significant effect at the level ($\alpha \leq 0.05$) of self-management competencies on the quality of service in private hospitals in Amman.

Fourth sub-hypothesis test results:

H.1.4: Strategic action competencies have aEffect role in Enhancing Service Quality $\alpha \leq 0.05$.

This hypothesis was tested using the Simple Linear Regression test, and its results are as shown in Table (27).

Table (27): Results of testing the impact of strategic work competencies on service quality

Dependent Variable	Model Summary		Coefficient				
	R	R ²	Data	B	Std.Error	T	T Sig
service quality	0.686	0.471	Strategic action competencies	0.629	0.047	13.413	*0.00
($\alpha \leq 0.05$) Significant at the level							
T Tabular Value = (1.96)							

Table (27) indicates that there is a statistically significant effect of the competencies of strategic work on the quality of service, which appears through the value of (T.Sig) equal to (0.00), which is less than (0.05) and also through the calculated (T) value of (13.413), which is greater than its tabular value and equal to (1.96). The value of the correlation coefficient (R) and equal to (68.6%) indicates that there is a strong relationship between the competencies of strategic work and the quality of service in Jordanian private hospitals in Amman. (47.1%) of the variation in service quality in Jordanian private hospitals in Amman. Based on the foregoing, it is clear that there is a statistically significant effect at

the level ($\alpha \leq 0.05$) of the competencies of strategic work on the quality of service in private hospitals in Amman.

Fifth sub-hypothesis test results:

H.1.5: Planning competencies have aEffect role in Enhancing Service Quality $\alpha \leq 0.05$.

This hypothesis was tested using the Simple Linear Regression test, and its results are as shown in Table (28).

Table (28): Results of testing the impact of planning competencies on service quality

Dependent Variable	Model Summery		Coefficient				
	R	R ²	Data	B	Std.Error	T	T Sig
service quality	0.685	0.469	planning competencies	0.596	0.045	13.352	*0.00
($\alpha \leq 0.05$)Significant at the level							
T Tabular Value = (1.96)							

Table (28) indicates that there is a statistically significant effect of planning competencies on service quality, which appears through the value of (T.Sig) equal to (0.00), which is less than (0.05) and also through the calculated (T) value of (13.352), which is the largest From its tabular and equal value (1.96). The value of the correlation coefficient (R) and equal to (68.5%) indicates that there is a strong relationship between planning efficiencies and service quality in Jordanian private hospitals in Amman. %) of the variation in service quality in Jordanian private hospitals in Amman. Based on the foregoing, it is clear that there is a statistically significant effect at the level ($\alpha \leq 0.05$) of planning competencies on the quality of service in private hospitals in Amman.

Chapter FIVE

Results' Discussion, Conclusion and Recommendations

In this chapter, the results were discussed in the light of the statistical analysis results for the sample members' responses on the items of the study variables, with the aim of identifying the effect of managerial competencies (Communication, Teamwork, Self-management, Strategic Action, Planning) on service quality (Tangible, Assurance, Reliability, Empathy, Responsiveness) in the Jordanian private hospitals at Amman.

Discussion of the result of the Study hypotheses

The examination of the study hypotheses is the basic roots for scientific research in reaching conclusions and recommendations that would establish the rational scientific thought. The results of the analysis and testing of study hypotheses can be potted as follows:

Discussion of the main hypothesis:

there is a statistically significant effect of Managerial competencies on service quality, which appears through the value of (F.Sig) equal to (0.00), which is less than (0.05) and also through the calculated (F) value of (64.852), which is greater From its tabular and equal value (2.21). The value of the correlation coefficient (R) and equal to (78.8%) indicates that there is a strong relationship between the Managerial competencies in their dimensions and the quality of service in Jordanian private hospitals in Amman. (62.1%) of the variation in service quality in Jordanian private hospitals in Amman. It appears from the results of the coefficients table for this hypothesis that the value of the Beta coefficient for the communication competency dimension has reached ($\beta = 0.159$) and that the calculated

(T) value is (2.248), which is greater than its tabular value (1.96) at the level (Sig = 0.026), which is significant, and that the value of The Beta coefficient for the teamwork competency dimension has reached ($\beta=0.195$), and the calculated (T) value is (3.024), which is greater than its tabular value (1.96) at the (Sig=0.003) level, which is significant, and the Beta coefficient for the self-management competency dimension has reached ($\beta=0.165$) and that the calculated value of (T) is (2.298), which is greater than its tabular value (1.96) at the level (Sig = 0.023), which is significant, and that the value of the Beta coefficient for the strategic work competencies dimension has reached ($\beta=0.179$) and that the value of ($\beta=0.165$) The calculated T) is (2.455), which is greater than its tabular value (1.96) at the level (Sig = 0.015), which is significant, while the value of the Beta coefficient for the planning efficiencies dimension is ($\beta = 0.221$), and the calculated (T) value is (3.201), which is greater than Its tabular value is (1.96) at the level (Sig = 0.002) and it is significant.

