

## The Impact of Dynamic Capabilities on the Quality of Healthcare Services at Jordan Hospital

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### Abstract

**Importance:** The theoretical importance of this study appears in the attempt to provide a modest scientific addition to the Arab library, with the aim of adopting a scientific approach capable of achieving the goals sought by this study, as it facilitates for researchers and those interested in researching the subject of dynamic capabilities in its dimensions. **Purpose:** This study aimed to examine the impact of dynamic capabilities on the quality of healthcare services at Jordan Hospital in Jordan. Dynamic capabilities were measured through five dimensions: sensing capability, learning capability, integration capability, coordination capability, and reconfiguration capability. The quality of healthcare services was assessed using five dimensions: tangibility, service ease, responsiveness, reliability, and empathy. **Methodology:** The study population consisted of senior, middle, and lower management staff at Jordan Hospital, totaling 480 employees. A convenience sample of 206 employees was selected. The researcher employed a comprehensive survey approach to study and analyze the population and adopted the descriptive analytical method. A questionnaire was used as the primary data collection tool. Several statistical techniques were employed, including multiple regression and hierarchical regression analysis. **Findings:** The study yielded several key findings, most notably that there is a statistically significant positive impact of dynamic capabilities across all five dimensions on the quality of healthcare services, as measured by its five dimensions. **Future Research Directions:** The study recommends conducting further research on factors related to dynamic capabilities and their relationship with other variables such as performance. It also emphasizes the importance of fostering openness, experience sharing, and acceptance of necessary change processes.

**Keywords:** Dynamic Capabilities, Service Quality, Jordanian Hospitals, Learning Capability, Tangibility, Empathy.

## **Introduction**

Contemporary organizations are facing a wide range of challenges across various domains. In response to the demands of an increasingly dynamic environment particularly in sectors like commercial banking organizations must act efficiently and effectively to achieve their foundational goals, gain customer satisfaction, ensure sustainability, and deliver high-quality services. Similarly, hospital management seeks to organize and enhance its diverse operations, which requires a proactive response to market demands through the development of a clear vision that supports future foresight and meets customer needs. This, in turn, leads to the adoption of strategies capable of adapting to environmental changes and sectoral developments.

Dynamic capabilities are considered a key element in the resource-based view (RBV) theory. They refer to an organization's ability to develop and renew its resources over time to maintain the quality of services provided and adapt to external environmental changes (Teece et al., 2009).

Accordingly, this study aims to explore the impact of dynamic capabilities represented by sensing capability, learning capability, integration capability, coordination capability, and reconfiguration capability on the quality of services at Jordan Hospital, as measured by tangibility, service ease, responsiveness, reliability, and empathy.

The problem addressed in this study lies in the quality of services provided at Jordan Hospital, which is currently facing numerous dynamic environmental challenges, rapid technological advancements, and intense competition among hospitals in Jordan. Amid these accelerating challenges and environmental shifts, delivering high-quality healthcare especially digital services has become crucial for satisfying patients and maintaining institutional excellence. Service quality at Jordan Hospital is increasingly recognized as a critical indicator of success and sustainability in a highly competitive healthcare sector.

Dynamic capabilities are viewed as a set of organizational competencies that enable institutions to perform their activities efficiently and effectively. They may play a significant role in enhancing service quality, which this study seeks to investigate.

Based on this context, the primary purpose of this study is to answer the following central research question:

### *Main Research Question*

What is the impact of dynamic capabilities namely sensing capability, learning capability, integration capability, coordination capability, and reconfiguration capability on service quality as reflected in its dimensions: tangibility, service ease, responsiveness, reliability, and empathy at Jordan Hospital?

### *Sub-questions*

In addition to the main research question, the study seeks to answer the following sub-questions:

1. What is the perceived level of importance of dynamic capabilities and their dimensions (sensing, learning, integration, coordination, and reconfiguration) at Jordan Hospital?

2. What is the perceived level of importance of healthcare service quality and its dimensions (tangibility, service ease, responsiveness, reliability, and empathy) at Jordan Hospital?
3. What is the impact of dynamic capabilities through their dimensions on the quality of healthcare services at Jordan Hospital?

### *Research Objectives*

The primary objective of this study is to examine the impact of dynamic capabilities sensing, learning, integration, coordination, and reconfiguration on the quality of healthcare services, represented by tangibility, service ease, responsiveness, reliability, and empathy, at Jordan Hospital.

This overarching objective is further detailed into the following sub-objectives:

1. To identify the level of perceived importance of dynamic capabilities and their dimensions (sensing, learning, integration, coordination, and reconfiguration) at Jordan Hospital.
2. To identify the level of perceived importance of healthcare service quality and its dimensions (tangibility, service ease, responsiveness, reliability, and empathy) at Jordan Hospital.
3. To assess the impact of dynamic capabilities, across their various dimensions, on the quality of healthcare services at Jordan Hospital.

### *Research Hypotheses*

Based on the research problem and questions, the following hypotheses were formulated:

#### *Main Hypothesis*

**H<sub>0.1</sub>:** There is no statistically significant impact at the significance level ( $\alpha > 0.05$ ) of dynamic capabilities including sensing, learning, integration, coordination, and reconfiguration capabilities on service quality across its dimensions (tangibility, service ease, responsiveness, reliability, and empathy) at Jordan Hospital.

#### *Sub-Hypotheses*

**H<sub>0.1.1</sub>:** There is no statistically significant impact at the significance level ( $\alpha > 0.05$ ) of dynamic capabilities including sensing, learning, integration, coordination, and reconfiguration capabilities on tangibility at Jordan Hospital.

**H<sub>0.1.2</sub>:** There is no statistically significant impact at the significance level ( $\alpha > 0.05$ ) of dynamic capabilities including sensing, learning, integration, coordination, and reconfiguration capabilities on service ease at Jordan Hospital.

**H<sub>0.1.3</sub>:** There is no statistically significant impact at the significance level ( $\alpha > 0.05$ ) of dynamic capabilities including sensing, learning, integration, coordination, and reconfiguration capabilities on responsiveness at Jordan Hospital.

**H<sub>0.1.4</sub>:** There is no statistically significant impact at the significance level ( $\alpha > 0.05$ ) of dynamic capabilities including sensing, learning, integration, coordination, and reconfiguration capabilities on reliability at Jordan Hospital.

