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Exploring Workplace Perceptions Among Non-Clinical Healthcare Employees

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Abstract
Non-clinical staff are very important in healthcare settings where things need to move quickly. They help keep things running smoothly and make sure patients are happy. These employees, who include administrative staff and logistics coordinators, often work behind the scenes but are still very important to the healthcare system. To build teams that are open and high-performing, you need to know how they feel about their safety, freedom, and professional growth at work. This study concentrates on non-clinical healthcare employees and seeks to empirically investigate the underlying structure of their workplace perceptions. The research employs Exploratory Factor Analysis (EFA) to identify critical dimensions within the constructs of Safety at Work, Freedom at Work, and Professional Growth at Work, thereby offering practical insights for healthcare administrators and HR professionals**.**

Key words: Safety at Work, Freedom at Work, and Professional Growth at Work, Exploratory Factor Analysis, Non-clinical staff, Healthcare.

1. Introduction

Non-clinical personnel are essential to healthcare systems, facilitating the uninterrupted functioning of services that underpin frontline care. These employees—comprising administrative assistants, technical coordinators, billing specialists, and operations personnel—operate behind the scenes yet significantly impact organizational outcomes and patient satisfaction. The workplace experiences of non-clinical healthcare employees, particularly with their views of safety, autonomy, and professional development possibilities, remain inadequately examined despite their crucial role. Comprehending the viewpoints of these personnel is essential for formulating inclusive organizational policies and fostering high-performing teams. Safety comprises not only physical protection but also psychological safety and support. Likewise, workplace freedom include both operational autonomy and decision-making authority, whereas professional growth entails career progression, feedback systems, and skill enhancement. This study examines these themes by finding the underlying constructs that influence non-clinical employees' job experiences, employing Exploratory Factor Analysis (EFA).

2. Literature Review

2.1 Non-Clinical Positions in Healthcare

The significance of non-clinical roles in healthcare has been acknowledged in recent research. These positions guarantee operational efficiency, data precision, and patient coordination, consequently significantly influencing healthcare outcomes (Zhang et al., 2022). Nevertheless, organizational focus frequently prioritizes clinical professionals, resulting in deficiencies in policy and development initiatives for non-clinical personnel.

2.2 Occupational Safety and Psychological Well-being

Workplace safety is a multifaceted concept encompassing both physical infrastructure and emotional and psychological well-being (Edmondson, 1999; Wang & Xu, 2020). In healthcare, safety standards frequently prioritize clinical dangers, neglecting the psychological stress encountered by non-clinical staff due to work-related pressures, hierarchical obstacles, or role ambiguity.

2.3 Independence and Liberty in the Workplace

Workplace autonomy pertains to employees' perceived authority on the timing and manner of task execution. It is intricately associated with job satisfaction, motivation, and performance (Deci & Ryan, 1987; Van den Broeck et al., 2021). Non-clinical personnel often function under stringent frameworks, and providing them with autonomy can enhance operational efficiency and foster job ownership.

2.4 Advancement and Progression in Professional Competence

Professional development is a crucial element of employee engagement and organizational retention. A culture that promotes training, feedback, and career progression enhances loyalty and diminishes turnover (Aguinis, 2019; Johnson et al., 2023). For non-clinical personnel, these opportunities indicate acknowledgment and commitment by the organization.

2.5 Factor Analytic Methodologies in Organizational Research

Exploratory Factor Analysis (EFA) is extensively employed in organizational psychology to identify latent variables that underlie observed responses. EFA assists in validating theoretical conceptions and directing future study design (Fabrigar et al., 1999; Montani et al., 2023). This study employs EFA to delineate the dimensional mapping of workplace attitudes among non-clinical healthcare personnel.

3. Methodology

3.1 Subjects and Data Acquisition

The research gathered data from non-clinical healthcare personnel engaged in administrative, support, and logistics positions. Participants undertook a structured perception survey consisting of 48 items, with 16 items dedicated to Safety at Work, Freedom at Work, and Professional Growth at Work, respectively. Responses were documented on a 5-point Likert scale, spanning from "Strongly Disagree" to "Strongly Agree."

3.2 Analytical Methodology

Exploratory Factor Analysis was performed utilizing SPSS, employing Principal Component Analysis (PCA) as the extraction technique. Varimax rotation and Kaiser normalization were utilized to enhance interpretability. The Kaiser-Meyer-Olkin (KMO) measure and Bartlett's Test of Sphericity were employed to evaluate the data's quality and appropriateness for factor analysis. Components exhibiting eigenvalues over 1.0 were preserved.