Based on the foregoing, it is clear that there is a statistically significant effect at the level ($\alpha \leq 0.05$) of Managerial competencies with its dimensions on the quality of service in private hospitals in Amman.

Discussion of the sub hypothesis:

- 1) There is a statistically significant effect of communication competencies on the quality of service, which appears through the value of (T.Sig) and equal to (0.00), which is less than (0.05) and also through the calculated (T) value of (12.907), which is the largest From its tabular and equal value (1.96). The value of the correlation coefficient (R) and equal to (67.2%) indicates that there is a strong

relationship between communication efficiencies and service quality in Jordanian private hospitals in Amman. %) of the variation in service quality in Jordanian private hospitals in Amman. Based on the foregoing, it is clear that there is a statistically significant effect at the level ($\alpha \leq 0.05$) of communication competencies on the quality of service in private hospitals in Amman.

This result also agreed with the result of a study .Kakemam, E., Janati, A., Mohaghegh, B., Gholizadeh, M., & Liang, Z. (2021)) whose results is also confirmed seven core managerial competencies required to perform these tasks effectively. These core competencies included evidence-informed decisionmaking; operations, administration and resource management; knowledge of healthcare environment and the organisation; interpersonal, communication qualities and relationship management; leading people and organisation; enabling and managing change and professionalism.

- 2) There is a statistically significant effect of teamwork competencies on service quality, which appears through the (T.Sig) value, equal to (0.00), which is less than (0.05) and also through the calculated (T) value of (12.285), which is greater than its tabular value and equal to (1.96). The value of the correlation coefficient (R) and equal to (65.4%) indicates that there is a strong relationship between teamwork competencies and service quality in Jordanian private hospitals in Amman. (42.8%) of the discrepancy in service quality in Jordanian private hospitals in Amman. Based on the foregoing, it is clear that there is a statistically significant effect at the level ($\alpha \leq 0.05$) of teamwork competencies on the quality of service in private hospitals in Amman.

This result also agreed with the result of a study Faraji-Khiavi, Ghobadian, & Moradi-Joo (2015) where it's recommended that the hospital invest heavily in developing culture, innovation, teamwork, communication, and creative thinking to improve the health services in hospitals.

- 3) There is a statistically significant effect of self-management competencies on the quality of service, which appears through the value of (T.Sig) equal to (0.00), which is less than (0.05) and also through the calculated (T) value of (13.087), which is greater than its tabular value and equal to (1.96). The value of the correlation coefficient (R) and equal to (67.7%) indicates that there is a strong relationship between self-management competencies and service quality in Jordanian private hospitals in Amman. (45.9%) of the discrepancy in the quality of service in Jordanian private hospitals in Amman. Based on the foregoing, it is clear that there is a statistically significant effect at the level ($\alpha \leq 0.05$) of self-management competencies on the quality of service in private hospitals in Amman.

This result also agreed with the result of a study Pillay, R. (2010) whose results is The biggest difference between average importance and average skill ratings for public sector managers was HR management skills, task-related skills, and self-management skills. It has been found that informal management development programs are more valuable for improving management skills.

- 4) There is a statistically significant effect of the strategic action competencies work on the quality of service, which appears through the value of (T.Sig) equal to (0.00), which is less than (0.05) and also through the calculated (T) value of (13.413),

which is greater than its tabular value and equal to (1.96). The value of the correlation coefficient (R) and equal to (68.6%) indicates that there is a strong relationship between the competencies of strategic work and the quality of service in Jordanian private hospitals in Amman. (47.1%) of the variation in service quality in Jordanian private hospitals in Amman. Based on the foregoing, it is clear that there is a statistically significant effect at the level ($\alpha \leq 0.05$) of the competencies of strategic work on the quality of service in private hospitals in Amman.

This result also agreed with the result of a study Chouhan&Srivastava (2014) whose results in Developing and applying competency models is a proven approach to investing in talent to achieve a more effective and productive workforce. Competencies can be used to translate strategies into individual work-related skills and behaviors that people can easily understand and implement.

- 5) There is a statistically significant effect of planning competencies on service quality, which appears through the value of (T.Sig) equal to (0.00), which is less than (0.05) and also through the calculated (T) value of (13.352), which is the largest From its tabular and equal value (1.96). The value of the correlation coefficient (R) and equal to (68.5%) indicates that there is a strong relationship between planning efficiencies and service quality in Jordanian private hospitals in Amman. %) of the variation in service quality in Jordanian private hospitals in Amman. Based on the foregoing, it is clear that there is a statistically significant effect at the level ($\alpha \leq 0.05$) of planning competencies on the quality of service in private hospitals in Amman.