**H<sub>0.1.5</sub>:** There is no statistically significant impact at the significance level ( $\alpha > 0.05$ ) of dynamic capabilities including sensing, learning, integration, coordination, and reconfiguration capabilities on empathy at Jordan Hospital.

*Operational Definitions*

- **Dynamic Capabilities:** A set of abilities possessed by commercial banks to reshape their internal resources and operational capabilities in alignment with environmental changes, while identifying and responding to rapid and critical challenges faced by Jordanian commercial banks.
- **Sensing Capabilities:** The ability of commercial banks to sense, generate ideas, detect problems, anticipate environmental challenges, and develop proactive solutions before problems escalate. This includes environmental scanning, identifying potential threats, avoiding risks, and generalizing solutions across all Jordanian commercial banks.
- **Learning Capabilities:** The ability of commercial banks to identify and understand external knowledge, internal competencies, acquire new knowledge, and evaluate scenarios that support adaptation to the external environment.
- **Integration Capabilities:** The ability of commercial banks to integrate new resources, harmonize activities, and adapt organizational rules and procedures flexibly to environmental changes and organizational performance, in order to meet societal needs.
- **Coordinating Capabilities:** The ability of Jordanian commercial banks to align their programs by coordinating task deployment, resources, and activities to support operational capability dissemination. This also includes the ability to ensure interconnection between structures, functions, and processes.
- **Reconfiguration Capabilities:** The ability of commercial banks to restructure internal and external organizational resources in order to achieve sustainable competitive advantage.
- **Service Quality:** The ability to deliver services at a quality level that meets customer expectations, reflecting their satisfaction, alignment with, and trust in the services provided by Jordanian commercial banks.
- **Tangibility:** Refers to all physical facilities and equipment required by the bank to deliver services to clients, including buildings, tools, materials, communication devices, and infrastructure.
- **Ease of Service:** The simplification of service delivery to bank clients by reducing procedures and minimizing complexity, using technological advancements to streamline transactions and enhance service experience.
- **Responsiveness:** The interaction and engagement of service recipients with the services provided by Jordanian commercial banks, reflecting the banks' readiness and promptness in meeting customer needs.
- **Reliability:** The availability of dependable services or systems that clients or service providers can rely on, ensuring the provision of accurate and high-quality data and information.
- **Empathy:** The ability to respond empathetically to individuals' attitudes, understand their perspectives, and reflect the bank's personal care and respectful, ethical, and humane treatment of its clients.

*Study Delimitations*

- **Topical Delimitation:**  
The study focuses on examining the impact of dynamic capabilities namely sensing capability, learning capability, integration capability, coordination capability, and reconfiguration capability—on the quality of services, as reflected in tangibility, ease of service, responsiveness, reliability, and empathy at Jordan Hospital.

- **Spatial Delimitation:**  
The study is limited to Jordan Hospital.
- **Temporal Delimitation:**  
The study is expected to be conducted and completed during the year 2025.
- **Human Delimitation:**  
The study will target a representative sample comprising managers at the senior and middle management levels across various functions at Jordan Hospital.

#### *Previous Studies*

The researcher reviewed previous studies related to the topic in order to analyze their findings and link them to the current study. It was noted that few prior studies addressed both variables of the current study simultaneously. The studies are arranged from the oldest to the most recent:

The study by Al-Tayra and Al-Hassi (2023) aimed to investigate the impact of banking service quality across its dimensions of tangibility, reliability, responsiveness, assurance, and empathy on the competitive advantage of Al-Wahda Islamic Bank. The study employed a descriptive analytical methodology. The population consisted of 55 male and female employees of Al-Wahda Islamic Bank. For statistical analysis, mean and standard deviation were used along with the Statistical Package for the Social Sciences (SPSS). The study confirmed that the quality of banking services provided by Al-Wahda Bank to its customers positively affected its competitive advantage, thereby enhancing the bank's financial competitiveness. The study recommended conducting further research on the impact of different dimensions of service quality on the competitive advantage of banks.

Langa et al. (2023) expanded on the development of new projects of utmost importance to innovative organizations, particularly in preparing them to adapt to rapidly changing business environments within Technology Business Incubators (TBIs). The study population consisted of managers of small and medium-sized enterprises in South Africa. A qualitative research method was used, involving the evaluation of 16 managers of technology business incubators to understand their perceptions of dynamic capabilities developed through product development services. The study adopted a unique approach combining two key institutional development tools business incubators and technology stations into one integrated component. The results revealed that technology management constitutes a dynamic capability developed through product development services during the business incubation process.

A study by Haq and Awan UI (2023) investigated the quality of electronic banking services across dimensions such as credibility, privacy and security, and website design, and examined their effect on customer loyalty using customer satisfaction with electronic banking as a mediating variable. The study employed a descriptive analytical methodology and used a questionnaire as the data collection tool. The study population consisted of bank customers in Pakistan, with a sample of 376 bank clients. Statistical analysis was conducted using the Statistical Package for the Social Sciences (SPSS). The results indicated an indirect relationship between the banking services provided to customers and their loyalty, mediated by service

reliability and the website used, both of which had a significant indirect effect on customer satisfaction with the banks studied.

A study by Amanah et al. (2021) aimed to investigate the impact of dynamic capabilities comprising sensing capability, learning capability, integration capability, and coordination capability on strategic success dimensions (survival, cost efficiency, and growth) within several Iraqi organizations. The study population included all employees at the College of Administration and Economics and the Presidency of the University of Karbala in Iraq, with a sample of 49 respondents. Data was collected through a questionnaire and analyzed using SPSS. The descriptive analytical approach was applied. The study found that dynamic capabilities significantly affected the dimensions of strategic success at the college. The results also showed relatively good levels of dynamic capabilities within the organization's activities.

The study by Ayeshoush (2021) focused on exploring various concepts related to dynamic capabilities specifically sensing capability, learning capability, integration capability, coordination capability, and reconfiguration capability and their contribution within some banks in the Wilaya of El Oued. An exploratory approach was used, relying on relevant literature, books, and related studies. The study population consisted of several banks in the Wilaya of El Oued, with a sample of 42 banks. A questionnaire was used as the data collection tool. The statistical methods applied included Cronbach's alpha, mean, standard deviation, and regression analysis, all conducted using the Statistical Package for the Social Sciences (SPSS).

