EMPLOYEES' PARTICIPATION IN DECISION-MARKING AND ORGANISATIONAL PERFORMANCE IN NIGERIAN PUBLIC HOSPITALS

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ABSTRACT

The involvement of employees in the decision making process in any organisations grants them some level of control in order to determine how they work and under what conditions they work. Thus, the goal of this study was to examine the influence of employees' participation on decision-making process and performance of two selected public hospitals in Nigeria. Purposive sampling technique was used to select 350 respondents. 284 copies of questionnaire representing 81% were returned and analysed using descriptive and inferential statistics. The findings showed that improvement in the performance of public hospitals is a function of employee involvement, consultation, delegation and joint decision-making. However, the significance level differs relatively as all the variables considerably influence the performance of the two public hospitals used. The study confirms that workers have a favourable disposition toward decision-making and desire to participate in management decision-making process anytime the opportunity arises. The study concludes that organisations will benefit more from their employees taking part in the decision-making process. It also recommends that more internal communications channels be established to facilitate better information flow and that, organisations should invest in the professional development of their employees so as to improve their ability to make sound decisions.

Keywords: Consultation, Delegation, Involvement, Joint Decision-making**,** Participation, , Performance.

INTRODUCTION

Globally, organisations have increasingly recognised the strategic importance of involving employees in decision-making processes in order to enhance organisational performance. Empirical evidence showed that organisations who prioritise employees' participation often report improved productivity, reduced turnover, and stronger organisational commitment (Ijeoma, 2020; Salau *et al.*, 2018). Kirst-Ashman (2016) further asserted that involving employees in decision-making mitigates inter-group conflicts and fosters workplace harmony.

Despite these documented benefits, the traditional top-down management structure still dominates many organisations, particularly in developing contexts like Nigeria (Igbinoba *et al.*, 2016). This structure limits flexibility, innovation, and a sense of belonging among employees which negatively impact their performance and morale.

In the healthcare sector, an industry critical to human wellbeing, the consequences of limited employees' involvement in decision-making are even more pronounced. According to Hafez (2018), the failure of many African countries, including Nigeria, to establish effective hospital management structures is partly due to the exclusion of health workers from participatory governance. This systemic exclusion undermines policy clarity, contributes to workplace dissatisfaction, and can ultimately compromise the quality of healthcare service delivery (Aliyu, 2019). Conversely, some scholars argue that increased participation may also trigger conflicts arising from divergent views (Kinicki & Kreitner, 2008), suggesting a nuanced and context-specific impact of participatory decision-making on organisational outcomes.

Although prior studies have established the general benefits of employees' involvement, limited research has examined how specific forms of employees' participation—such as consultation, delegation, and joint decision-making affect organisational performance within Nigeria's public health sector. The literature remains divided on the implications of such participation, and empirical evidence remains insufficient, particularly in healthcare institutions operating under unique structural, cultural, and administrative constraints.

This study is significant as it aims to bridge this gap by empirically assessing the impact of employees' participation in decision-making on the performance of healthcare organisations in Nigeria. It offers practical insights for health sector leaders and policymakers on how inclusive management practices can improve performance, minimise conflict, and promote a more committed workforce. The findings could inform reforms aimed at enhancing employees' engagement and service delivery in Nigerian public health sector.
Based on the identified gaps and issues, the objective of this study is to:

i. examine whether employees' involvement in decision-making significantly impacts overall organisational performance.
ii. assess the extent to which employees' consultation during decision-making influences organisational performance.
iii. investigate the effect of employees' delegation on organisational performance.
iv. determine whether joint decision-making between management and employees significantly affects overall organisational performance.