Conclusion:

- 1) Communication skills within the hospital has a significant impact on staff behavior.achieved ranked first with a mean of (4.14) and a standard deviation of (0.788) It is thus reflected in the Communication Competencies inThe Jordanian Private Hospitals at Amman.
- 2) The manager adapts fast with priorities changing. achieved occupied the first rank with an arithmetic mean of (3.95) and a standard deviation of (0.817) It is thus reflected in the Teamwork Competencies in The Jordanian Private Hospitals at Amman.
- 3) The managers realize that if they want to go to a higher and different level, that requires different skills. achieved occupied the first rank with an arithmetic mean of (4.05) and a standard deviation of (0.838), , It is thus reflected in the Self-management competencies in The Jordanian Private Hospitals at Amman.
- 4) Top Management sets objectives related to hospital strategic plan.achievedoccupied the first rank with a mean of (3.93) and a standard deviation of (0.818), It is thus reflected in the Strategic action competencies in (The Jordanian Private Hospitals at Amman).
- 5) The staff realize hospital's future strategic plans.achieved ranked first with a mean of (4) and a standard deviation of (0.918). It is thus reflected in the Planning Competencies in (The Jordanian Private Hospitals at Amman).
- 6) The hospital appearance indicates how good the services,achieved occupied the first rank with a mean of (4.19) and a standard deviation of (0.733) It is thus reflected in

the Tangibles It is a dimension of service quality measurement in The Jordanian Private Hospitals at Amman.

- 7) The hospital environment indicates professionalism.achieved ranked first with a mean of (4.09) and a standard deviation of (0.783), It is thus reflected in the Assurance It is a dimension of service quality measurement in The Jordanian Private Hospitals at Amman.
- 8) The hospital offers the services that were promised.achieved occupied the first rank with a mean of (4.12) and a standard deviation of (0.812), It is thus reflected in the Reliability It is a dimension of service quality measurement in The Jordanian Private Hospitals at Amman.
- 9) The patient gets their time from the staff. achieved ranked first with a mean of (4.09) and a standard deviation of (0.828), It is thus reflected in the Empathy It is a dimension of service quality measurement in The Jordanian Private Hospitals at Amman.
- 10) The hospital reacts quickly to changes.achieved ranked first with a mean of (4.15) and a standard deviation of (0.789), It is thus reflected in the Responsiveness It is a dimension of service quality measurement in The Jordanian Private Hospitals at Amman.

Recommendations

Based on the results reached, the researcher presented a set of recommendations and future research, which are the following:

- 1) This study recommends that the The staff share examples of times when they had to present complicated data Because of its effect on Communication Competencies.
- 2) This study recommends that the The manager takes the staff opinion of before making any decision. Because it has an effect on improving Teamwork Competencies.
- 3) This study recommends that the managers work actively to improve their constantly. Because it has an effect on improving Self-management competencies.
- 4) This study recommends that the Top management determine the activities necessary to achieve hospital's goals. Because it has an effect on improving Strategic action competencies.
- 5) This study recommends that the All staff Involving in hospital strategic planning. Because it has an effect on improving Planning Competencies.
- 6) This study recommends that the The hospital employs cutting-edge technology to treat patients. Because it has an effect on improving Tangibles Thus, we achieve the service quality in The Jordanian Private Hospitals at Amman.

- 7) This study recommends that the The staff prompt in responding to patients' .Because it has an effect on improving AssuranceThus, we achieve the service quality in The Jordanian Private Hospitals at Amman.
- 8) This study recommends that the In emergency situations, the staff deliver the most possible assistance.Because it has an effect on improving Reliability Thus, we achieve the service quality in The Jordanian Private Hospitals at Amman.
- 9) This study recommends that theEvery patient is a source of concern for the hospital staff.Because it has an effect on improving Empathy Thus, we achieve the service quality in The Jordanian Private Hospitals at Amman.
- 10) This study recommends that the The staff at the hospital to be keen to help patients.Because it has an effect on improving Responsiveness Thus, we achieve the service quality in The Jordanian Private Hospitals at Amman.

Recommendations for Academics and Future Research:

- 1) This study targeted managers in many hospitals, but it is possible to go in more depth to increase the number of hospitals.
- 2) This study recommends in determining who are the administrators who should conduct the study and allocating the sample category to be only for doctors who hold administrative positions in hospitals.
- 3) This study was carried out in the period of Covid19, it can be conducted after the pandemic is controlled.