The study concluded that dynamic capabilities significantly contribute to enhancing both exploitation and exploration processes.

The study by Aghimien et al. (2021) aimed to identify enabling dynamic capabilities as prerequisites for the digitization of organizations operating in the Architecture, Engineering, Construction, and Operations (AECO) sector in Hong Kong, while also stimulating a broader critical discussion among industry stakeholders. The study adopted an inductive methodology by reviewing 1,004 published scientific articles in the fields of engineering, environmental science, and business administration, from which 265 articles were selected as the research sample. The study population consisted of stakeholders in factories in Hong Kong, China. The researchers used VOSviewer software to create co-occurrence maps based on bibliographic data to develop an overlay network of key terms. The identified dynamic capabilities dimensions included industrial management, strategic planning, organizational learning, enterprise resource management, and innovative information technology. The study's results revealed that AECO organizations pursuing digitization possess the capability to sense and seize opportunities and threats within the business environment and to reconfigure their business processes to best meet market demands.

The study by Firman and Thabran (2018) aimed to identify and analyze the impact of Total Quality Management (TQM), dynamic capabilities, and innovation on achieving competitive advantage. The study also sought to test whether innovation mediates the relationship between TQM, dynamic capabilities, and competitive advantage. This is a causal research study based on primary data collected from department or program leadership. The population comprised program leaders at a college in Padang, Indonesia. A descriptive

analytical methodology was used, and questionnaires were distributed to 90 respondents, with 50 valid responses returned for analysis. Statistical methods included Cronbach's alpha, mean, standard deviation, and regression analysis, all conducted using the Statistical Package for the Social Sciences (SPSS). The results showed that dynamic capabilities and innovation have a significant positive impact on competitive advantage.

The study by Akram and Hilman (2018) primarily aimed to examine the effect of knowledge management activities namely knowledge acquisition, knowledge sharing, and knowledge creation and dynamic capabilities dimensions learning capability, integration capability, reconfiguration capability, and alliance management capability on employee performance in the banking sector of Pakistan. The study population included employees of banks in Pakistan. A descriptive analytical approach was adopted with a quantitative methodology for data analysis. The sample was drawn from employees working in both public and private banks across Pakistan. A self-administered questionnaire was distributed to employees in the public and private banking sectors using stratified random sampling and ordinary least squares (OLS) technique. Statistical methods such as hypothesis testing and factor analysis were used to validate and reduce the elements. The study concluded that both knowledge management activities and dynamic capabilities significantly influence employee performance in Pakistan's banking sector.

### **Study Distinctions from Previous Research**

This study distinguishes itself from other studies reviewed by the researcher in several aspects. It aims to identify the impact of dynamic capabilities specifically sensing capability, learning capability, integration capability, coordination capability, and reconfiguration capability and service quality dimensions tangibility, ease of service, responsiveness, reliability, and empathy within Jordan Hospital. This study addresses critical variables in the healthcare sector at Jordan Hospital, thereby enhancing organizational excellence in this vital sector. Additionally, the study is distinguished by its specific focus on Jordan Hospital, an economically and industrially significant institution, which adds substantial value by providing recommendations that can advance the hospital's trajectory and achieve improved service quality.

### **Theoretical Framework**

#### ***Dynamic Capabilities***

##### *Concept of Dynamic Capabilities*

Dynamic capabilities focus on the internal alignment of the organization with the changing environment under a high degree of uncertainty, ensuring a rapid response to strategic demands. The concept of dynamic capabilities is relatively recent within the integrated approach to strategic processes, despite its use in management literature. Therefore, a comprehensive understanding of dynamic capabilities from a broad perspective has formed an approach capable of acting as a lever in cases of strategic renewal, as dynamic capabilities are based on change processes, especially radical transformation (Janoszka, 2019, p. 75). The term "dynamic" denotes change and refers to the identification of competencies required to achieve alignment with the changing environment (Winter, 2003, p. 992).

### *Dimensions of Dynamic Capabilities*

There are many dynamic capabilities composed of several dimensions that have been identified and studied in various research. The dimensions selected for this study are as follows:

#### *Sensing Capability*

Sensing capability is the ability to perceive the external environment and detect turbulent conditions, understand customer requirements, sense the direct and indirect ecosystem, and recognize market dynamics better than competitors. It reflects the organization's ability to detect environmental changes. Organizations develop sensing capability by implementing periodic monitoring mechanisms for both the immediate and distant business environment (Teece, 2014, p. 332).

#### *Learning Capability*

Learning capability is regarded as a means to enhance the organization's ability to cope with fluctuations in its working environment. It serves as a foundation for providing insights into how the organization interprets, acquires, distributes, and activates knowledge to produce a sustainable and lasting competitive advantage. Moreover, it plays a critical role in increasing the effectiveness of the organization's dynamic capabilities, thus enabling the introduction of innovative initiatives and representing the organization's strategic value.

#### *Integration Capability*

Integration capability refers to the ability to incorporate new skills by linking them with the existing resources and capabilities within the organization to achieve competitive advantage. Organizations must leverage the knowledge embedded within their employees to enhance this capability (Teece, 2007).

#### *Coordinating Capability*

Coordination capability in the context of digital transformation involves mobilizing tangible and intangible health resources to implement actions aimed at exploiting opportunities, accepting redirection and change, creating a minimum viable new product, quickly identifying actual resources, and establishing digital innovation labs. The capability of seizing arises from reorganizing, redistributing, aligning assets, and fostering shared alignment (Pundziene et al., 2021).

#### *Reconfiguration Capability*

Reconfiguration capability refers to the organization's ability to alter, modify, expand, and renew its resources to create and sustain a competitive advantage over a long period. It enables the organization to differentiate its products and services in the market in a timely manner, exploit opportunities ahead of competitors, innovate by offering new products, enter new markets, and be prepared to restructure its infrastructure. This capability supports dealing with dynamic environmental challenges and changes, as well as managing organizational capacity-building schemes and workforce adaptability (Ali, 2020, p. 5994).