4. Analysis

EFA output – Safety at Work

Figure 1. Rotated Component Matrix[a]

	Component					
	1	2	3	4	5	6
V1		.608		.523		
V2						.781
V3					.783	
V4			.688			
V5	.662					
V6	.733					
V7	.500					
V8					.780	
V9						.503
V10			-.642			
V11				.597		
V12		.666				
V13		-.751				
V14	-.700					
V15			.685			
V16				.760		

Extraction Method: Principal Component Analysis.
Rotation Method: Varimax with Kaiser Normalization.

a. Rotation converged in 8 iterations.

Source : SPSS output

Figure 2. List of variables and components

Variable	Description	Components
V1	My job environment is safe to work at	Employee-Centric Workplace Culture (v5 , v6and v7) Supportive Performance Climate (v1 and v12) Empowering Growth Climate (v4 and v15) People-First Organizational Climate(v11,v16) Organizational Climate for Trust and Care(v3,v8) Holistic Safety and Well-being Climate(v2,v9)
V2	My job provides me with safety gear, if needed	
V3	I can take leaves whenever I am physically unwell	
v4	It is very difficult for a person like me to do anything about the environment	
V5	In our organization, the outcome of confrontation will be better role clarity, improved problem solving, willingness to deal with problems and also with typical employees and customers.	
V6	In our organization, trusting and friendly relations are highly valued.	
V7	My company keeps free/paid counselling sessions for its employees.	
V8	In our organization, people voluntarily confess their mistakes	
V9	My company has free training sessions for addressing mental health issues at work	
V11	In our organization, when you are on a difficult assignment or are overburdened with work , you can usually count on getting assistance from your boss and colleagues.	
V12	Around here, there is a feeling of pressure to continually improve our personal and group performance.	
V15	In our organization, a mistake by a subordinate is treated as an experience (by the boss) from which lessons are learnt to prevent failure and improve performance in the future.	
V16	In our organization, decisions are made by keeping in mind the good of employees and the society.	

Source: Researcher's Analysis

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From the Figure 2, it is found that the variables v5, v6, v7 has stronger associations with component 1, thus making it a Component which can be named as Employee-Centric Workplace Culture. Likewise, variables v1 and v12 have more associations with component 2 and making it a part of component named as Supportive Performance Climate. Likewise, variables v4 and v15 have had stronger associations with component 3 and making it a part of component named as Empowering Growth Climate. Variables v11and v16 have stronger associations with component 4 and making it a part of component named as People-First Organizational Climate. Variables v3and v8have had stronger associations with on component 5 and making it a part of component named as Organizational Climate for Trust and Care. Variables v2and v9 had stronger associations with component6 and making it a part of component named as Holistic Safety and Well-being Climate.

Freedom at Work

Figure 3. Rotated Component Matrix[a]

	Component					
	1	2	3	4	5	6
V1			-.592			
V2		.801				
V3						
V4						-.636
V5	.811					
V6					.756	
V7						
V8				.724		
V9						
V10						.778
V11			.641			
V12			-.617			
V13	-.546					
V14		.745				
V15				.686		
V16				-.808		

Extraction Method: Principal Component Analysis.
Rotation Method: Varimax with Kaiser Normalization.

a. Rotation converged in 16 iterations.

Figure 4. List of variables and components

Variable	Description	Components
V2	Our organization plans for the career and development of employees.	Intellectual freedom (v5) Career-Focused Developmental Climate (v2 and v14) Empowerment-Oriented Decision Climate (v11) Dynamic Role and Learning Climate(v8,v15) Autonomy-Supportive Work Climate (v6) Job Crafting-Oriented Work Climate (v10)
V5	My job gives me considerable opportunity to do my work independently and freely	
V6	My job gives me considerable opportunity to do my work independently and freely.	

V8	Each job in our organization has an up-to-date job description.
V10	The actual job duties are shaped more by the employee than by the formal job description.
V11	Employees in this organization are allowed to make decisions related to cost and quality of services
V12	
V14	My organization keeps one on one meetings frequently with the boss to review gaps in performance.
V15	Everyone in my organization enjoys openness to learning and change

Source: SPSS Output

From the Figure 4, it is found that the variable v5 stronger associations with component 1, thus making it a Component which can be named as Intellectual freedom. Likewise, variables v2 and v14 have more association with component 2 and making it a part of component named as Career-Focused Developmental Climate. Likewise, variable v11 has stronger associations with component 3 and making it a part of component named as Empowerment-Oriented Decision Climate. Variables v8 and v15 have stronger associations with component 4 and making it a part of component named as Dynamic Role and Learning Climate. Variable v6 had stronger associations with on component 5 and making it a part of component named as Autonomy-Supportive Work Climate. Variables v10 had stronger associations with component6 and making it a part of component named as Job Crafting-Oriented Work Climate.