REVIEW OF LITERATURE

Employees' Participation in Decision-Making

Employees' participation in decision-making in organisations shows the essence of cooperation that is needed between employees and their employers. This cooperation is fostered by a mutual acknowledgement of the need for the employees to participate in the decision-making process at the workplace. Such participation could either be through indirect or direct involvement

(Mambula *et al.,* 2021), which can help employees recognise their essential role in the organisation, (Aliyu, 2019). Another reason for adopting employees' involvement is the likelihood that it helps foster democratic principles where workers can significantly impact decisions that concern them at the workplace. This helps to curtail absenteeism, reduces turnover rate and leads to better relationship between the management team and labour force (Noah, 2008). The proxies for employee participation include involvement, consultation, delegation and joint decision-making.

Employees' Involvement

The involvement of employees is perceived to be a factor of motivation aimed at achieving the objectives of an organisation. In most cases, the employees offer their best services when involved in decision-making processes to meet the goals set by the organisation (Saputra *et al.,* 2019). Employees' involvement is when employees are allowed to participate and make meaningful contributions to managerial decision-making towards the actualisation of the objectives of the organisation. The idea of involving employees in the decision-making process is considered a democratic approach to management aimed at promoting the growth of an organisation, which could be through the exchange of information, ideas and opinions of the organisation's members. The organisation often gets better outcomes and solutions when employees can express their ideas about a particular problem or task.

There is clear evidence of a positive relationship between involving employees in decision-making and a firm's performance (Hasani (2016). Some managers and firms focus more on financial incentives to achieve the desired performance for the organisation with little or no emphasis on employees' involvement. This can be harmful to the long-term achievement of the organisation (Obiageli *et al.,* 2016). As observed by Mambula, *et al.,* (2021), the involvement of employees has a positive boost on employees' ability to focus at work and display independence and a sense of accomplishment that enhances satisfaction and higher performance of the firm. It is therefore, advised that employees' involvement should be considered more as it fosters creativity in tackling tasks and encourages employees' dedication to work.

Employees' Consultation

One of the human resource management practices is a decision made by management voluntarily on a contingent basis to consult employees on decision-making matters related to their working conditions, tasks and work organisation (Kuye *et al.,* 2011). Employees' consultation affects an organisation's performance in basically two ways. The first is through the voluntary contribution of ideas and suggestions that lead to better quality products and efficient processes. This gives rise to process innovation and better labour output. The second is its contribution to the employee's behaviour which enhances the organisation's performance through quality output, reduced absenteeism and turnover, and higher productivity (Mutua, 2019). Further research gives credence to this assumed relationship; Torka *et al.,* (2010) posited that direct participation has some significant effect on affective organisational commitment while the meta-analysis of Ohana *et al.,* (2013) revealed that the health and well-being of the employees as well as turnover and performance on extra roles are influenced strongly by the

commitment derived from consultative participation which positively affect the organisation's performance.

Employees' Delegation

Delegation is recognised as a human resource management practice to aid the performance of an organisation. The final success of organisations largely depends on human resources performance. The essence of delegation is to improve the skill of employees and enhance their job performance (Elrehail, 2019).

Employee decision-making delegation essentially involves knowing which employees' abilities and skills are suitable for a given decision and being able to allocate them to accomplish desired outcomes. Giving workers distinct responsibilities and decision-making authority can increase their dedication to the organisation, motivate them to perform better, and foster a positive outlook on the work at hand (Mambula et al., 2021). Thus, employees' satisfaction and commitment significantly affect an organisation's performance (Elrehail, 2019; Mehwish, 2019).

Joint Decision-Making

Wagner (1994) defines Joint decision-making as a process where management allocates authority and power to workers through their direct involvement. The involvement of stakeholders is associated with participative decision-making with mutual respect and regard for the parties that comprise the entire organisation (Hasani, 2016).

Employees need for self-actualisation can be satisfied by making them participate in decision-making process (Mutua, 2019). Also, harmonious working environment where workers and management contribute voluntarily, give employees a sense of belonging and allows them to participate effectively in decision-making (Noah, 2008).