## Health Services Quality

### *Concept of Service Quality*

Business organizations in the twenty-first century face numerous technical, political, social, and cultural challenges imposed by the dynamic conditions of their operating environments. Addressing these challenges necessitates ongoing research and development guided by a rigorous scientific approach. These developments have given rise to new trends in Total Quality Management (TQM) practices, which have subsequently impacted organizational performance and strategies for adapting to change. Such practices are critically important in tackling issues related to TQM within business organizations and in devising effective solutions. Recently, there has been heightened focus on improving service quality, particularly because the service sector significantly contributes to the gross national product of many countries worldwide (Spalth, 2019).

### *Dimensions of Service Quality*

The SERVQUAL model is a multidimensional survey instrument designed to measure customer satisfaction with the services provided and to assess the gap between customer expectations and the actual quality of service delivered. The term SERVQUAL is derived from the words "Service" and "Quality." Below, the researcher presents a review of the key dimensions of service quality:

- **Tangibility**

Tangibility holds great importance for banking institutions that aim for profit and stability through the presence of equipment and personnel. Tangibility relates to delivering high-quality services to beneficiaries and is associated with the physical appearance and comfort facilities (Diop & Atiya, 2005, p. 125).

- **Ease of Service**

Ease of service is a fundamental concept describing how easily users can utilize the service. Design teams specify particular metrics for each project aiming to improve usability while providing maximum functionality and respecting operational constraints, such as access to electronic or smart services (AbuSharar, 2017).

- **Responsiveness**

Responsiveness refers to the interaction between the service provider and the consumer, emphasizing the provider's attentiveness to satisfying customer needs and desires. It reflects the extent to which the customer feels valued and respected during service delivery (Parasuraman, 1988).

- **Dependability (Reliability)**

Dependability is defined as the service provider's ability to perform the service reliably, with a high degree of accuracy and consistency, and to provide the service continuously. According to Kanyangarara et al. (2017), dependability denotes the provider's capability to fulfill and commit to delivering the promised service with trustworthiness, accuracy, and stability.

- **Empathy**

Empathy refers to demonstrating friendliness, care for the customer, making them feel important, and a genuine desire to provide service tailored to their needs (Swan & Combs, 1976).

### Research Methodology

This study aimed to explore the impact of dynamic capabilities on the quality of health services at Jordan Hospital. The research adopted a descriptive-analytical approach to investigate the relationships between the study variables.

#### *Study Population and Sample*

The study population consisted of all employees in top, middle, and lower-level administrative positions at Jordan Hospital, totaling 488 employees. A random sample of 215 employees was selected from these administrative levels. To ensure adequate representation of the population and account for the possibility of incomplete responses, the researcher increased the actual sample size to 240 questionnaires, allowing for a 5% margin of error (Al-Najjar et al., 2020, pp. 108–109).

An electronic questionnaire was utilized for data collection, and a digital link was distributed to the targeted sample. A total of 206 responses were received from the accessible sample, representing a response rate of 85.83%, all of which were valid for statistical analysis. This number is close to the representative sample size required for the study.

#### *Study Instrument*

This study relied on a questionnaire as the primary tool for collecting data from employees occupying top, middle, and lower-level administrative positions at Jordan Hospital.

#### *Instrument Validity*

To ensure the validity of the study instrument, the researcher consulted a panel of academic experts in the relevant field from several Jordanian universities. This process aimed to verify the face validity of the questionnaire in terms of the clarity, relevance, and comprehensiveness of its items in addressing the research topic.

A draft of the questionnaire, along with the study framework and hypotheses, was sent to the experts for their feedback and suggestions. The researcher then collected their responses, reviewed the proposed modifications, and incorporated the most appropriate changes. This process led to the development of the final version of the questionnaire, which was subsequently distributed to the targeted study sample.

#### *Instrument Reliability*

The reliability of the study instrument was verified based on its variables and the responses of the target sample, by calculating the internal consistency reliability coefficient using Cronbach's Alpha. The study variables included *dynamic capabilities* as the independent variable and *service quality* as the dependent variable. The purpose of this calculation was to assess the internal consistency of the questionnaire items and ensure their quality.

Table (1) presents the stability and internal consistency coefficients for the dimensions of the study variables. A Cronbach's Alpha value is considered acceptable when it exceeds 0.70, particularly in research related to the social and administrative sciences. The closer the Alpha value is to 1, the greater the internal consistency of the instrument (Sekaran & Bougie, 2016, p. 289).

Table 1

*Cronbach's Alpha Coefficients for the Dimensions of Dynamic Capabilities*

Variable	Dimension	Number of Items	Cronbach's Alpha
<b>Dynamic Capabilities</b>	Sensing Capability	5	0.90
	Learning Capability	5	0.86
	Integration Capability	5	0.84
	Coordinating Capability	5	0.87
	Reconfiguration Capability	5	0.90
<b>Total Variable</b>		25	0.89

*Interpretation*

Table (1) shows that the reliability coefficients (Cronbach's Alpha) for the dimensions of the study variables ranged between 0.84, which is the lowest value (for Integration Capability), and 0.90, which is the highest value (for Sensing and Reconfiguration Capabilities). Therefore, all Cronbach's Alpha values for the instrument dimensions are considered good and indicate a high level of internal consistency based on the commonly accepted standards for research in the social and administrative sciences.

Table 2

*Cronbach's Alpha Coefficients for the Dimensions of Health Service Quality*

Variable	Dimension	Number of Items	Cronbach's Alpha
<b>Health Service Quality</b>	Tangibility	5	0.85
	Ease of Service	5	0.89
	Responsiveness	5	0.84
	Reliability	5	0.88
	Empathy	5	0.82
<b>Total Variable</b>		25	0.87

*Interpretation*

Table (2) shows that the reliability coefficients (Cronbach's Alpha) for the study's dependent variable dimensions ranged between 0.82, the lowest value (for Empathy), and 0.89, the highest value (for Ease of Service). Accordingly, all alpha values reported in the table indicate a high level of internal consistency and are deemed acceptable for studies in the fields of social and administrative sciences.

