The Effect of Service Quality on Customer Satisfaction and Customer Loyalty: Evidence from Teaching Hospitals in Egypt

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Abstract
Purpose: The purpose of this study is to examine the moderating significant role of Customer Satisfaction (CS) on the relationship between Service Quality (SQ) and Customer Loyalty (CL).
Research Design/Methodology: To assess positive SQ, refer to (SQ Questionnaire, Cronin & Taylor,1992), CS (CS Questionnaire, Athanassopoulos, et al, 2001) and CL (CL Questionnaire, Parasuraman, 1996). The data of the study was collected from 315 employees at Teaching hospitals in Egypt. Out of the 357 questionnaires that were distributed to employees at Teaching hospitals in Egypt, 315 usable questionnaires were returned, a response rate of 88%. Multiple Regression Analysis (MRA) was used to confirm the research hypotheses.
Findings: Results of the study show that there are high positive correlation between SQ, CS and CL at Teaching hospitals in Egypt. SQ significantly influenced CS and CL. The finding reveals that SQ affects CL through CS. Therefore, this study has been specifically conducted to look into this phenomenon and seek empirical justification in this regard by considering SQ as the main contributory factor towards CS and CL.
Practical implications: Learning the relationships between SQ, CS and CL, retailers can effectively allocate their resources and develop a rational plan to improve their SQ under specific business circumstances. In addition, by the referring of loyal customers, Teaching hospitals can attract more customers. Managers are advised to satisfy and better manage their relationships through quality product and service offerings to their customers as a competitive policy in the marketplace. Teaching hospitals are required to offer products/services that meet or surpass consumers' expectation. The study also reveals interesting implications in SQ, CS and CL, useful to both academics and practitioners. Managers will find this research helpful in better understanding these variables and their roles on their companies' performance.
Originality/value: This research dealt with SQ in terms of its concept and dimensions, in addition to dealing with the significant role of CS in the relationship between SQ and CL at Teaching hospitals in Egypt.
Keywords: service quality, customer satisfaction, customer loyalty

1. Introduction

Service Quality (SQ), Customer Satisfaction (CS), and Customer Loyalty (CL) are very important concepts that companies must understand if they want to remain competitive and grow. In today's competitive environment delivering high quality service is the key for a sustainable competitive advantage. CS does have a positive effect on an organization's profitability. CS form the foundation of any successful business as it leads to repeat purchase, brand loyalty, and positive word of mouth (Angelova & Zekiri, 2011).

CS and CL is a well-known and established concept in several areas like marketing, consumer research, economic psychology, welfare-economics, and economics. CS and CL has long been a topic of high interest in both academia and practice (Ganiyu et al., 2012).

CS is one of the most important issues concerning business organization of all types, which is justified by the customer oriented philosophy and the principles of continuous improvement in modern eateries. CS is a collective outcome of perception, evaluation, and psychological reactions to the consumption expectation with a product or service. It is a customer's overall evaluation of the performance of an offering. This overall satisfaction has strong positive effect on CL intentions across a wide range of product and service categories. CS is a person's feelings of pleasures or disappointments resulting from comparing a product perceived performance (or outcome) in relation to his/her expectation (Veloutsou et al, 2005; Kotler & Armstrong, 2010).

This study is structured as follows: Section one is introductory. Section two presents the literature review. Section three discusses the research methodology. Section four presents the hypotheses testing. Section five explains the research findings. Research recommendations will take place at section six. Section seven handles the research implications. Limitations and future research will take place at section eight. Conclusion will be provided at the last section.

2. Literature Review

2.1. Service Quality

There are many definitions regarding the concepts of service. Services are deeds, processes, and performances (Parasuraman et al. 1985).

Service as is any activity or benefit that one party offers to another which is essentially intangible and does not result in the ownership of anything, and it may or may not be tied to a physical product (Kotler et. al., 1999).

Service is any primary or complementary activity that does not directly produce a physical product - that is, the non-goods part of the transaction between customer and provider (Payne, 1993).

Service is an activity or series of activities of more or less intangible nature that normally, but not necessarily, take place in interactions between the customer and service employees and /or systems of the service provider, which are provided as solutions to customer problems (Gronroos, 1984).

Quality was seen as a defensive mechanism but it is seen as a competitive weapon for emergence of new markets as well as growing market share (Davis et al, 2003).

Quality has been defined as fitness for use, or the extent to which a product successfully serves the purposes of consumers (Beverly et al., 2002).

Quality refers to the matching between what customers expect and what they experience (Berry et al., 1988).

Quality has been recognized as a strategic tool for attaining efficiency and business performance. With service assurance companies not even retain their existing customers but increase chances of getting and attracting new customers. Quality is one that satisfies the customer (Crosby, 1984; Eiglier & Langeard, 1987).

Quality involves eliminating 'internal failures' (defects before the product leaves the factory) and 'external failures' (defects after product use); (Garvin, 1983).

SQ has more directly influences on CL. It is one of the key elements which may influence customer's behavior. SQ decides whether the customer is loyalty or not. Therefore, improving SQ can increase CL (Deng, 2015).

SQ of an organization is becoming an important competition factor in the business field (Veldhuisen, 2011).

SQ is the overall assessment of a service by the customers (Eshghi et al., 2008). SQ is the difference between customer's expectations for the service encounter and the perceptions of the service received (Munusamy et al., 2010).

SQ is determined by calculating the difference between two scores where better SQ results in a smaller gap (Landrum, et al., 2008).

SQ is the result of the comparison that customers make between their expectations about a service and their perception of the way the service has been performed (Caruana, 2002).

SQ has gained tremendous attention from managers and academics due to its considerable influence on business performance, cost reduction, CS, CL and profitability (Gummesson, 1998; Sureshchander et al., 2002).

SQ has become a popular area of academic research and has been acknowledged as an observant competitive advantage and supporting satisfying relationships with customers (Zeithmal, 2000).

SQ is the meeting or exceeding customer expectations or as the expectations of service (Nitecki & Hernon, 2000).

SQ is a casual relationship between SQ and satisfaction and that the perceptions of SQ affect the feelings of satisfaction and/or dissatisfaction by the customer (Fornell et al., 1996).

SQ divisions are related to overall SQ and/or CS (Dabhalker et al., 1996; Zeithaml et al., 1996).

SQ is a global judgment, or attitude, relating to the superiority of the service. SQ presents 'the consumer's overall impression of the relative inferiority/superiority of the organization and its services. Therefore, SQ is a key of survival to all servicing companies (Parasuraman et al., 1994).

SQ is a difference between customer expectations of 'what they want' and their perceptions of 'what they get (Gronroos, 1990).

SQ is the customer perception of how does a service meets or exceeds their expectations (Czepiel, 1990).

SQ delineates two rather distinct facets of the construct: a technical dimension and a functional dimension (how the service is provided). Product quality was traditionally linked to the technical

specifications of goods, with most definitions of quality arising from the manufacturing sector where quality control has received prolonged attention and research (Grönroos, 1984; 1990).

SQ has become a major area of attention during the past few decades for managers, researchers, and practitioners because of its huge impact on business performance of firms. Customers prefer and value companies that provide high SQ. Thus, the attainment of quality in products and services has become a drive concern of the 1980s (Brown & Swartz, 1989).

Customers judge SQ relative to what they want by comparing their perceptions of service experiences with their expectations of what the service performance should be. Marketers described and measured only quality with tangible goods, whereas quality in services was largely undefined and un-researched (Brown & Swartz, 1989).

SQ was developed as the overall evaluation of a specific service firm that results from comparing that firm's performance with the customer's general expectations of how firms in that industry should perform. SQ is the global evaluation or attitude of overall excellence of services. SQ has become a significant differentiator and the most powerful competitive weapon that organizations want to possess (Berry et al. 1988).

SQ is a causal antecedent of CS, due to the fact that SQ is viewed to be at the transactional level and satisfaction is seen to be an attitude (Oliver, 1997).