Professional growth at work

Figure 5. Rotated Component Matrix[a]

	Component					
	1	2	3	4	5	6
V1						.757
V2	.756					
V3			.702			
V4		.737				
V5				.724		
V6		.835				
V7				.560		
V8	.575				.532	
V9	.636					
V10	.607					
V11			.833			
V12				.827		
V13						.519
V14	.689					
V15					.804	
V16	.580	-.541				

Extraction Method: Principal Component Analysis.
Rotation Method: Varimax with Kaiser Normalization.
a. Rotation converged in 9 iterations.

Figure 6. List of variables and components

Variable	Description	Components
V1	Once resolved, it does not affect either party or parties at, my organization	Development-Oriented Performance Climate (v2, v9, v10, v14and v16) Competency-Based Training Climate (v4 and v6) Trust-Driven Learning and Evaluation Climate (v3and v11) Strategic Learning and Performance Influence Climate (v5,v7,v12) Measurable Performance and Positive Reinforcement Climate v8,v15) Fairness-Oriented and Data-Driven Climate (v1,v13)
V2	Our organization conducts extensive training programs for employees in all aspects of quality.	
V3	Employees in each job will normally go through training programs every year.	
v4	Training needs are identified through a formal performance appraisal mechanism.	
V5	There are formal training programs to teach new employees the skills they need to perform their jobs.	
V6	New knowledge and skills are periodically imparted to employees to work in teams.	
V7	Training needs identified are realistic, useful and based on the business strategy of the organization.	
V8	Performance of the employees is measured on the basis of measurable results.	
V9	Appraisal system in our organization is growth and development oriented.	
V10	Employees are provided performance-based feedback and counselling.	
V11	Employees have faith in the performance appraisal system.	
V12	Appraisal system has a strong influence on the behaviour of an individual and team.	
V13	The appraisal data is used for making decisions like job rotation, training and compensation.	
V14	The objectives of the appraisal system are clear to all employees.	

V15	Every small or big outdoing of employees is recognized	
V16	My boss himself/herself help me push boundaries	

From the Figure 6, it is found that the variables v2, v9, v10, 14, v16 stronger associations with component 1, thus making it a Component which can be named as Development-Oriented Performance Climate. Likewise, variables v4 and v6 have more association with component 2 and making it a part of component named as Competency-Based Training Climate. Likewise, variables v3 and v11 have stronger associations with component 3 and making it a part of component named as Trust-Driven Learning and Evaluation Climate. Variables v5, v7 and v12 have stronger associations with component 4 and making it a part of component named as Strategic Learning and Performance Influence Climate. Variables v8 and v15 had stronger associations with on component 5 and making it a part of component named as Measurable Performance and Positive Reinforcement Climate. Variables v1, v13 had stronger associations with component6 and making it a part of component named as Fairness-Oriented and Data-Driven Climate.

6. Conclusion

The investigation uncovers significant differences in the perceptions of non-clinical healthcare employees regarding their work environment. The Professional Growth construct exhibited structural clarity and reliability, whereas the Safety and Freedom constructions had complex multidimensionality and lower KMO values. This indicates that professional development is a more commonly comprehended and uniformly encountered area, whereas views of safety and autonomy may differ markedly depending on function, department, or individual expectations.

The findings emphasize the necessity for HR and leadership teams in healthcare to enhance their support systems. Creating more accurate instruments to assess safety and freedom—potentially via mixed-method approaches—could provide deeper insights. The research validates the need of investing in well-organized evaluation and feedback mechanisms to facilitate staff development.

This study advances understanding of workplace perceptions among non-clinical healthcare staff by identifying empirically grounded factors through EFA. The clarity of the Professional Growth construct validates the design of targeted development initiatives, while the complexity within Safety and Freedom constructs points to the need for further refinement in survey design and qualitative exploration. Healthcare leaders should consider these insights when crafting inclusive policies that address both operational and emotional dimensions of work. Future research could apply Confirmatory Factor Analysis to validate these constructs or conduct longitudinal studies to assess how workplace perceptions evolve over time.

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