*Multicollinearity Test Between the Dimensions of the Independent Variable*

After reviewing the data and conducting the required analyses, the **Variance Inflation Factor (VIF)** was calculated for the dimensions of the independent variable (*Sensing Capability, Learning Capability, Integration Capability, Coordinating Capability, and Reconfiguration Capability*) to ensure that the level of correlation and multicollinearity among the independent variables was not excessively high. The results are presented in Table (3) below:

Table 3

*VIF and Tolerance Values for the Independent Variable Dimensions*

Independent Variable Dimensions	Variance Inflation Factor (VIF)	Tolerance
Sensing Capability	1.785	0.560
Learning Capability	1.951	0.512
Integration Capability	1.843	0.540
Coordinating Capability	1.757	0.525
Reconfiguration Capability	1.689	0.570

*Interpretation*

The results in Table (3) indicate that all VIF values are greater than 1 and less than 10, while all Tolerance values exceed 0.10. These findings confirm that there is no significant multicollinearity among the independent variable dimensions (Sekaran & Bougie, 2016, p. 316).

*Normality Test of the Study Data*

To assess the normality of the data distribution, the Skewness and Kurtosis coefficients and the One-Sample Kolmogorov-Smirnov Test were conducted for all study variables. Table (4) presents the results:

Table 4

*Results of the Normality Test for the Study Variables*

Variables	Study Dimensions	Skewness	Kurtosis	Kolmogorov-Smirnov Sig.
<b>Dynamic Capabilities</b>	Sensing Capability	-0.186	0.913	0.272
	Learning Capability	-0.598	0.303	0.119
	Integration Capability	-0.286	0.812	0.232
	Coordinating Capability	-0.576	0.3101	0.112
	Reconfiguration Capability	-0.193	0.915	0.282
<b>Health Service Quality</b>	Tangibility	-0.432	1.470	0.211
	Ease of Service	-0.688	0.447	0.180
	Responsiveness	-0.325	0.125	0.312
	Reliability	-0.799	0.612	0.486
	Empathy	-0.493	0.173	0.313

*Interpretation*

Table (4) shows that all skewness values range between -0.688 and -0.186, which fall within the acceptable range of (-3 to +3), indicating that the data distributions are approximately symmetric. The slight negative skew suggests a mild right-skewed distribution. Additionally, kurtosis values range from -0.125 to 1.470, all below the threshold of 3, confirming that the data exhibit a relatively flat (platykurtic) distribution.

Moreover, the Kolmogorov-Smirnov significance values for all variables are greater than 0.05, indicating that there are no significant deviations from the normal distribution. Thus, the null hypothesis of normality is accepted for all study dimensions, supporting the assumption of normal distribution.

*Correlation Matrix among Dimensions of the Independent Variable (Dynamic Capabilities)*

To examine the internal correlations among the dimensions of the independent variable dynamic capabilities Pearson's correlation coefficient was used. Table (5) presents the intercorrelations among the five subdimensions of dynamic capabilities.

Table 5

*Pearson Correlation Matrix for the Dimensions of Dynamic Capabilities*

	<b>Sensing</b>	<b>Learning</b>	<b>Integration</b>	<b>Coordination</b>	<b>Reconfiguration</b>
<b>Sensing</b>	1	.543**	.793**	.543**	.793**
<b>Learning</b>	.543**	1	.793**	.543**	.793**
<b>Integration</b>	.793**	.793**	1	.753**	.856**
<b>Coordination</b>	.543**	.543**	.753**	1	.632**
<b>Reconfiguration</b>	.793**	.793**	.856**	.632**	1
<b>Overall Dynamic Capabilities</b>	.793**	.543**	.793**	.870**	1

**Note:** \*\* Correlation is significant at the 0.01 level (2-tailed).

As shown in Table (5), all correlation coefficients among the dimensions of dynamic capabilities are statistically significant at the **0.01** level, indicating strong and consistent relationships across dimensions.

- The correlation between **Sensing** and **Learning** is **moderate** ( $r = .543$ ), suggesting a good and meaningful relationship.

- Strong correlations are observed between:

- **Sensing** and **Integration** ( $r = .793$ ),
- **Integration** and **Reconfiguration** ( $r = .856$ ),
- **Overall Dynamic Capabilities** and **Coordination** ( $r = .870$ ), reflecting **high internal consistency** and **interconnectedness** among these dynamic capability constructs.

These findings support the internal coherence of the dynamic capabilities construct and indicate a high degree of synergy among its dimensions.

*Correlation Matrix among Dimensions of the Dependent Variable (Health Service Quality)*

Pearson's correlation coefficient was used to examine the intercorrelations among the subdimensions of the dependent variable health service quality. The results are presented in Table (6).

Table 6

*Pearson Correlation Matrix among Health Service Quality Dimensions*

	Tangibility	Ease of Service	Responsiveness	Reliability	Empathy	Overall Service Quality
Tangibility	1	.533**	.780**	.633**	.533**	.780**
Ease of Service	.533**	1	.803**	.689**	.803**	.803**
Responsiveness	.780**	.803**	1	.780**	.803**	1
Reliability	.633**	.689**	.780**	1	.689**	.780**
Empathy	.533**	.803**	.803**	.689**	1	.803**
Overall Service Quality	.780**	.803**	1	.780**	.803**	1

**Note:** \*\* Correlation is significant at the 0.01 level (2-tailed).

As shown in Table (6), all correlation coefficients among the subdimensions of health service quality are statistically significant at the **0.01** level.

- The correlation between **Tangibility** and **Empathy** ( $r = .533$ ) indicates a **moderate** and statistically **significant** relationship.

- Strong correlations were found between:

- **Tangibility** and **Responsiveness** ( $r = .780$ ),
- **Ease of Service** and **Empathy** ( $r = .803$ ),
- **Responsiveness** and **Overall Service Quality** ( $r = 1.00$ ).

These results suggest a **high degree of internal consistency** among the subdimensions of the health service quality construct, reinforcing the robustness of the measurement model for the dependent variable.

#### *Instrument Scoring Criterion*

The relative importance levels were determined using the following formula, based on the five-point Likert scale employed in the questionnaire:

$$\text{Relative Importance} = \frac{\text{Highest Value} - \text{Lowest Value}}{\text{Number of Levels} - 1} = \frac{5 - 1}{5 - 1} = 1.33$$

$$\text{Relative Importance} = \frac{\text{Highest Value} - \text{Lowest Value}}{\text{Number of Levels} - 1} = \frac{5 - 1}{5 - 1} = 1.33$$

Based on the formula above, the cut-off values for relative importance were established as shown in Table (7).