SQ had ten dimensions such as reliability, responsiveness, competence, access, courtesy, communication, creditability, security, understanding/knowing the customers and tangibility. These ten dimensions were cut down to five namely, tangibility, reliability, responsiveness, assurance and empathy. They are as follows (Parasuraman et al., 1988):

1. *Tangibility*: This dimension includes the appearance of physical facilities, equipment personnel and communication materials used to communicate with customers. Elements within the tangibles dimension are cleanliness, space, atmosphere, appearance of server and location.

2. *Reliability*: It is the ability to perform the promised services dependably and accurately. The elements of reliability are speed, willingness to respond, accuracy and dependability.

3. *Responsiveness*: It is the willingness to help customers, and provide prompt service. Its elements include that of reliability.

4. *Assurance*: It is the knowledge and courtesy of employees and their ability to convey trust and confidence. Assurance may be measured using elements of knowledge, communications and caring for the customer.

5. *Empathy*: It is the provision of caring individualized attention to customers. Its elements are the same as assurance.

SERVQUAL scale is the most famous measure of SQ. It applicable in an extensive spectrum of service domains such as financial institutions, libraries, hotels, and medical centers. Many researchers have tried to use this tool in different service domains (Zeithaml et al., 1996; Parasuraman et al., 1988; 1994).

2.2. Customer Satisfaction

Satisfaction is a feeling that surfaces from an evaluation process, i.e. when the consumer of a good or service compares what is received against what is expected from the utilization of that good or service (Kotler et al., 2009).

Satisfaction is an overall customer attitude towards a service provider, or an emotional reaction to the difference between what customers anticipate and what they receive, regarding the fulfillment of some needs, goals or desire (Hansemark & Albinson, 2004).

Satisfaction is the customers' evaluation of a product or service in terms of whether that product or service has met their needs and expectations (Bitner & Zeithaml, 2003).

Satisfaction is a positive, affective state resulting from the appraisal of all aspects of a party's working relationship with another (Boselie et al., 2002).

There are three component of satisfaction. They are (1) consumer satisfaction is a response (emotional or cognitive); (2) the response pertains to a particular focus (expectations, product, consumption experience, etc.); and (3) the response occurs at a particular time (after consumption, after choice, based on accumulated experience, etc) (Giese & Cote, 2002).

Satisfaction is an indicator of met or exceeded expectations (Grisaffe, 2001). Satisfaction is the person's feelings of pleasure or disappointment resulting from comparing a product perceived performance in relation to his or her expectations (Kotler, 2000).

If a customer received what she or he expected, the customer is most likely to be satisfied (Reichheld, 1996).

Satisfaction is a much desired target for businesses, since a satisfied customer is likely to buy more, return to the store and spread positive word-of-mouth opinions to other customers (Anderson et al., 1994).

Satisfaction is the summary of psychological state resulting when the emotion surrounding disconfirmed expectations is coupled with the consumer's prior feelings about the consumption experience (Oliver, 1981).

CS is the point at which expectation and reality coincide. The concept of satisfaction embraces not only what is gained in the use of a product, but also consumers feeling about the effectiveness of their own decision process. CS is the level of a person's perceived performance or outcome in relation to his/her own expectation. (Howard & Sheth, 1969).

CS is a post choice evaluation judgment concerning a specific purchase decision. CS is the necessary foundation for firms to retain the existing customers. The customers who are unsatisfied with the received products/services would not be expected to have long run relationships with the firm (Guo et al., 2009; Lin & Wu, 2011).

CS has been defined in various ways, but the conceptualization, which appears to have achieved the widest acceptance, is that satisfaction is a post-choice evaluative judgment of a specific transaction (Bastos & Gallego, 2008).

CS is a key factor in the formation of a customer's desire to purchase future products. CS is considered as the corporate level strategy and it is a source of successful entrepreneurship. Regarding to CS, there are some differences in the definitions. There are three general components: response, focus and time. CS is a response, pertains to a particular focus, and occurs at a particular moment in time (Sureshchandar et al , 2002).

A higher level of CS will lead to greater loyalty. However, the impact of satisfaction on CL is rather complex (Zins, 2001).

CS has been a central concept in marketing literature and is an important goal of all business activities. Today, companies face their toughest competition, because they move from a product and sales philosophy to a marketing philosophy, which gives a company a better chance of outperforming competition (Kotler, 2000).

CS has a positive effect on an organization's profitability. The more customers are satisfied with products or services offered, the more are chances for any successful business as CS leads to repeat purchase, brand loyalty, and positive word of mouth marketing. CS leads to repeat purchases, loyalty and to customer retention (Zairi, 2000).

CS is more likely to repeat buying products or services. They will also tend to say good things and to recommend the product or service to others. On the other hand, dissatisfied customers respond differently. Dissatisfied customers may try to reduce the dissonance by abandoning or returning the product, or they may try to reduce the dissonance by seeking information that might confirm its high value (Kotler, 2000).

CS is the degree to which customer expectations of a product or service are met or exceeded. CS means that the customers' needs are met, product and services are satisfactory, and customers' experience is positive (Friday & Colts, 1995).

CS is how satisfied a customer is with the supplied product/service. It is closely related to interpersonal trust (Geyskens et al., 1996).

CS is the result of a customer's perception of the value received in a transaction or relationship-where value equals perceived SQ relative to price and customer acquisition costs (Hallowell, 1996).

CS in retail banking is influenced by the perceived competitiveness of the bank's interest rates (Levesque & McDougall (1996).

CS has frequently been advanced to account for CL (Dick & Basu, 1994, Oliver 1996; Zeithaml et al., 1996).

CS is a critical focus for effective marketing programs. CS is a collective outcome of perception, evaluation and psychological reactions to the consumption experience with a product or service (Yi, 1990).

CS is the customer's overall evaluation of the performance of an offering to date (Johnson & Fornell 1991).

CS as an attitude is like a judgment following a purchase act or based on series of consumer-product interactions (Yi, 1989).

2.3. Customer Loyalty

Oxford Dictionary defines loyalty as a state of true allegiance. But the mere repeated purchase by customers has been mixed with the above mentioned definition of loyalty. In service domain, loyalty has been defined in an extensive form as observed behaviors (Bloemer et al., 1999).

Loyalty is a primary goal of relationship marketing and sometimes even equated with the relationship marketing concept itself (Sheth & Parvatiyar 1999). Loyalty is best measured by continued buying behavior (Goodman, 2009).

Loyalty shows a customer's positive attitude for the repeating buying behavior on certain products or services. CL refers to the influences of quality, price, service and many relevant factors. These factors can create intensity feelings on certain products or services so that the product or service become preference (Gremler & Brown, 1999).

Loyalty is present when favorable attitudes toward the brand are manifested in repeat buying behavior (Keller, 1993).

Loyalty is not merely a behavior; it is a function of underlying psychological factors as well. They propose the definition of brand loyalty as the biased behavioral response expressed over time by some decision-making unit with respect to one or more alternative brands out of a set of such brands. Attitudinal loyalty is the consumer's predisposition towards a brand as a function of psychological processes (Jacoby & Chestnut, 1978).

There are three attitudinal measures of loyalty, which are: (1) the likelihood of continuing to do business or re-purchasing, (2) the likelihood of expanding the business or purchasing, and (3) the willingness to recommend or serve as a reference. There is a growing body of research that indicates that loyalty is developed in ways that are more dynamic and complex than reflected in the common satisfaction (Gremler & Brown, 1998; Fournier et al., 1998; Oliver, 1999).

CL seems to be based on a collection of factors. The first is trust. Consumers must trust the vendor or product they encounter. Second, the transaction or relationship must have a positive perceived value greater than that supplied by competitors. Third, if marketers build on the first two factors, they may be able to create a level of positive customer emotional attachment. That emotional response may be commitment to their brands that is resistant to change (Kumar & Shah, 2004; Pitta, et al, 2006).

CL means the repeating purchase behavior based on personal preference of certain product or service. Loyalty customers are the most competitive advantage of an enterprise (Griffin, 2002).