Organisational Performance

Organisational performance measures how productive the employees of an organisation are regarding its profit accrued, growth, and development (Akparep *et al.*, 2019). The panacea for organisational performance is organisational capability, which is the ability of the firm to ensure its resource base is developed to meet its overall expectations (Mutua, 2019). Rakhra (2018) considers performance a fundamental issue in management that cannot be overlooked when formulating models for managers in the workplace. The measure of managerial performance should be decided by how long the organisation can survive and the corresponding rate of development (Daidj, 2016). Performance can be used to monitor the organisation's growth (Jin, 2019). The performance of an organisation is increasingly dependent on involving employees in decision-making. There are arguments supporting the idea that organisational efficiency is enhanced because of the decision-making quality and that participatory decision-making process brings about more commitment from employees in the workplace (Hasani, 2016); higher performance and better satisfaction on the job, (Mambula *et al.*, 2021). Stone (2008), advises that the participation of employees should be encouraged as it is a strategy that

has clearly reduced running costs and significantly improved the profit margin of the firms that have adopted this strategy; and the progress they make (Louise, 2011).

Theoretical Framework

The theoretical justifications for this study are the Conflict Theory; and the Komal and Tahir Employees' Participation theory. The conflict theory focuses on how employees' involvement within an organisation can alter bargaining power. Employers become dependent on the employees' discretionary efforts, which are difficult to monitor, thus increasing employees bargaining power. Firms with high-involvement practices can sometimes experience production process disruptions in the case of just-in-time inventories; this situation is costly for the organisations as they encounter much resistance to perceived unfairness from the employees. While Komal and Tahir's Employee Participation Theory posits that the participation of employees is a function of commitment, job satisfaction, and productivity. Therefore allowing employees to make decisions, the firm will relatively improve individual features of the employee like job satisfaction, improved productivity and overall organisational commitment.

The Justification of the theories

Conflict Theory, rooted in the work of Karl Marx and later expanded in organisational behaviour literature, explains how power dynamics and resource distribution influence workplace relationships. In the context of employees' participation, the theory posits that increased involvement of employees in decision-making can shift the power balance in organisations. Employees' discretionary efforts such as cooperation, compliance, and innovation—become critical inputs that are not easily monitored or enforced, thereby strengthening their bargaining power.

In the Nigerian health sector**,** this theory is especially relevant. Many public health institutions in Nigeria operate under hierarchical, centralised decision-making systems. This often leads to low morale, industrial unrest, and resistance to policies perceived as unjust or top-down in nature. When health workers are excluded from decisions affecting their work conditions—such as duty rosters, resource allocation, or patient care protocols, it can lead to conflict, absenteeism, and even strikes. Conflict theory explains these outcomes as manifestations of perceived exploitation or inequality. Moreover, in settings that utilise just-in-time inventory systems, like many understaffed Nigerian hospitals, disruptions caused by demotivated or disengaged employees can severely affect service delivery and patient outcomes. Thus, this theory helps frame employee participation as not just a human resource practice, but a strategic necessity for stability and performance in healthcare institutions.

Komal and Tahir's Employee Participation Theory offers a more affirmative perspective by suggesting that employee participation is a critical driver of job satisfaction, organisational commitment, and productivity. According to the theory, involving employees in decision-making processes leads to increased psychological ownership, enhanced motivation, and improved work outcomes.

Applied to the Nigerian healthcare system, this theory underscores the need for inclusive practices such as consultation of health workers in clinical and administrative decisions,

delegation of responsibility for frontline services, and joint planning around resource utilisation. With challenges such as staff shortages, resource constraints, and high patient loads, employee engagement becomes crucial for improving efficiency and morale. Empowering healthcare workers through participatory management can thus enhance service delivery, reduce burnout, and foster a sense of belonging, which is particularly needed in Nigeria's overstretched public health institutions.