Table 7

*Relative Importance Scale*

Scale	Relative Importance Level
1.00 – < 2.34	Low
2.34 – < 3.67	Medium
3.67 – 5.00	High

*Study Results and Discussion*

## Description of the Study Sample Characteristics

The researcher presented the demographic and occupational characteristics of the targeted study sample, which included gender, age group, educational qualification, and years of experience.

Table (8)

*Description of the Study Sample Characteristics*

<b>Variable</b>	<b>Category</b>	<b>Frequency</b>	<b>Percentage (%)</b>
<b>Gender</b>	Male	134	65.0
	Female	72	35.0
<b>Age Group</b>	Less than 30 years	6	2.9
	30 – < 40 years	99	48.1
	40 – < 50 years	78	37.9
	50 years and above	23	11.2
<b>Educational Level</b>	Bachelor's degree	98	47.6
	Higher diploma	22	10.7
	Master's degree	64	31.1
	Doctorate	22	10.7
<b>Years of Experience</b>	Less than 5 years	4	1.9
	5 – < 10 years	49	23.8
	10 – < 15 years	70	34.0
	15 years and above	83	40.3
<b>Total</b>		<b>206</b>	<b>100.0</b>

The data in Table (8) illustrate the distribution of the respondents according to the gender variable, which showed a higher participation rate for males compared to females. Specifically, 134 participants were male, representing 65% of the sample, while 72 were female, comprising 35%.

Regarding the age distribution, the largest group was respondents aged between 30 and less than 40 years, with 99 individuals (48.1%). This was followed by the 40–<50 age group with 78 respondents (37.9%), the 50 years and above group with 23 respondents (11.2%), and finally, the under-30 group with 6 respondents (2.9%).

As for educational qualifications, the highest proportion of participants held a bachelor's degree (47.6%), followed by those with a master's degree (31.1%). Respondents holding a higher diploma and a doctorate each represented 10.7% of the sample.

Regarding years of experience, the majority of participants had more than 15 years of experience (40.3%), followed by those with 10 to less than 15 years (34.0%), then 5 to less than 10 years (23.8%), and finally, those with less than 5 years of experience (1.9%).

*Answer to the Study Questions*

First: Dynamic Capabilities What is the level of relative importance of dynamic capabilities and their dimensions (sensing capability, learning capability, integration capability, coordinating capability, and reconfiguration capability) at Jordan Hospital?

To answer this question, the arithmetic mean and standard deviation of the respondents' answers to the items related to the dimensions of the independent variable **Dynamic Capabilities** (including skill flexibility and practice flexibility)—were calculated as shown below:

*Sensing Capability*

Table (9)

*Arithmetic Means, Standard Deviations, and Relative Importance for the Items Related to Sensing Capability*

Item No.	Items	Mean	Standard Deviation	Rank	Relative Importance
1	The hospital conducts environmental scanning to identify available opportunities.	4.3010	0.51009	1	High
2	The hospital develops plans to improve its operations and services in the future.	4.2573	0.57324	5	High
3	The hospital responds to ideas and initiatives aimed at improving its services.	4.2816	0.53951	2	High
4	The hospital is willing to collaborate with other hospitals to benefit from and understand surrounding events and developments.	4.2621	0.60018	4	High
5	The hospital is keen to conduct research and studies to explore future opportunities.	4.2767	0.57266	3	High
<b>Overall Mean for Dimension</b>		4.2757			High

The results shown in Table (9) indicate that the respondents' answers reflect a high degree of importance. The mean values for the items related to sensing capability ranged between 4.2573 and 4.3010, which all fall within the "High" category of relative importance.

The arithmetic means of the respondents' answers ranged between (4.3010 – 4.2573), with a high overall level of importance recorded for all responses, reaching an overall mean of (4.2757). The first item, *"The hospital conducts environmental scanning to identify available opportunities,"* ranked first with a mean of 4.3010. Meanwhile, the item *"The hospital develops plans to improve its operations and services in the future,"* ranked last among the items, with a mean of 4.2573, yet still reflected a high level of importance.

Based on these results, it can be concluded that Jordan Hospital places significant emphasis on scanning and analyzing operations to identify opportunities for enhancing its services, and on developing future plans aimed at delivering healthcare services of the highest possible quality.

### *Learning Capability*

#### Table (10)

##### *Means, Standard Deviations, and Relative Importance for the Items of Practice Flexibility*

The results presented in Table (10) indicate that respondents rated Item 8, *“Hospital employees share best practices with one another in performing their tasks,”* at a moderate level, while all other items were rated at a high level, with mean values ranging between (3.7524 – 4.2913).

The highest-ranked item was *“The hospital continuously modifies its procedures in accordance with best practices in the healthcare sector,”* with a mean of 4.2913, and the lowest standard deviation, indicating strong agreement among respondents on its importance. This suggests that Jordan Hospital is committed to aligning its operational procedures with the latest advancements and best practices in the healthcare industry, thereby enhancing the quality of services provided.

Although Item 8 received the lowest mean score (3.5680) among the items, the presence of digital dialogue platforms (e.g., social media) and internal meetings for knowledge exchange reflects a proactive approach to organizational learning. The findings imply that the hospital fosters a learning environment, particularly through continuous procedural adaptation and benchmarking successful practices from other institutions.

### *Integration Capability*

#### Table (11)

##### *Means, Standard Deviations, and Relative Importance for the Items of Integration Capability*

As shown in Table (11), Item 11, *“The hospital actively contributes to forming work teams and defining their inputs and duties,”* was rated at a moderate level with a mean score of 3.2913, while all other items received high ratings, with mean values ranging from 3.2913 to 4.7524. The highest-rated item was Item 15, *“The hospital has an effective management capable of successfully linking its various activities,”* with a mean of 4.7524, reflecting strong agreement among respondents regarding the importance of this managerial capacity. This highlights the hospital's ability to integrate activities and departments in a cohesive manner to deliver quality services.