CL represents actual repeat purchase of products or services that includes purchasing more and different products or services from the same company, recommending the company to others, and reflecting a long-term choice probability for the brand (Feick et al., 2001).

CL is a crucial factor in companies' growth and their performance. Loyalty is linked with the repeat business. Thus, a customer is loyal when he is frequently repurchasing a product or service from a particular provider. Loyalty is a deeply held commitment to re-buy or re-patronize a preferred product or service in the future despite situational influences and marketing efforts having the potential to cause switching behaviour (Oliver, 1997; Kotler, 2000).

In e-commerce, loyal customers are considered extremely valuable. Today, e-retailers are seeking information on how to build CL. Loyal customers not only require more information themselves, but they serve as an information source for other customers (Pavlou 2003; Papadopoulou et al., 2001).

CL expresses an intended behavior related to the product or service or to the company. CL is the mind set of the customers who hold favorable attitudes toward a company, commit to repurchase the company's product/service, and recommend the product/service to others (Pearson, 1996).

CL is viewed as the strength of the relationship between an individual's relative attitude and repeat patronage (Dick & Basu, 1994).

CL is considered an important key to organizational success and profit. Firms with large groups of loyal customers have been shown to have large market shares, and market share, in turn, has been shown to be associated with higher rates of return on investment (Raj, 1985; Reichheld & Sasser, 1990).

CL motivates customers for repeat purchases and persuade them to refer those products or services to others (Heskett et al., 1994).
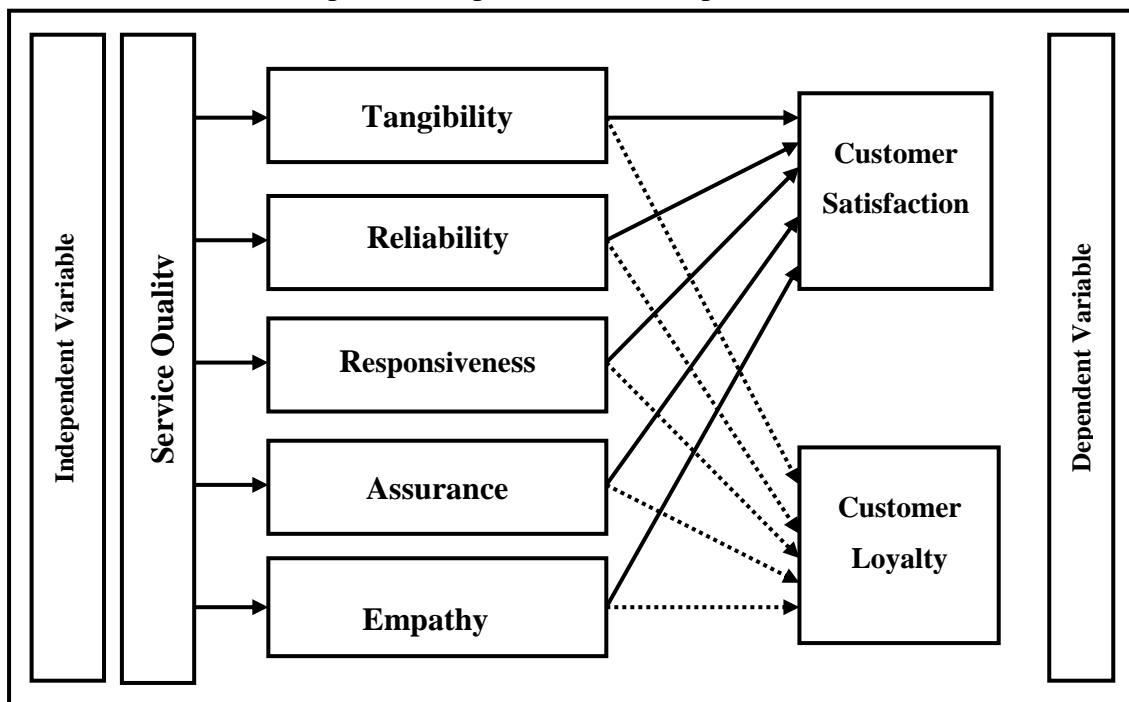
3. Methodology

3.1. Research Model

The proposed comprehensive conceptual model is presented in Figure (1). The diagram below shows that there is one independent variable of SQ. There are two dependent variables of CS and CL. It shows the rational link among the three types of observed variables. An in-depth literature review pointed out that SQ, CS and CL are related to each other. SQ is positively related to CS and to CL. Besides, there is a positive relationship between CS and CL.

So literature suggest that there is a positive relationship between SQ, CS, and CL (Cavana et al, 2007; Garland & Gendall, 2004; Henkel et al, 2006; 1997; Kao, 2009; Lai, 2004; Naeem & Saif, 2009; Rauyruen et al, 2007; Yu & Dean, 2001; Ziethalm et al, 2008).

From the above discussion, the research framework suggests that SQ plays a significant role in affecting CS and CL.

Figure (1)
Proposed Comprehensive Conceptual Model

SQ as measured consisted of tangibility, reliability, responsiveness, assurance, and empathy (Cronin & Taylor,1992). CS is measured in terms of satisfaction with the conduct of the proceedings, satisfaction with the workers, satisfaction with the services of the organization, and verbal communication (Athanassopoulos, et al, 2001). CL is measured in terms of the intention of the spoken word, sensitivity to price, and the behavior of the complaint (Parasuraman, 1996).

3.2. Research Questions and Hypotheses

The researcher found the research problem through two sources. The first source is to be found in previous studies, and it turns out that there is a lack in the number of literature reviews that dealt with the analysis of the relationship between SQ, CS and CL at Teaching hospitals in Egypt. This called for the

researcher to test this relationship in the Egyptian environment. The second source is the pilot study, which was conducted in an interview with (30) employees in order to identify the relationship between SQ, CS and CL. The researcher found, through the pilot study, several indicators notably the important and vital role that could be played by SQ in reinforcing CS and CL at Teaching hospitals in Egypt.

As a result of the discussions given above, the research questions of this study are as follows:

Q1: What is the nature and extent of the relationship between SQ (tangibility, reliability, responsiveness, assurance, and empathy) and CS at Teaching hospitals in Egypt?.

Q2: What is the extent of the relationship between SQ (tangibility, reliability, responsiveness, assurance, and empathy) and CL at Teaching hospitals in Egypt?.

Q3: What is the nature of the relationship between CS (satisfaction with the conduct of the proceedings, satisfaction with the workers, and satisfaction with the services of the organization) and CL at Teaching hospitals in Egypt?.

There are studies in literature that study SQ, CS and CL factors separately and within the frame of bilateral relation, but there is no study that examines these three factors collectively at the Egyptian environment. This study aims to contribute to the literature by examining the research variables collectively and by revealing the interaction between the research variables.

As a result of the discussions given above, the following hypotheses were developed to test if there is significant correlation between SQ, CS and CL at Teaching hospitals in Egypt.

H1: There is no statistically significant impact of SQ (tangibility, reliability, responsiveness, assurance, and empathy) on CS at Teaching hospitals in Egypt.

H2: SQ (tangibility, reliability, responsiveness, assurance, and empathy) has no statistically significant effect on CL at Teaching hospitals in Egypt.

H3: There is no statistically significant relationship between CS (satisfaction with the conduct of the proceedings, satisfaction with the workers, and satisfaction with the services of the organization) and CL at Teaching hospitals in Egypt.

3.3. Population and Sample

The population of the study included all employees at Teaching hospitals in Egypt. The total population is 66.536 employees. Determination of sample size was calculated using the formula (Daniel, 1999) as follows:

$$n = \frac{N \times (Z)^2 \times P(1-P)}{d^2(N-1) + (Z)^2 \times P(1-P)}$$

The number of samples obtained by 357 employees at Teaching hospitals in Egypt in Table (1).