- 4) This study was conducted only in private hospitals, where it can be conducted in government hospitals to enable us to generalize the results.
- 5) Using dimensions of administrative competencies and dimensions of service quality that are not mentioned in the research.

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Appendices

Appendix (1) List of arbitrators

Name	Major	Academic rank	Workplace
Ahmad Ali Saleh	Business Administration	Professor	Middle East University
Mohammad Abu Zaid	Business Administration	Professor	Balqa Applied University
Mohammad Alnoime	Business Administration	Professor	University of Jordan
AbeerAlfourri	Management Information Systems	Associate Professor	Balqa Applied University
Dina alkhodare	Business Administration	Assistant Professor	Middle East University
AtefAlraosh	Head of hospital department	Assistant Professor	Philadelphia University
MousaAlajloni	Hospital Administration	Advisor on health systems	WHO

Appendix (2)



Middle East University

Business faculty

Business Administration Department

Dear Prof,

Healthcare plays an important role in economic growth and stability, and its success is based on medical staff with a high level of expertise and competence. Accordingly, they contribute to the development of the health sector, which is thus reflected in the growth of the country.

Good health is not just good medical practice, but also the hospital management's ability to manage hospital resources such as human resources, strategy, finances, and materials.

Successful management is one that is able to manage hospitals during extraordinary events such as natural disasters. The Covid-19 pandemic is having an impact on health systems around the world and the skyrocketing demands on the care of those infected with Covid-19. Hence, decision makers have to make tough choices to deal with the pandemic and other disasters.

The success of the health sector therefore depends mainly on executives with skills and competencies that contribute to the development of the health sector and reflected in the quality of the service to their patients. The aim of this study is to examine **theEffect of Managerial Competencies on Service Quality (The Jordanian Private Hospitals at Amman).**

In order to complete the master's degree in Business Administration Department, Middle East University, Amman-Jordan.

In acknowledgment of your esteemed, well known academic extensive experience and scientific experts the researcher turns to you in respect of evaluating the attached questionnaire, which was developed on the basis of previous studies relevant to the study variables, taking into account the formulation, adaptation and modification of the paragraphs in line with current trends. Your notes

and input will highly value in bolstering the questionnaire's paragraphs making them more valid for the purpose they were composed for.

Please note that basis of the questionnaire measurement would be a five point Likert scale, employed accordingly:

Strongly agree	Agree	Somewhat agree	Disagree	Strongly disagree
5	4	3	2	1

Researcher: OrobaIsmatSroorSupervisor:Dr. Sameer Aljabali

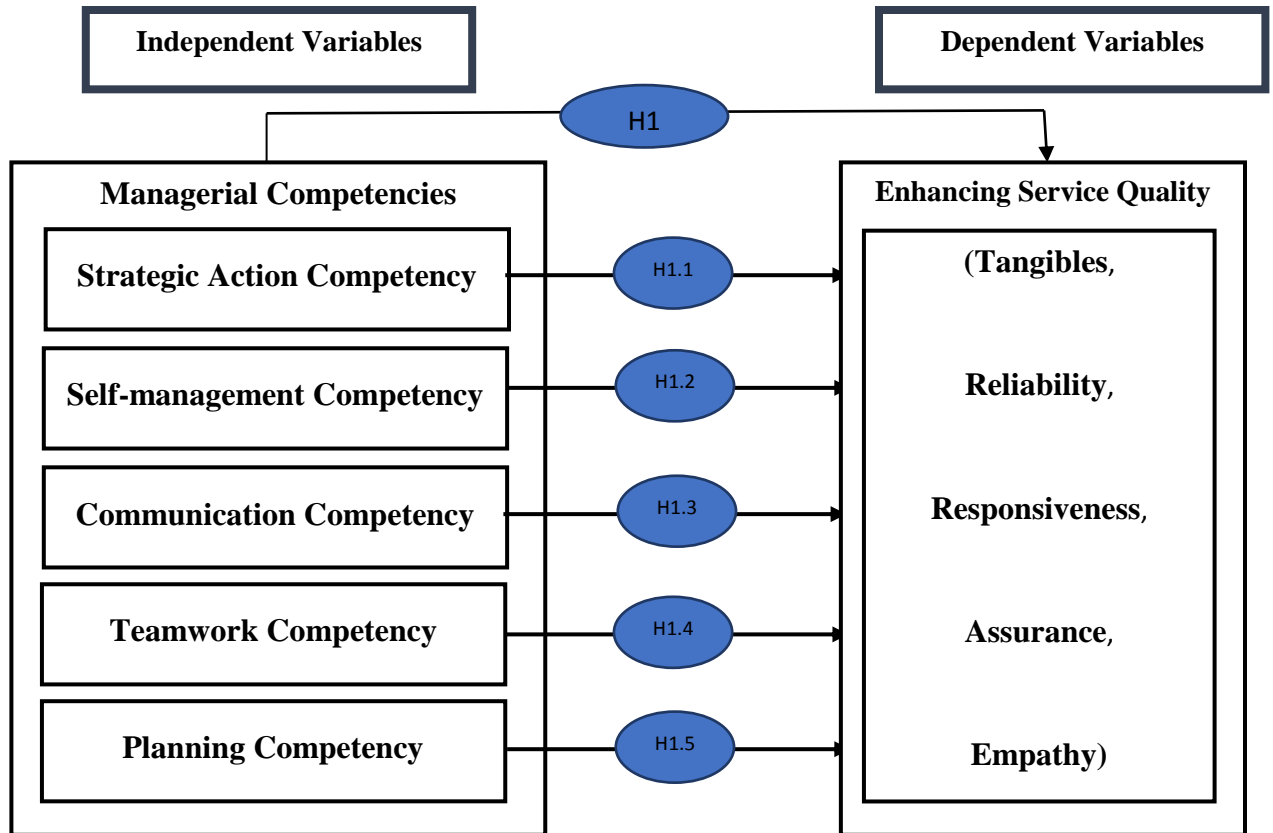
Study Hypothesis:

The mentioned above question will be answered through testing the following hypothesis:

The main hypothesis **H1**: Managerial Competency has aEffectrole in Enhancing Service Quality in amman privet hospitals at $\alpha \leq 0.05$

- **H1.1**: Communication competencies have aEffectrole in Enhancing Service Quality $\alpha \leq 0.05$.
- **H1.2**: Teamwork competencies have aEffectrole in Enhancing Service Quality $\alpha \leq 0.05$.
- **H1.3**: Self-management competencies have aEffectrole in Enhancing Service Quality $\alpha \leq 0.05$.
- **H1.4**: Strategic action competencies have aEffectrole in Enhancing Service Quality $\alpha \leq 0.05$.
- **H1.5**: Planning competencies have a Effectrole in Enhancing Service Quality $\alpha \leq 0.05$.

• **Study Model:**



Demographic data

Please tick the appropriate response box:

Gender:

Female Male

Age (years):

less 26 26- less 31 31-Less 35 35-Less 40 40-Less 45
 45 or above

Education Level:

Diploma or less Bachelor Master Doctorate

Years of Experience in ad agencies:

Less than 5 5-10 11-15 16 and above

Managerial level:

Low level Med Level High level

N O	Item	Item Clarity		Item Appropriate to measure		Item Relationship		Appropriate Adjustm ent
		Clear	Unclear	Appropriate	Not Appropriate	Related	Unrelated	

Independent Variable: (Managerial Competency): managerial competencies refer to managers' behaviours that reveal attitudes, skills, knowledge, and synergy that will enhance their results and add value for themselves. competencies a combination of the knowledge, skills and attributes needed to carry out a particular job. the individual needs skills, attitudes, behaviours, and knowledge to manage any organisation effectively. They include strategic action competencies, global awareness competencies, planning competencies, self-management competencies, communication competencies and teamwork competencies.

المتغير المستقل: (الكفايات الإدارية): تشير الكفايات الإدارية إلى سلوكيات المديرين التي تكشف عن المواقف والمهارات والمعرفة والتأزر الذي سيعزز نتائجهم ويضيف قيمة لأنفسهم. الكفايات مزيج من المعارف والمهارات والسمات اللازمة لأداء وظيفة معينة. يحتاج الفرد إلى المهارات والمواقف والسلوكيات والمعرفة لإدارة أي منظمة بشكل فعال. وهي تشمل كفايات العمل الاستراتيجي وكفايات الوعي العالمي وكفايات التخطيط وكفايات الإدارة الذاتية وكفايات الاتصال وكفايات العمل الجماعي.

Communication competencies : are the ability of managers or business owners to communicate with others through nonverbal, verbal, and written communication competencies. Therefore, the managers should have the required communication talents to communicate in the business world to achieve business goals.

كفايات الاتصال: هي قدرة المديرين أو أصحاب الأعمال على التواصل مع الآخرين من خلال كفايات الاتصال غير اللفظية واللفظية والكتابية. لذلك ، يجب أن يكون لدى المديرين مواهب الاتصال المطلوبة للتواصل في عالم الأعمال لتحقيق أهداف العمل.