Additionally, the high score for Item 14, related to having a clear electronic job description system, suggests the presence of structured administrative mechanisms that support coordination and role clarity. While Item 13, which discusses cross-unit collaboration in responding to environmental changes, received a slightly lower rating, it still indicates a positive perception toward adaptive integration aimed at keeping pace with future developments.

These results emphasize that Jordan Hospital values integration through team-based structures, clear responsibilities, and efficient coordination, which are essential for achieving strategic agility and service excellence.

### *Coordinating Capability*

#### Table (12)

##### *Means, Standard Deviations, and Relative Importance for the Items of Coordinating Capability*

Table (12) indicates that respondents' answers were rated at a high level across all items, with mean scores ranging from 4.2356 to 4.2816, and an overall mean of 4.2757, reflecting a strong perception of the hospital's coordination capabilities.

Item 16, *"The hospital rearranges resources based on work priorities,"* received the highest rating with a mean of 4.2356, indicating the hospital's focus on strategic resource reallocation in alignment with operational demands.

Item 17, *"The hospital possesses a code of conduct for employee behavior,"* had the lowest mean among the items (4.2573), though still at a high level, suggesting that organizational ethics and behavioral guidelines are well-regarded and consistently implemented.

Overall, these results suggest that Jordan Hospital effectively prioritizes resources and applies performance standards and ethical guidelines to ensure coordinated and harmonious service delivery across departments. The presence of clear operational procedures, task allocation based on qualifications, and performance metrics all contribute to reinforcing internal coordination and optimizing institutional capacity.

### *Reconfiguration Capability*

#### Table (13)

##### *Means, Standard Deviations, and Relative Importance of the Items Related to Reconfiguration Capability*

Table (13) demonstrates that respondents' answers were rated at a high level, with mean scores ranging from 4.0680 to 4.3204, and an overall mean of 4.1942, indicating a consistently strong perception of the hospital's ability to adapt and reconfigure resources.

Item 25, *"The hospital demonstrates effectiveness in reallocating human resources,"* ranked first with the highest mean score of 4.3204, highlighting the hospital's efficiency in adjusting its workforce in response to changing needs.

On the other hand, Item 23, *"The hospital keeps pace with ongoing environmental changes and the evolving needs of the community,"* had the lowest mean score of 4.0680, though still within the high range, suggesting room for improvement in proactive environmental responsiveness.

Based on these results, it can be inferred that the senior, middle, and lower management levels at Jordan Hospital are highly effective in addressing challenges by promoting fairness, ensuring the availability of material resources for staff, and reallocating human capital as needed. Moreover, the hospital shows a considerable degree of adaptability to external developments and shifts in societal needs, enhancing both opportunities and resilience in a dynamic healthcare environment.

Table (14)

*Means, Standard Deviations, Rankings, and Relative Importance of the Dimensions of Dynamic Capabilities*

<b>Dimension of Dynamic Capabilities</b>	<b>Mean</b>	<b>Standard Deviation</b>	<b>Rank</b>	<b>Relative Importance</b>
Sensing Capability	4.2757	0.47585	2	High
Learning Capability	4.4961	0.70632	1	High
Integration Capability	4.5739	0.63652	3	High
Coordination Capability	4.3863	0.32563	5	High
Reconfiguration Capability	4.8631	0.53692	4	High
<b>Overall Mean</b>	4.3859	-	-	High

An examination of the data presented in Table (14) shows that all dimensions of dynamic capabilities were rated at a high level of importance, with closely related mean values. The reconfiguration capability ranked highest with a mean score of 4.8631, followed by integration capability in second place with a mean of 4.5739. All dimensions reflected a high level of importance, with an overall mean score of 4.3859.

Secondly: Health Service Quality: What is the level of relative importance of health service quality dimensions (Tangibility, Service Ease, Responsiveness, Reliability, and Empathy) in Jordan Hospital?

To answer this question, the arithmetic mean and standard deviation were used for the responses of the study sample regarding the items related to the dependent variable health service quality dimensions (Tangibility, Service Ease, Responsiveness, Reliability, and Empathy), as shown below:

### *Tangibility*

Table (15)

*Means, Standard Deviations, Ranks, and Importance Level for Tangibility Items*

<b>Item No.</b>	<b>Item Description</b>	<b>Mean</b>	<b>Std. Dev.</b>	<b>Rank</b>	<b>Importance Level</b>
26	The hospital management is keen to deliver services correctly to its customers the first time.	4.1650	0.51043	3	High
27	The hospital management provides the necessary infrastructure to perform work accurately.	4.1117	0.51642	4	High
28	The facilities and amenities available align with the nature of the hospital services.	4.0680	0.68805	5	High
29	The hospital management ensures its products after sales.	4.3058	0.64876	2	High
30	The hospital management harmonizes between necessary equipment and continuity of production.	4.3204	0.46246	1	High

### *Overall Mean for Tangibility Dimension: 4.1942 (High)*

The results in Table (15) show that respondents' answers were at a high level, with means ranging between 4.0680 and 4.3204, and an overall high mean score of 4.1942. Item (30) "The hospital management harmonizes between necessary equipment and continuity of production" ranked first with a mean of 4.3204, while item (28) "The facilities and amenities

available align with the nature of the hospital services” ranked last but still with a high mean of 4.0680.

Based on these findings, it can be concluded that the top, middle, and lower management levels at Jordan Hospital effectively harmonize the necessary equipment and devices to achieve appropriate productivity. Moreover, there is significant attention to ensuring that facilities and equipment are compatible with the nature of the services provided, reflecting the hospital’s commitment to improving employee skills, supporting innovation, and enhancing productivity.

### *Service Ease*

Table (16)

*Means, Standard Deviations, Ranks, and Importance Level for Service Ease Items*

<b>Item No.</b>	<b>Item Description</b>	<b>Mean</b>	<b>Std. Dev.</b>	<b>Rank</b>	<b>Importance Level</b>
31	The health services provided by the hospital are easy to use.	4.2020	0.54616	5	High
32	The hospital receives few complaints about how health services are handled.	4.4612	0.58929	4	High
33	The hospital management is keen on handling records honestly.	4.4854	0.59040	3	High
34	The hospital complies with easy procedures to deliver health services.	4.5485	0.56316	2	High
35	The hospital management is keen to deliver services correctly from the start.	4.5920	0.56632	1	High

### *Overall Mean for Service Ease Dimension: 4.4851 (High)*

The results in Table (16) show that respondents' answers were at a high level, with mean scores ranging between 4.2020 and 4.5920, and an overall high average of 4.4851. Item 35 “The hospital management is keen to deliver services correctly from the start” ranked first with a mean of 4.5920, while item 31 “The health services provided by the hospital are easy to use” ranked last but still high with a mean of 4.2020.