Table (1) Distribution of the Sample Size on the Population

Job Category	Number	Percentage	Size of Sample
1. Physicians	1926	37.50%	357 X 37.50% = 134
2. Nurses	2714	52.86%	357 X 52.86% = 189
3. Administrative Staff	495	9.64%	357 X 9.64% = 34
Total	**5135**	**100%**	**357 X 100% = 357**

Source: Personnel Department at Teaching Hospitals in Egypt, 2013

Proportionality with the number of employees in the research population is proved in Table (1). By using the lists of employees at the Staff Affairs Department, Teaching Hospitals in Egypt random choice of categories was attained. Table (2) provides the features of the respondents at Teaching Hospitals in Egypt who participated in the survey.

3.4. Procedure

The present study has drawn on the questionnaire method for collecting primary data necessary for the study. The questionnaire list is interested in recognizing SQ, CS and CL at Teaching hospitals in Egypt.

The questionnaire used in the questions list included four pages, besides the introductory page addressing informants. It aims at introducing them to the nature and aims of the study, besides gaining their

cooperation for answering the questions in the list. The questionnaire included three questions, relating to SQ, CS, CL and biographical information of employees at Teaching hospitals in Egypt.

Data collection took approximately two months. About 357 survey questionnaires were distributed by employing diverse modes of communication, such as in person and post. Multiple follow-ups yielded 315 statistically usable questionnaires. Survey responses were 88%.

Table (2) Characteristics of Items of the Sample

Variables		Number	Percentage
1- Job Title	Physicians	131	41.6%
	Nurses	160	50.8%
	Administrative Staff	24	7.6%
	Total	**315**	**100%**
2- Sex	Male	123	39.0%
	Female	192	61.0%
	Total	**315**	**100%**
3- Marital Status	Single	90	28.6%
	Married	225	71.4%
	Total	**315**	**100%**
4- Age	Under 30	128	40.7%
	From 30 to 45	127	40.3%
	Above 45	60	19.0%
	Total	**315**	**100%**
5- Educational Level	Secondary school	108	34.3%
	University	150	47.6%
	Post Graduate	57	18.1%
	Total	**315**	**100%**
6- Period of Experience	Less than 5 years	102	32.4%
	From 5 to 10	82	26.0%
	More than 10	131	41.6%
	Total	**315**	**100%**

3.5. Data Collection Tools

3.5.1. Service Quality Scale

The present study has investigated SQ as an independent variable. The researcher has drawn on the scale of Cronin & Taylor (1992) for measuring SQ, which has been divided into five main components (tangibility, reliability, responsiveness, assurance, and empathy). There were 4 statements measuring tangibility, 5 statements handle reliability, 4 statements illustrate responsiveness, 4 statements handle assurance, and 5 statements illustrate empathy. The survey form has been used as a key tool to collect data to measure SQ at Teaching hospitals in Egypt.

3.5.2. Customer Satisfaction Scale

The present study has investigated CS as an dependent variable. The researcher will depend on the scale developed by (Athanassopoulos, et al, 2001), in measuring CS, which has been divided into three main components (satisfaction with the conduct of the proceedings, satisfaction with the workers, and satisfaction with the services of the organization). There were 6 items measuring satisfaction with the conduct of the proceedings, 6 items measuring satisfaction with the workers, and 6 items measuring satisfaction with the services of the organization. The survey form has been used as a key tool to collect data to measure CS at Teaching hospitals in Egypt.

3.5.3. Customer Loyalty Scale

The present study has investigated CL as a dependent variable. The researcher will depend on the scale developed by (Parasuraman, 1996), in measuring CL, which has been divided into four main

components (verbal communication, the intention of the spoken word, sensitivity to price, and the behavior of the complaint). There were eleven items measuring CL. There were 3 items measuring verbal communication, 4 items measuring the intention of the spoken word, 4 items measuring sensitivity to price, and 3 items measuring the behavior of the complaint. The survey form has been used as a key tool to collect data to measure CL at Teaching hospitals in Egypt.

Responses to all items scales were anchored on a five (5) point Likert scale for each statement, ranging from (5) "full agreement," (4) for "agree," (3) for "neutral," (2) for "disagree," and (1) for "full disagreement."

3.6. Data Analysis and Testing Hypotheses

The researcher has employed the following methods: (1) The Alpha Correlation Coefficient (ACC), (2) Multiple Regression Analysis (MRA), and (3) the statistical testing of hypotheses which includes F- test and T-test. They are found in SPSS.

4. Hypotheses Testing

4.1. Evaluating Reliability

Before testing the hypotheses and research questions, the reliability of SQ, CS and CL were assessed to reduce errors of measuring and maximizing constancy of these scales. To assess the reliability of the data, Cronbach's alpha test was conducted.

Table (3) shows the reliability results for KM and OS. All items had alphas above 0.70 and were, therefore, excellent, according to Langdridge's (2004) criteria.

Table (3) Reliability of SQ, CS and CL

Variables	The Dimension	Number of Statement	ACC
SQ	Tangibility	4	0.8765
	Reliability	5	0.7192
	Responsiveness	4	0.8848
	Assurance	4	0.8993
	Empathy	5	0.7188
	Total Measurement	22	**0.9546**
CS	Satisfaction with the conduct of the proceedings	6	0.9698
	Satisfaction with the workers	6	0.9594
	Satisfaction with the services of the organization	6	0.9613
	Total Measurement	**18**	**0.9885**
CL	Verbal communication	3	0.9419
	The intention of the spoken word	4	0.8374
	Sensitivity to price	4	0.9494
	The behavior of the complaint	3	0.8634
	Total Measurement	**14**	**0.9716**

Regarding Table (3), the 22 items of SQ are reliable because the ACC is 0.9546. Tangibility, which consists of 4 items, is reliable because the ACC is 0.8765. Reliability, which consists of 5 items, is reliable because the ACC is 0.7192. Furthermore, responsiveness, which consists of 4 items, is reliable because the ACC is 0.8848. Assurance, which consists of 4 items, is reliable because the ACC is 0.8993. The 5 items related to empathy are reliable because ACC is 0.7188. Thus, the internal consistency of SQ can be acceptable.

Regarding Table (3), the 18 items of CS are reliable because the ACC is 0.9885. Satisfaction with the conduct of the proceedings, which consists of 6 items, is reliable because the ACC is 0.9698. Satisfaction with the workers, which consists of 6 items, is reliable because the ACC is 0.9594. Furthermore, satisfaction

with the services of the organization, which consists of 6 items, is reliable because the ACC is 0.9613. Thus, the internal consistency of CS can be acceptable.

According to Table (3), the 14 items of CL are reliable because the ACC is 0.9716. Verbal communication, which consists of 3 items, is reliable because the ACC is 0.9419. The 4 items related to the intention of the spoken word are reliable because ACC is 0.8374. Sensitivity to price, which consists of 4 items, is reliable because the ACC is 0.9494. Furthermore, the behavior of the complaint which consists of 3 items, is reliable because the ACC is 0.8634. Thus, the reliability of CL can be acceptable.

Accordingly, three scales were defined, SQ (22 variables), where ACC represented about 0.9546, CS (18 variables) where ACC represented about 0.9885 and CL (14 variables), where ACC represented 0.9716.

4.2. Correlation Analysis

The researcher calculated means and standard deviations for each variable and created a correlation matrix of all variables used in hypothesis testing. Arithmetic mean and standard deviation values related to dependent and independent variables of this study and correlation coefficients between these variables are given in Table (4).

Table (4) Descriptive Statistics and Correlation Matrix of Constructs

Variables	Mean	Std. Deviat	1	2	3	4	5	6	7
1. Tangibility	3.32	1.16	1						
2. Reliability	3.17	0.939	0.79**	1					
3. Responsiveness	3.32	1.19	0.96**	0.75**	1				
4. Assurance	3.53	1.14	0.96**	0.69**	0.96**	1			
5. Empathy	3.61	0.916	0.70**	0.83**	0.68**	0.58**	1		
6. Customer Satisfaction	3.36	1.24	0.34**	0.42**	0.34**	0.34**	0.40**	1	
7. Customer Loyalty	3.42	0.959	0.33**	0.58**	0.34**	0.23**	0.61**	0.39**	1
Note: ** Correlation is significant at 0.01 level.									