1	Communication skills within the hospital has a significant impact on staff behavior. يؤثر التواصل داخل المستشفى على سلوك الموظفين							
2	The staff share examples of times when they had to present complicated data. يتبادل الموظفون الامثلة عن الأوقات التي اضطروا فيها إلى تقديم بيانات معقدة							
3	The manager has maintained effective communication with the hospital staff يحافظ المدير على اتصال فعال مع الموظفين في المستشفى							
4	To connect efficiently with others, managerial staff use proper conversation impressions. للتواصل بشكل فعال مع الآخرين، يستخدم المدراء تعابير المحادثة المناسبة.							

NO	Item	Item Clarity		Item Appropriate to measure		Item Relationship		Appropriate Adjustment
		Clear	Unclear	Appropriate	Not Appropriate	Related	Unrelated	
5	When the staff need to convince the staff, they describe the situations. يقوم المدير بوصف المواقف عند الحاجة لاقناع الموظفين .							
6	The manager communicates well with the staff يتواصل المدير مع الموظفين بشكل جيد.							
7	The manager provides feedback to staff about their progress and development at work. يقدم المدير ملاحظات للموظفين حول تطورهم بالعمل.							
<p>Teamwork competencies : the willingness of individuals to work with others as part of one team to achieve the aims or targets of the team. كفايات العمل الجماعي : رغبة المدراء في العمل مع الآخرين كجزء من فريق واحد لتحقيق أهداف أو أهداف الفريق</p>								
1	The manager takes the staff opinion of before making any decision. ياخذ المدير رأي الموظفين في العمل قبل اتخاذ أي قرار.							
2	The manager shares ideas and exchanges them with the staff. يتبادل المدير الأفكار مع الموظفين .							
3	The manager in the hospital shares responsibilities with the employee. يشارك المدير في المستشفى المسؤوليات مع الكادر.							
4	The manager adapts fast with priorities changing. يتكيف المدير بسرعة مع تغير الأولويات.							
5	The flexibility of the staff helps me work well and effectively. تساعدني مرونة الموظفين على العمل بشكل فعال.							

N O	Item	Item Clarity		Item Appropriate to measure		Item Relationship		Appropriate Adjustment
		Clear	Unclear	Appropriate	Not Appropriate	Related	Unrelated	
<p>Self-management competencies: the important individual traits and abilities that would help managers or own businesses to oversee their businesses effectively and efficiently . This comprises self-control and stress tolerance, self-motivation , determination and self-belief self-management and emotional intelligence and self-awareness.</p> <p>كفايات الإدارة الذاتية: هي السمات والقدرات الفردية الهامة التي من شأنها أن تساعد المديرين أو الشركات الخاصة للإشراف على أعمالهم بفعالية وكفاءة. وهذا يشمل ضبط النفس وتحمل التوتر والتحفيز الذاتي والتصميم والإيمان بالذات وإدارة الذات والذكاء العاطفي والوعي الذاتي .</p>								
1	<p>the staff work actively to improve their constantly.</p> <p>يعمل المدراء بنشاط للتحسين من انفسهم بشكل مستمر.</p>							
2	<p>the staff realize that if they want to go to a higher and different level, that requires different skills.</p> <p>يدرك المدراء أنهم إذا أرادوا الانتقال إلى مستوى أعلى ومختلف ، فهذا يتطلب مهارات مختلفة.</p>							
3	<p>the managerial staff always want to get feedback.</p> <p>يرغب المدراء دائما في الحصول على تغذية راجعة.</p>							
4	<p>the managerial staff invest in their mistakes and turn them into strengths points.</p> <p>يستثمر المدراء في أخطائهم ليحولونها إلى نقاط قوة .</p>							
5	<p>the managerial staff accept criticism.</p> <p>يقبل المدراء النقد.</p>							
6	<p>the managerial staff are not offensive in self-defense.</p> <p>المدراء لا يستخدمون أسلوب الهجوم كوسيلة للدفاع عن انفسهم .</p>							

NO	Item	Item Clarity		Item Appropriate to measure		Item Relationship		Appropriate Adjustment
		Clear	Unclear	Appropriate	Not Appropriate	Related	Unrelated	
7	themanagerial staff accept talking about errors and shortcomings. يتقبلالمدراء الحديث عن الاخطاء والنواقص.							
8	themanagerial staffdevelop their competencies in the hospital based on the hospital's strategy. يطور المدراء من كفاياتهم في المستشفى بناء على استراتيجية المستشفى .							

Strategic action competencies: Strategic action competencies refer to the manager's ability to take hold of the organization's strategy and make sure that all employees' goals and efforts align with the organization's. Creative thinker leadership needs to convey organizational skills, knowledge collectively, and strategic capacity to help managers grow up and succeed in their companies. the main key parts strategic action competencies are forecasting and foreseeing other competitors' actions.