Based on these results, it can be concluded that the senior, middle, and lower management at Jordan Hospital rely on delivering services correctly and efficiently interacting with service recipients. This approach reflects flexibility, realism, and sustainability in the hospital's strategies for service delivery, which enhances its ability to adapt to changes and keep up with developments in electronic services. These findings differ from those of Alawneh’s study (2020).

*Responsiveness*

Table (17)

*Means, Standard Deviations, Ranks, and Importance Level for Responsiveness Items*

Item No.	Item Description	Mean	Std. Dev.	Rank	Importance Level
36	The hospital management provides customers with accurate information about service timings.	4.2020	0.54616	5	High
37	The hospital management ensures the requested service is delivered immediately upon customer request.	4.4612	0.58929	4	High
38	Hospital staff respond to customers' requests as quickly as possible.	4.4854	0.59040	3	High
39	Hospital employees are always ready to assist and support customers.	4.5485	0.56316	2	High
40	The hospital management responds promptly to complaints submitted by customers.	4.5920	0.56632	1	High

*Overall Mean for Responsiveness Dimension: 4.4851 (High)*

The data in Table (17) indicate that respondents rated all items at a high level, with means ranging between 4.2020 and 4.5920, and an overall mean of 4.4851. Item 40 "The hospital management responds promptly to complaints submitted by customers" ranked first with a mean of 4.5920, while item 36 "The hospital management provides customers with accurate information about service timings" ranked last but still high with a mean of 4.2020.

From these findings, it can be inferred that the hospital's management at all levels maintains a high level of responsiveness to service recipients, promptly addressing their issues and translating their suggestions into reality to improve service quality. These results differ from those reported in Alawneh's (2020) study.

*Reliability*

Table (18)

*Means, Standard Deviations, Ranks, and Importance Level for Reliability Items*

Item No.	Item Description	Mean	Std. Dev.	Rank	Importance Level
41	The hospital is keen to deliver the service correctly to the client the first time.	4.6396	0.54616	2	High
42	The hospital has mechanisms to address customer problems and respond to their inquiries.	4.8563	0.58929	1	High
43	Services are provided within the pre-specified time.	4.4363	0.59040	4	High
44	The services provided by the hospital comply with quality standards.	4.4963	0.56316	3	High
45	The hospital ensures fulfillment of promises made to its customers.	4.3521	0.56632	5	High

*Overall Mean for Reliability Dimension: 4.4367 (High)*

It is observed from Table (18) that respondents' answers were at a high level, with mean values ranging between 4.8563 and 4.3521, and an overall high average of 4.4367. Item 42 "The hospital has mechanisms to address customer problems and respond to their inquiries" ranked first with a mean of 4.8563, while item 45 "The hospital ensures fulfillment of promises made to its customers" ranked last with a mean of 4.3521, though still at a high level.

Based on these results, it can be concluded that the hospital is keen on providing services in a timely manner, solving customer problems effectively, and ensuring the security and high quality of the services provided. These findings differ from those of Alawneh's study (2020).

*Empathy*

Table (19)

*Means, Standard Deviations, Ranks, and Importance Level for Empathy Items*

Item No.	Item Description	Mean	Std. Dev.	Rank	Importance Level
46	The hospital is keen to give individual attention to every client.	4.6631	0.51245	2	High
47	The hospital ensures personal attention is given to each client.	4.7113	0.53691	1	High
48	Hospital staff understand the needs of the client.	4.4698	0.56913	4	High
49	Priority is given to the interests and needs of clients.	4.6394	0.56285	3	High
50	The hospital administration strives to improve the customer experience.	4.2361	0.53265	5	High

*Overall Mean for Empathy Dimension: 4.4639 (High)*

From Table (19), it is noted that respondents' answers were at a high level, with means ranging between 4.7113 and 4.2361, and an overall high average of 4.4639. Item 47 "The hospital ensures personal attention is given to each client" ranked first with a mean of 4.7113, while item 50 "The hospital administration strives to improve the customer experience" ranked last but still high with a mean of 4.2361.

Based on these results, it can be concluded that the hospital benefits from customer service experience and gives priority to client needs in alignment with their desires, emphasizing the role of employees in delivering appropriate services. These results differ from those of Alawneh's study (2020).

Table (14)

*Means, Standard Deviations, Rankings, and Relative Importance of Organizational Excellence Dimensions*

<b>Organizational Excellence Dimensions</b>	<b>Mean</b>	<b>Standard Deviation</b>	<b>Rank</b>	<b>Relative Importance</b>
Tangibility	4.1942	0.47817	4	High
Service Ease	4.1563	0.45631	5	High
Responsiveness	4.4961	0.46652	2	High
Reliability	4.2365	0.45239	3	High
Empathy	4.5126	0.43653	1	High

*Overall Mean for All Dimensions: 4.4721 (High)*

**Analysis**

The data indicate that all dimensions of organizational excellence at Jordan Hospital were rated at high levels of importance, with minor variations in the means. The empathy dimension ranked highest with a mean score of 4.5126, reflecting the hospital's commitment to providing a caring environment that addresses patients' personal needs. Meanwhile, the service ease dimension ranked lowest, though it still maintained a high level of importance with a mean of 4.1563.

The overall average of the organizational excellence dimensions reflects a strong commitment to quality and service delivery, with an overall mean of 4.4721.

**Recommendations**

1. Enhance the professional and behavioral capabilities of staff at Jordan Hospital, given their direct positive impact on the quality of healthcare services provided.
2. Focus on improving staff responsiveness and communication skills, as these are critical factors that strengthen the hospital's dynamic capabilities and positively affect patient satisfaction.
3. Facilitate access to digital services and technological interfaces within the hospital, as these significantly improve the quality and efficiency of healthcare delivery.
4. Encourage further studies and research that explore additional dimensions of dynamic capabilities and their role in enhancing healthcare service quality.

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