According to Table (4), the first issue examined was the different facets of SQ (tangibility, reliability, responsiveness, assurance, and empathy). According to Table (4), among the various facets of SQ, those who responded identified the presence of empathy (*M*=3.61, *SD*=0.916). This was followed by assurance (*M*=3.53, *SD*=1.14), tangibility (*M*=3.32, *SD*=1.16), responsiveness (*M*=3.32, *SD*=1.19), and reliability (*M*=3.17, *SD*=0.939).

The second issue examined was the different facets of CS (satisfaction with the conduct of the proceedings, satisfaction with the workers, and satisfaction with the services of the organization). Most of the respondents identified the overall CS (M=3.36, SD=1.24).

The third issue examined was the different facets of CL (verbal communication, the intention of the spoken word, sensitivity to price, and the behavior of the complaint). Most of the respondents identified the overall CL (M=3.42, SD=0.959).

According to Table (4), SQ dimensions have positive and significant relation with CS. The correlation between SQ (tangibility) and CS is 0.348. For reliability and CS, the value is 0.426, whereas responsiveness and CS show correlation value of 0.345. The correlation between SQ (assurance) and CS is 0.340 whereas empathy and CS show correlation value of 0.408.

Regarding Table (4), SQ dimensions have positive and significant relation with CL. The correlation between SQ (tangibility) and CL is 0.339. For reliability and CL, the value is 0.584, whereas responsiveness

and CL show correlation value of 0.342. The correlation between SQ (assurance) and CL is 0.233 whereas empathy and CL show correlation value of 0.614.

According to Table (4), CS have positive and significant relation with CL. The correlation between CS and CL is 0.390. Finally, Table (4) proves that there is a significant correlation between SQ, CS, and CL at Teaching hospitals in Egypt.

4.3. The Relationship between SQ (Tangibility) and CS

The relationship between SQ (Tangibility) and CS at Teaching hospitals in Egypt is determined. The first hypothesis to be tested is:

There is no relationship between SQ (Tangibility) and CS at Teaching hospitals in Egypt.

Table (5) MRA Results for SQ (Tangibility) and CS

The Variables of SQ (Tangibility)	Beta	R	R2
1. The presence of equipment and sophisticated equipment.	0.121	0.337	0.113
2. Convenient and attractive facilities and halls.	0.175	0.299	0.089
3. There is adequate parking space.	0.291**	0.228	0.051
4. Appropriate overall appearance of the organization of the nature and quality of services provided.	0.425**	0.322	0.103
▪ MCC	0.405		
▪ DC	0.164		
▪ Calculated F	15.174		
▪ Degree of Freedom	4, 310		
▪ Indexed F	3.31		
▪ Level of Significance	0.000		
** $P < 0.01$			

Table (5) proves that there is a relationship between SQ (Tangibility) and CS at significance level of 0,000. As a result of the value of R^2, the 4 independent variables of SQ (Tangibility) can explain 16.4% of the total differentiation in CS level.

For the results of a structural analysis of the MRA, the direct effect of SQ (Tangibility) and CS is obtained. Because MCC is 0.405, it is concluded that there is enough empirical evidence to reject the null hypothesis.

4.4. The Relationship between SQ (Reliability) and CS

The relationship between SQ (Reliability) and CS at Teaching hospitals in Egypt is determined. The second hypothesis to be tested is:

There is no relationship between SQ (Reliability) and CS at Teaching hospitals in Egypt.

Table (6) MRA Results for SQ (Reliability) and CS

The Variables of SQ (Reliability)	Beta	R	R2
1. Commitment to implement the work in the given time.	0.063	0.193	0.037
2. Attention to the problems of customers by answering their questions.	0.085	0.332	0.110
3. Care to provide the service correctly, and from the first time.	0.105*	0.208	0.043
4. Providing the service on the dates that have been identified.	0.076	0.322	0.103
5. Availability of accurate documentation systems and records.	0.263**	0.397	0.157
▪ MCC	0.437		
▪ DC	0.191		
▪ Calculated F	14.605		
▪ Degree of Freedom	5, 309		
▪ Indexed F	3.01		
▪ Level of Significance	0.000		

** $P < 0.01$ * $P < 0.05$

As Table (6) proves, the MRA resulted in the R of 0.437. This means that CS has been significantly explained by the 5 independent variables of SQ (Reliability). Furthermore, the R^2 of 0.191 indicates that the percentage of the variable interprets the whole model, that is, 19.1%. It is evident that the five independent variables of SQ (Reliability) justified 19.1% of the total factors of CS. Hence, 80.9% are explained by the other factors. Therefore, there is enough empirical evidence to reject the null hypothesis.

4.5. The Relationship between SQ (Responsiveness) and CS

The relationship between SQ (Responsiveness) and CS at Teaching hospitals in Egypt is determined. The third hypothesis to be tested is:

There is no relationship between SQ (Responsiveness) and CS at Teaching hospitals in Egypt.

Table (7) MRA Results for SQ (Responsiveness) and CS

The Variables of SQ (Responsiveness)	Beta	R	R2
1. Informing customers accurately of dates of service.	0.400**	0.337	0.113
2. Permanent readiness to assist customers.	0.158	0.299	0.159
3. Short waiting period to provide the service to customers.	0.126	0.228	0.051
4. Responding to customer complaints quickly.	0.269**	0.322	0.103
▪ MCC	0.381		
▪ DC	0.145		
▪ Calculated F	13.189		
▪ Degree of Freedom	4, 310		
▪ Indexed F	3.31		
▪ Level of Significance	0.000		

** $P < 0.01$

Table (7) proves that there is a relationship between SQ (Responsiveness) and CS. As a result of the value of R^2, the 4 independent variables of SQ (Responsiveness) can explain 14.5% of the total differentiation in CS level.

For the results of a structural analysis of the MRA, the direct effect of SQ (Responsiveness) and CS is obtained. Because MCC is 0.381, there is enough empirical evidence to reject the null hypothesis.

4.6. The Relationship between SQ (*Assurance*) and CS

The relationship between SQ (Assurance) and CS at Teaching hospitals in Egypt is determined. The fourth hypothesis to be tested is:

There is no relationship between SQ (Assurance) and CS at Teaching hospitals in Egypt.

Table (8) MRA Results for SQ (Assurance) and CS

The Variables of SQ (Assurance)	Beta	R	R2
1. Behavior of employees makes customers feel confident.	0.170[*]	0.332	0.110
2. Clients have a sense of security in dealing with the institution.	0.041	0.299	0.089
3. Workers deal with customers humanly and decently.	0.023	0.228	0.051
4. Adequate knowledge to answer customer questions is available.	0.221	0.337	0.113
▪ MCC	0.352		
▪ DC	0.124		
▪ Calculated F	10.953		
▪ Degree of Freedom	4, 310		
▪ Indexed F	3.31		
▪ Level of Significance	0.000		
* P < 0.05			

Table (8) proves that there is a relationship between SQ (Assurance) and CS at significance level of 0,000. As a result of the value of R^2, the 4 independent variables of SQ (Assurance) can explain 12.4% of the total differentiation in CS level. For the results of a structural analysis of the MRA, the direct effect of SQ (Assurance) and CS is obtained. Because MCC is 0.352, it is concluded that there is enough empirical evidence to reject the null hypothesis.

4.7. The Relationship between SQ (Empathy) and CS

The relationship between SQ (Empathy) and CS at Teaching hospitals in Egypt is determined. The fifth hypothesis to be tested is:
There is no relationship between SQ (Empathy) and CS at Teaching hospitals in Egypt.