كفايات العمل الاستراتيجي: تشير كفايات العمل الاستراتيجي إلى قدرة المدير على السيطرة على السيطرة على استراتيجية المنظمة والتأكد من أن أهداف وجهود جميع الموظفين تتماشى مع المنظمة. تحتاج قيادة المفكر الإبداعي إلى نقل المهارات التنظيمية والمعرفة بشكل جماعي والقدرة الإستراتيجية لمساعدة المديرين على النمو والنجاح في شركاتهم. ان الأجزاء الرئيسية كفايات العمل الاستراتيجي هيالتنبؤ بإجراءات المنافسين الآخرين.

1	The staffInquire about the hospital's strategic plan. يستفسر الموظفين عن الخطة الإستراتيجية للمستشفى.							
2	Hospital Strategies are clear to all staff. استراتيجية المستشفى واضحة لجميع الموظفين.							
3	TopManagement sets objectives related to hospital strategic plan. تحدد الإدارة العليا الأهداف المتعلقة بالخطة الإستراتيجية للمستشفى.							
4	Top management adopts creative strategic plans تتبنى الإدارة العليا الخطط الإستراتيجية الإبداعية							
5	Top management determine the activities necessary to achieve hospital's goals يتم تحديد الأنشطة اللازمة لتحقيق اهداف المستشفى							

NO	Item	Item Clarity		Item Appropriate to measure		Item Relationship		Appropriate Adjustment
		Clear	Unclear	Appropriate	Not Appropriate	Related	Unrelated	

Planning competencies: the planning competencies are the ability to plan the organization needs that would be achieved effectively and efficiently to harmonize appropriately and to involve all relevant resources. Also, it is determining the needed activities and resources to achieve the organization aims and goals.

كفايات التخطيط: كفاءات التخطيط هي القدرة على تخطيط احتياجات المنظمة التي يمكن تحقيقها بفعالية وكفاءة للتنسيق بشكل مناسب وإشراك جميع الموارد ذات الصلة. كما أنه يحدد الأنشطة والموارد اللازمة لتحقيق أهداف المنظمة وأهدافها.

1	All staffdInvolving in hospital strategic planning. يشارك جميع الموظفين في التخطيط الاستراتيجي للمستشفى							
2	The staffRealize hospital's future strategic plans. يدرك الموظفين الخطط الاستراتيجية المستقبلية للمستشفى.							
3	All staffCatching the hospital prograded updates. يتابع الموظفين تحديثات برنامج المستشفى.							
4	Staff participates in identifying hospital needs. يشارك الموظفين في تحديد احتياجات المستشفى.							
5	Top management determine the activities necessary to achieve hospital's goals يتم تحديد الأنشطة اللازمة لتحقيق اهداف المستشفى							

Dependent Variable: (Service Quality): Service quality is generally viewed as the output of the service delivery system, especially in the case of pure service systems. Moreover, service quality is linked to consumer satisfaction and Service quality is a perception of the customer. Customers, however, form opinions about service quality not just from a single reference but from a host of contributing factors.

المتغير التابع (جودة الخدمة): يُنظر إلى جودة الخدمة عمومًا على أنها ناتج نظام تقديم الخدمة ، خاصة في حالة أنظمة الخدمة البحتة. علاوة على ذلك ، ترتبط جودة الخدمة برضا المستهلك وجودة الخدمة هي تصور للعميل. ومع ذلك ، فإن العملاء يشكلون آراء حول جودة الخدمة ليس فقط من مرجع واحد ولكن من مجموعة من العوامل المساهمة.

Tangibles: Appearance of physical facilities, equipment, personnel, and communication materials.

الملموسات: ظهور المرافق المادية ، والمعدات ، والأفراد ، ومواد الاتصال .

N O	Item	Item Clarity		Item Appropriate to measure		Item Relationship		Appropriate Adjustm ent
		Clear	Uncle ar	Approp riate	Not Approp riate	Related	Unrela ted	
1	The hospital employs cutting-edge technology to treat patients. يستخدم المستشفى أحدث التقنيات لعلاج المرضى.							
2	The hospital staff are elegant. يتسم موظفين المستشفى بالاناقة.							
3	The hospital ensures that the environment is sterile. يضمن المستشفى أن تكون البيئة آمنة							
4	The hospital takes care of the cleanliness of its facilities يعتني المستشفى بنظافة مرافقه.							
5	The hospital takes care of maintenance of its facilities. يعتني المستشفى في صيانة مرافقه							
6	The hospital appearance indicates how good the services are يشير مظهر المستشفى إلى مدى جودة الخدمات.							
Assurance: Knowledge and courtesy of employees and their ability to convey trust. التأكيد: المعرفة واللياقة للموظفين وقدرتهم على نقل الثقة.								
1	The staff is gaining the patients' trust. يسعى الموظفون لكسب ثقة المرضى.							
2	The staff immediately responds the inquiries of the patients. يستجيب الموظفون على الفور لاستفسارات المرضى.							
3	The staff is kind to the patients. يعامل موظفين المستشفى المرضى بلطف .							
4	The staff prompt in responding to patients' concerns in very high level of accuracy. يستجيب الموظفون لمخاوف المرضى بمستوى عال من الدقة.							