Table (9) MRA Results for SQ (Empathy) and CS

The Variables of SQ (Empathy)	Beta	R	R2
1. Employees are personally interested in customers.	0.227*	0.235	0.055
2. Priorities of management and staff in the organization include the supreme interests of the clients.	0.127	0.217	0.047
3. Customers receive good treatment, respect and appreciation of their circumstances.	0.132*	0.208	0.043
4. Working hours are appropriate for each customer.	0.087	0.322	0.103
5. Needs of customers are known.	0.301**	0.397	0.157
▪ MCC	0.448		
▪ DC	0.201		
▪ Calculated F	15.525		
▪ Degree of Freedom	5, 309		
▪ Indexed F	3.31		
▪ Level of Significance	0.000		
** P < 0.01 * P < 0.05			

As Table (9) proves, the MRA resulted in the R of 0.448. This means that CS has been significantly explained by the 5 independent variables of SQ (Empathy).

Furthermore, the R^2 of 0.201 indicates that the percentage of the variable interprets the whole model, that is, 20.1%. It is evident that the 5 independent variables SQ (Empathy) justified 20.1% of the total factors of CS. Hence, 79.9% are explained by the other factors. Therefore, there is enough empirical evidence to reject the null hypothesis.

4.8. The Relationship between SQ (Tangibility) and CL

The relationship between SQ (Tangibility) and CL at Teaching hospitals in Egypt is determined. The sixth hypothesis to be tested is:

There is no relationship between SQ (Tangibility) and CL at Teaching hospitals in Egypt.

Table (10) MRA Results for SQ (Tangibility) and CL

The Variables of SQ (Tangibility)	Beta	R	R2
1. The presence of equipment and sophisticated equipment.	1.037**	0.117	0.013
2. Convenient and attractive facilities and halls.	0.817**	0.171	0.029
3. There is adequate parking space.	0.051	0.406	0.164
4. Appropriate overall appearance of the organization of the nature and quality of services provided.	0.680**	0.470	0.220
▪ MCC	0.599		
▪ DC	0.359		
▪ Calculated F	43.325		
▪ Degree of Freedom	4, 310		
▪ Indexed F	3.31		
▪ Level of Significance	0.000		
** P < 0.01			

Table (10) proves that there is a relationship between SQ (Tangibility) and CL at significance level of 0,000. As a result of the value of R^2, the 4 independent variables of SQ (Tangibility) can explain 35.9% of the total differentiation in CL level. For the results of a structural analysis of the MRA, the direct effect of SQ (Tangibility) and CL is obtained. Because MCC is 0.599, it is concluded that there is enough empirical evidence to reject the null hypothesis.

4.9. The Relationship between SQ (Reliability) and CL

The relationship between SQ (Reliability) and CL at Teaching hospitals in Egypt is determined. The seventh hypothesis to be tested is:

There is no relationship between SQ (Reliability) and CL at Teaching hospitals in Egypt.

Table (11) MRA Results for SQ (Reliability) and CL

The Variables of SQ (Reliability)	Beta	R	R2
1. Commitment to implement the work in the given time.	0.225**	0.418	0.174
2. Attention to the problems of customers by answering their questions.	0.018	0.345	0.119
3. Care to provide the service correctly, and from the first time.	0.094*	0.201	0.040
4. Providing the service on the dates that have been identified.	0.179**	0.470	0.220
5. Availability of accurate documentation systems and records.	0.340**	0.543	0.294
▪ MCC	0.619		
▪ DC	0.384		
▪ Calculated F	38.453		
▪ Degree of Freedom	5, 309		
▪ Indexed F	3.31		
▪ Level of Significance	0.000		

** $P < 0.01$ * $P < 0.05$

As Table (11) proves, the MRA resulted in the R of 0.619. This means that CL has been significantly explained by the 5 independent variables of SQ (Reliability). Furthermore, the R^2 of 0.384 indicates that the percentage of the variable interprets the whole model, that is, 38.4%. It is evident that the five independent variables of SQ (Reliability) justified 38.4% of the total factors of CL. Hence, 61.6% are explained by the other factors. Therefore, there is enough empirical evidence to reject the null hypothesis.

4.10. The Relationship between SQ (Responsiveness) and CL

The relationship between SQ (Responsiveness) and CL at Teaching hospitals in Egypt is determined. The eight hypothesis to be tested is:

There is no relationship between SQ (Responsiveness) and CL at Teaching hospitals in Egypt.

Table (12) MRA Results for SQ (Responsiveness) and CL

The Variables of SQ (Responsiveness)	Beta	R	R2
1. Informing customers accurately of dates of service.	0.588**	0.117	0.013
2. Permanent readiness to assist customers.	0.277*	0.171	0.029
3. Short waiting period to provide the service to customers.	0.305**	0.406	0.164
4. Responding to customer complaints quickly.	0.448**	0.483	0.233
▪ MCC	0.564		
▪ DC	0.319		
▪ Calculated F	36.234		
▪ Degree of Freedom	4, 310		
▪ Indexed F	3.31		
▪ Level of Significance	0.000		

** $P < 0.01$ * $P < 0.05$

Table (12) proves that there is a relationship between SQ (Responsiveness) and CL. As a result of the value of R^2, the 4 independent variables of SQ (Responsiveness) can explain 31.9% of the total differentiation in CL level. For the results of a structural analysis of the MRA, the direct effect of SQ (Responsiveness) and CL is obtained. Because MCC is 0.564, there is enough empirical evidence to reject the null hypothesis.

4.11. The Relationship between SQ (*Assurance*) and CL

The relationship between SQ (Assurance) and CL at Teaching hospitals in Egypt is determined. The ninth hypothesis to be tested is:

There is no relationship between SQ (Assurance) and CL at Teaching hospitals in Egypt.

Table (13) proves that there is a relationship between SQ (Assurance) and CL at significance level of 0,000. As a result of the value of R^2, the 5 independent variables of SQ (Assurance) can explain 23.3% of the total differentiation in CL level. For the results of a structural analysis of the MRA, the direct effect of SQ (Assurance) and CL is obtained. Because MCC is 0.482, it is concluded that there is enough empirical evidence to reject the null hypothesis.

Table (13) MRA Results for SQ (Assurance) and CL

The Variables of SQ (Assurance)	Beta	R	R2
1. Behavior of employees makes customers feel confident.	0.054	0.125	0.015
2. Clients have a sense of security in dealing with the institution.	0.474**	0.171	0.029
3. Workers deal with customers humanly and decently.	0.562**	0.406	0.164
4. Adequate knowledge to answer customer questions is available.	0.700**	0.117	0.013
▪ MCC	0.482		
▪ DC	0.233		
▪ Calculated F	23.517		
▪ Degree of Freedom	4, 310		
▪ Indexed F	3.31		
▪ Level of Significance	0.000		

** $P < 0.01$

4.12. The Relationship between SQ (Empathy) and CL

The relationship between SQ (Empathy) and CL at Teaching hospitals in Egypt is determined. The tenths hypothesis to be tested is:

There is no relationship between SQ (Empathy) and CL at Teaching hospitals in Egypt.

Table (14) MRA Results for SQ (Empathy) and CL

The Variables of SQ (Empathy)	Beta	R	R2
1. Employees are personally interested in customers.	0.086	0.421	0.177
2. Priorities of management and staff in the organization include the supreme interests of the clients.	0.193[*]	0.448	0.200
3. Customers receive good treatment, respect and appreciation of their circumstances.	0.069	0.201	0.040
4. Working hours are appropriate for each customer.	0.159[**]	0.470	0.220
5. Needs of customers are known.	0.356[**]	0.543	0.294
▪ MCC	0.636		
▪ DC	0.405		
▪ Calculated F	42.049		
▪ Degree of Freedom	5, 309		
▪ Indexed F	3.01		
▪ Level of Significance	0.000		
** $P < 0.01$ * $P < 0.05$			

As Table (14) proves, the MRA resulted in the R of 0.636. This means that CL has been significantly explained by the 5 independent variables of SQ (Empathy). Furthermore, the R^2 of 0.405 indicates that the percentage of the variable interprets the whole model, that is, 40.5%. It is evident that the 5 independent variables SQ (Empathy) justified 40.5% of the total factors of CL. Hence, 59.5% are explained by the other factors. Therefore, there is enough empirical evidence to reject the null hypothesis.

5. Research Findings

The present study on analyzing the significant relationship between SQ, CS and CL at Teaching hospitals in Egypt revealed the following results:

1. There is a positive and significant correlation between SQ and CS. It is clear from this that there is interest from the organization to provide services to quality, which is expected. This is consistent with the finding of the significant importance of SQ perceptions and the association between SQ and CS (Cronin, & Taylor, 1992; Taylor, & Baker, 1994). Also, customers have put the criteria of CS towards SQ provided by their organizations. Fast and efficient service, confidentiality of organization, speed of transaction, friendliness of organization personnel, accuracy of billing, billing timeliness, billing clarity, competitive pricing, and SQ are the key factors which significantly affect customer's satisfaction (Hokanson, 1995). Young customers places more emphasis on factors like the organization's reputation, friendliness of organization personnel, convenient location, and availability of parking space in selecting their organizations (Almossawi, 2001). CS is a decision made after experience while quality is not the same. On the other hand, in CS literature, expectations for goods is "would", while in SQ literature, expectations for goods is "should". Several researches have been done on the relation between SQ and CS. These researches show that CS results in SQ (Parasuraman et al., 1988; 1991). In addition to that, there is a two-way relation between CS and SQ. Therefore, some organizational researchers concluded that SQ is an important indicator of CS intentions. That is, consumers may be loyal to the organization if it is viewed as generating satisfaction among other consumers, particularly in credence products and services. This alone may create an amount of unwillingness to switch. SQ is a key factor for CS. It is an important tool for organizations for augmenting their income and market share (Sureshchandar et al., 2002; Muyeed, 2012).

2. There is a positive and significant correlation between the SQ and CL. This indicates that the SQ is high and convincing from the point of view of the customers and they want better performance. This is consistent with the finding that there is a strong relationship between SQ and CL as confirmed by many researchers (Anderson & Mittal, 2000; Bloemer & De Ruyter, 1999; and Oliva et al., 1992). Furthermore, evidences of strong and direct relationship between SQ and CL have also been given by Heskett et al. (1997). While Bloemer and De Ruyter (1999) have stated that SQ results in CL; if level of customers also tends to be relatively high, it may act as a vital promoter of CL. However in today's highly dynamic and competitive environment, attaining higher levels of CS and CL, especially in the services sector, may be a tough task for many organizations. Also, many researchers have proved willingness to recommend and repurchase intention as dimensions of the CL. Further, they found that SQ has a strong positive impact on these dimensions of CL (Ehigie, 2006; Wong & Sohal, 2003; Bloemer et al., 1998; and Bitner, 1990).

3. There is a positive relationship between SQ, CS, and CL. This is consistent with the finding that SQ is one of the most important aspects of the premium customer experience. Most organizations monitor their SQ on a regular basis to ensure maximum CS and to improve CL. CS is attained by properly meeting the customer demands and expectations and providing services which are up to the market standards (Gitomer, 1998). A positive consumption experience of the customer ensures that his overall feelings for the products or services consumed are positive. However, CS does not guarantee repurchase, CL. Also, SQ has been suggested as a strong predictor of CS by many organizational researchers. SQ is a drive of the CS that impacts CL (Cronin et al., 2000).

6. Recommendations

The basic purpose of this research is to put forward recommendations of practical nature rather than just proposing research oriented work.

1. The need for credit and interest in improving the SQ provided to customers. This is in order to be able to compete in the future and live up to the level of ambition of services provided.

2. Teaching hospitals in Egypt should learn customers' point of view through questionnaires, among other things, business research studies, or specialists in order to provide consulting services in order to check the quality of services.

3. Teaching hospitals in Egypt should pay much attention to CS, through the selection of skilled workers on how to provide the service and earn CS, and design a training program for them in order to equip them with knowledge and skills required to provide services.

4. Teaching hospitals in Egypt is interested in how to facilitate business processes and reduce the time of service to the customer through motivating employees and giving them the empowerment required for the performance of their quality.

5. Teaching hospitals in Egypt should know the need to respect the customer, and the staff should try to get the information and suggestions or problems in order to improve service delivery and CS.

6. Teaching hospitals in Egypt must try to maintain existing customers to gain their satisfaction. This is because the cost of maintaining the current client is less as a cause of a new customer, and to maintain it for a longer period. The customer is getting a sense of loyalty to the organization, thereby acting to promote it and gain new customers. Attention must be paid to CS because it gets reflected on them and affect their loyalty.

7. Teaching hospitals in Egypt must adopt a win-win SQ strategy through which they provide value to the customer and customer remains loyal to the organization. The value provided must keep in view the satisfaction of the customers.

8. Teaching hospitals in Egypt must understand and determine the factors that enhances CS. Surveys must be conducted to obtain the data from the customers regarding their perceptions, expectations and recommendations to improve the SQ. In other words, CS is a very much important factor that not only forces the customers to remain loyal with the organization, but also proves as a marketing mechanism through which other people are attracted towards the organization.

9. Teaching hospitals in Egypt should look for the contemporary approaches of delivering quality services through relationship management tactics. These approaches build a long term relationship with the customer through the provision of premium quality services. In other words, traditional predictors of the

CS such as SQ still have a strong impact on the CS. So, these factors must be the core of the strategy aiming at enhancing CS and loyalty. In other words, probably the most important determinant of the CL is SQ. So, the provision of premium quality services must be the prime objective of the business strategy of Teaching hospitals in Egypt.

10. Teaching hospitals in Egypt must think regarding developing a competitive edge which sets apart the products and services of the organization in a distinctive way. Provision of premium quality services holds upmost importance among the factors which can enable Teaching hospitals to have a competitive edge over the rivals successfully in today's market-driven system. In other words, innovating the services according to the needs and demands of the customers is very much important. Customers must be the focus of every strategy. Teaching hospitals in Egypt must think in terms of end result of their SQ innovations. The focus should be on the long run.

7. Research Implications

Managers at Teaching hospitals in Egypt might be able to improve CL through SQ and CS. The findings provide several managerial implications. The fundamental premise of the proposed model was that retailers should understand comprehensively the critical factors necessary to achieve high SQ that will significantly affect on customers' trust, CS and CL, and use them as diagnostic information. By recognizing and analyzing these diagnostic indicators, retailers will be better able to formulate and implement their strategic plans.

According to Hansen & Bush (1999), a great success will result from a strategy that concentrates on one targeted dimension of SQ, rather than from one in which the retail firm improves marginally on all of the dimensions. The interpretation of the research model has the potential to help retailers better understand how customers assess the SQ and how their service campaigns influence CS and CL in different extent. Learning the uncovered relationships between SQ and CS and CL, retailers can effectively allocate their resources and develop a rational plan to improve their SQ under specific business circumstances.

It is recognized that improvement of CS find customers will be more loyal. By the referring of loyal customers, Teaching hospitals can attract more customers. Managers are advised to satisfy and better manage their relationships through quality product and service offerings to their customers as a competitive policy in the marketplace. Teaching hospitals are required to offer products/services that meet or surpass consumers' expectation.

8. Research Limitations

Although the results presented in this study are useful in understanding the relationships between SQ, CS and CL, there are several limitations that need to be addressed. They are as follows:

1. The sampling frame includes the employees at Teaching hospitals in Egypt. This may lead to loss of generalizability. Although the sample used appears homogenous and yielded reliable data, it would be better to include more demographic control variables, which lead to more generalizable results and allow for possible segmentation in terms of SQ, CS and CL. Further studies should use a more representative sample of whole retail customers' population, which lead to more sound and comprehensive findings.