N O	Item	Item Clarity		Item Appropriate to measure		Item Relationship		Appropriate Adjustment
		Clear	Unclear	Appropriate	Not Appropriate	Related	Unrelated	
5	The hospital environment indicates professionalism. تشير بيئة المستشفى إلى الاحتراف.							
Reliability : Ability to perform the promised service dependably and accurately. الموثوقية: القدرة على أداء الخدمة الموعودة بشكل موثوق ودقيق .								
1	The hospital offers the services that were promised. يلتزم المستشفى بالخدمات التي تقع ضمن نطاق عمله .							
2	The hospital delivers a high level of consistency in its services. يقدم المستشفى مستوى عالي من الاتساق في خدماته.							
3	The hospital is always attempting to resolve patient issues. يحاول المستشفى دائماً حل مشكلات المريض.							
4	In emergency situations, the staff deliver the most possible assistance. يقدم الموظفون أقصى مساعدة ممكنة ، في حالات الطوارئ .							
Empathy: Caring, individualized attention the hospital provides its Patients. التعاطف: الرعاية والاهتمام الفردي الذي يقدمه المستشفى لمرضاه .								
1	The hospital staff are friendly with the patient. يبيد موظفون المستشفى روح الصداقة للمرضى.							
2	The hospital staff can understand the psychological state of the patient يستطيع الموظفون فهم وإدراك حالة المريض النفسية.							
3	The hospital staff gives individual attention to each patient. يعطي موظفون المستشفى اهتماماً فردياً لكل مريض.							
4	The patient gets their time from the staff. يحصل المريض على وقت كافٍ من الموظفين.							
5	The staff is aware of each patient's unique requirements. يدرك موظفون المستشفى المتطلبات الفريدة لكل مريض.							

NO	Item	Item Clarity		Item Appropriate to measure		Item Relationship		Appropriate Adjustment
		Clear	Unclear	Appropriate	Not Appropriate	Related	Unrelated	
6	The hospital pays close attention to the needs of its patients. يولي المستشفى اهتماماً وثيقاً لاحتياجات مرضاه.							
7	Every patient is a source of concern for the hospital staff. يعتبر كل المريض مصدر اهتمام لموظفين المستشفى.							
8	The staff fulfills patients' specific needs. يلبي الموظفون احتياجات المرضى الخاصة.							
Responsiveness: Willingness to help patients and provide prompt service. الاستجابة: الاستعداد لمساعدة المرضى وتقديم خدمة سريعة.								
1	The staff reacts rapidly to patient's needs. يتفاعل الموظفون بسرعة مع احتياجات المرضى.							
2	The staff at the hospital is keen to help patients. يحرص الموظفون في المستشفى على مساعدة المرضى.							
3	The hospital reacts quickly to changes. يتفاعل المستشفى بسرعة مع التغييرات.							
4	The hospital maintains inventory based on demand. يحتفظ المستشفى بمخزون كافي يلبي احتياجات المرضى في جميع الأوقات.							

Appendix (3)



مكتب رئيس الجامعة
President's Office

الرقم، دو/خ/480
التاريخ، 21/11/2021

لمن يهمه الامر

تحية طيبة وبعد

لغايات توفير وربط أسس التعاون مع خدمة المجتمع المحلي، نرجو التكرم بالموافقة على تقديم التسهيلات الممكنة لطالبة الماجستير عروبة عصمت سرور، ورقمها الجامعي (402010011)، المسجلة في تخصص ادارة الاعمال / كلية الأعمال في جامعة الشرق الأوسط، والتي تتولى القيام بإعداد دراسة بحثية أكاديمية في رسالتها المعلومه بـ " أثر الكفاءات الإدارية على جودة الخدمة (المستشفيات الأردنية الخاصة في عمان)", علماً بأن المعلومات سيتم استخدامها لأغراض البحث العلمي وبصورة سرية.

وتفضلوا بقبول فائق الاحترام

ق.أ. رئيس الجامعة

أ.د. سلام خالد المحادين