2. The variables in the hypothesized model, CS and CL, are likely to be influenced by other variables other than SQ. So, other factors that are found to influence loyalty are brand name and value and brand commitment (Kuikka & Laukkanen, 2012; Belaid & Behi, 2011); confidence benefits and special treatments benefits (Ruiz-Molina et al., 2009); the quality of product offered in retail outlets (Allaway et al., 2011; Fandos & Flavián, 2006). Other studies identify factors such as price (Martin-Consuegra et al., 2007) or store environment (Guenzi et al., 2006) as factors influencing CS. Addressing these additional factors in specific retailing contexts extend the landscape of retailing research and can contribute in achieving deeper insights on retail customer behavior.

3. The data was collected at single point in time. Although all the proposed hypotheses were based on previous research studies and evidences shown in the previous literature, it is not possible to explain causal relationships among the variables of the study due to the absence of a longitudinal research design. Hence, the findings of the study are not an evidence for explaining causal relationships among variables.

4. This study may be of significant importance both in contributing to the literature and as far the Teaching hospitals are concerned. An important strategy for 21st century Teaching hospitals must be the provision of premium quality services in order to keep the CS and CL to the organization and subsequently to survive and compete in today's dynamic and competitive corporate environment effectively.

9. Conclusions

SQ and all its dimensions such as tangibility, reliability, responsiveness, assurance and empathy have significant and positive association with CS and CL towards their respective financial service providing organizations.

Therefore, SQ is one of the most important factors in identifying new customer needs and the key to CS and CL is providing the customers with their undiscovered needs (Chai & colleagues. 2009).

SQ is an excellent technique for enhancing CS and CL to the organization in today's competitive environment. The main objective of this study is to determine the impact of various SQ dimensions on CS and CL. While several authors have emphasized the multidimensional nature of SQ and the relationships between CS and CL, this research sought to establish the bridges between SQ, CS, and CL.

Teaching hospitals in Egypt can benefit from the fact of knowing how customers perceive the SQ and knowing the way of how to measure SQ. Therefore, the management can use the specific data obtained from the measurement of SQ in their strategies and plans. This will help Teaching hospitals in Egypt to better understand various SQ that affect CS. In this way, Teaching hospitals in Egypt can better allocate resources to provide better service to their customers. Thus, understanding CS with SQ is very important and challenging.

Teaching hospitals in Egypt are facing so many challenges i.e. increase in customers' demands and expectations coupled with provision of premium quality services (Ettorre, 1994; Joseph & Walker, 1988; JA, 1983; and Leonard & Sasser, 1982). Moreover, customers are behaving more critically to the SQ practices prevailing in organizations (Albrecht & Zemke, 1985). Increasing customer demands together with ever growing competition are compelling Teaching hospitals in Egypt to adapt new competitive and innovative ways which will help them to take the lead in the market place in the form of loyal customer-base (Sellers, 1989).

A key element of CS is the nature of the relationship between the customer and the provider of the products and services. Thus, both product and SQ are commonly noted as a critical prerequisite for satisfying and retaining valued customers. Previous research has identified many factors that determine CS, and there are differences in how consumers perceive services across countries and cultures that cannot be generalized.

Teaching hospital's ability to deliver these benefits on a continuous basis probably has a significant impact on the level of CS. Therefore, Teaching hospitals in Egypt has to identify and improve factors that can increase customer value. Although, it is apparent that for superior service, it is not sufficient to focus on satisfying customers, as customers switched their financial institutions because of SQ problems and failures (Gerrard, & Cunningham, 1997), and stop the use of a financial service provider because of poor service performance (Allred, & Addams, 2000). This attitude is a significant factor, which influences customer intention to engage in positive or negative behavior decisions. Consequently, CS is a necessary prerequisite for building long term customer relationships and likely to increase loyalty (Anthanassopoulos et al., 2001; Selnes, 1993; Bloemer, & Ruyter, 1998).

McIlroy & Barnett (2000) stated that an important concept to consider when developing a CL program is CS. CS is a critical scale of how well a customer's needs and demands are met while CL is a measure of how likely a customer is to repeat the purchases and engage in relationship activities. Loyalty is vulnerable because even if consumers are satisfied with the services they will continue to defect if they think they can get better value, convenience or quality elsewhere. Therefore, CS is not an accurate indicator of loyalty. CS is essential but not a sufficient condition of loyalty. In other words, we can have CS without loyalty, but it is too hard or even impossible to have loyalty without satisfaction. CS is very important. Thus, though CS does not guarantee repeat purchases on the part of the customers it plays a very important part in ensuring CL. However, his point has been echoed by lots of organizational critics when they said that CS is a direct determining factor in CL which in turn prevent them to switch to other financial service providers. Therefore the organization should always strive to ensure that their customers are very satisfied. CL and

retention is potentially one of the most powerful weapons that financial institutions of 21st century can employ in their fight to gain a strategic advantage and survive in today's ever-increasing competitive environment.

CS is a popular concept in several areas like marketing, consumer research, economic psychology, welfare-economics, and economics. The most common interpretations obtained from various authors reflect the notion that satisfaction is a feeling which results from evaluation process of what has been received against what was expected, including the purchase decision itself and the needs and wants associated with the purchase (Armstrong & Kotler, 1996).

CS secures future revenues (Fornell, 1992; Bolton, 1998), reduces future transactions costs (Reichheld & Sasser, 1990), decreases price elasticity (Anderson, 1996), and minimizes the likelihood of customers defecting if quality falters (Anderson & Sullivan, 1993).

The power of CL is clear and compelling. It leads to more profitable growth. CL stay longer with companies that treat them well. They buy more of their products, and they cost less to serve. They recommend the organizations to their friends and colleagues, becoming, in effect, a highly credible volunteer sales force. Investing in loyalty can generate more attractive returns than rolling out an ambitious new marketing plan or expanding line of company's business. Loyalty can be of substantial value to both customers and the firm. Customers are willing to invest their loyalty in business that can deliver superior value relative to competitors (Reichheld, 1996).

When they are loyal to a firm, consumers may minimize time expended in searching and in locating and evaluating purchase alternatives. Also, customers can avoid the learning process that may consume the time and effort needed to become accustomed to a new vendor. CL is one major driver of success in e-commerce (Reichheld & Schefter, 2000).

By increasing loyalty, it is apparent that CS are likely to remain loyal to the service provider (Eriksson & Vaghult, 2000).

CS and CL are not directly correlated, particularly in competitive environments. To achieve loyalty in competitive environments, organizations need to 'completely satisfy' their customers (Jones & Sasser, 1995).

There is a big difference between satisfaction, which is a passive customer condition, and loyalty, which is an active or proactive relationship with the organization (Fredericks, 2001).

Satisfaction alone does not make a CL and merely measuring satisfaction does not tell a company how susceptible its customers are to changing their spending patterns or jump ship to competitors with a better offering. They identify three basic customer attitudes, emotive, inertia and deliberative that underlies loyalty profiles. They have found that the emotive customers are the most loyal. Thus, it would seem that while satisfaction is an important component of loyalty, the loyalty definition needs to incorporate more attitudinal and emotive components (Coyles & Gokey, 2002).

SQ has been admired by the organizational researchers all around the globe as a competitive weapon which differentiates the organization from its rivals in a much positive way by enabling the service organizations to delight the customers through the provision of premium quality services on consistent basis and subsequently enhance their CS and CL (Naik et al., 2010; Wisniewski, 2001; Curry & Herbert, 1988; and Zeithaml, 1988).

Customers are not loyal to one particular organization in Egypt. Today, all what they need is quality of products and services which satisfy their requirements effectively. Hence the major need of today is to find the ways to create satisfied and happy client-base. Therefore, these Teaching hospitals in Egypt must consider the above discussed antecedents of CS in order to have happy customer base (Sharp & Sharp, 1997) which subsequently enhances their financial performance and profitability (Hackl et al., 2000; Andereson et al., 1994; Lewis, 1993).

CS is the degree to which customer expectations of products or services are met or exceeded. Therefore, any business, especially service providers in a competitive environment without a focus on CS, will remain irrelevant in the marketplace and experience low customer patronage, poor customer retention, loyalty and recommendation. CS increases organizations' market shares and assists eateries to enhance CL.

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