METHODOLOGY

In order to determine the relationship between the research variables y and connect them to the empirical study's conclusions, this study used a quantitative approach. The individuals of the selected population were chosen using a purposive sampling technique. The information was gathered via a Google form. To ascertain the link between the study variables, PLS Structural Equation Modeling (PLS_SEM) was employed. Regression analysis was used concurrently to evaluate how the independent variable affected the dependent variables. To determine the relationship between the dependent and independent variables in relation to the study's problem, an explanatory research design was employed. The impact of employees' participation on the performance of the two selected general hospitals in Lagos State, Nigeria, was evaluated using both predictive and evaluative questions. A thorough quantity analysis and a comparison of variable relationships were made possible by the quantitative data gathered during the study.

Two general hospitals were selected as the study areas. The total number of staff (nurses and doctors only) in the selected hospitals was 350. The groups have social media platforms where they meet and pass information to one another regularly. The platforms were used for this research to limit the time it would take to meet the staff individuallyas they are all active users of the internet service group used to administer the questionnaire. The total number of copies of the questionnaire filled and retrieved was two hundred and eighty-four (284). All copies of the questionnaire collected were correctly filled and found beneficial. A pilot study in which twenty-five copies of questionnaire were shared to respondents to ensure the reliability of the research instrument had previously been distributed, and the outcome was consistent with the reliability as depicted in Table 1.

Table 1 Reliability of the Instrument

Variables	Composite reliability	Cronbach Alpha
Employee Delegation	0.873	0.779
Employees' Involvement in Decision-Making	0.886	0.871
Employee Consultation	0.876	0,791
Joint Decision-making	0.877	0.800
Employee Perfromance	0.886	0.812

The collected data were analysed through descriptive statistics with Statistical Packages for Social Sciences (SPSS) and presented in frequencies, percentages and tables. The derived data ware analysed, synthesised and arranged to arrive at a reliable conclusion about the study's objectives. Structural equation modelling was also adopted.

RESULTS

The study included 350 nurses and doctors of the two selected general hospitals who filled the questionnaire. 284 copies were found suitable for analysis. This amounted to 81% of the total responses, which is considered significant enough to establish a baseline for the conclusion and reliability of the research problem on the relationship between the variables. Table 2 showed the response rate to the administered questionnaire.

Table 2: Gender Distribution of Respondent (N=284)

Gender	Frequency	Percentage (%)
Male	84	30.2%
Female	200	69.8%
Age	Frequency	Percentage (%)
Below 25	26	9.2%
25-34	64	22.4%
35- 44	66	23.2%
45-54	100	35.2%
55 and above	28	10.0%
Highest Education	Frequency	Percentage (%)
SON/RN	62	21.8%
MBBS/BNSC	108	38.0%
MSN	72	25.4%
DM/Ph.D./DNP	32	11.3%
Others	10	3.5%
Experience	Frequency	Percentage (%)
Below 5	72	25.4%
5-9	44	15.5%
10-14	38	13.3%
15-19	56	19.7%
20 and above	74	26.1%

The gender distribution of the respondents is displayed in Table 2, with 200 respondents (68.9%) being female and 84 respondents (30.2%) being male. This showed that more women

than men responded. According to the respondents' age distribution on the table, 9.2% of the respondents are under 25, while 22.4%, 23.2%, 35.2%, and 10.0% of the respondents, respectively, are in the 25–34, 35–44, 45–54, and 55 and above age grade.

The respondents' distribution by level of education is presented. According to the data, 62 (21.8%) of the respondents are SON/RN (School of Nursing graduates who hold a certificate in registered nursing), 108 (38.0%) have a bachelor's degree in medicine or nursing from a university, 72 (25.4%) have an MSN, a master's degree in medicine or nursing, 32 (11.3%) have a DM/Ph.D./DNP, a doctorate in medicine or nursing practice, and 10 (3.5%) have other qualifications not on the list.

Table 1 displayed the respondents' working year distribution. It indicated that 25.5% of respondents have worked for less than 5 years, 15.5% for 5-9 years, and 13.3% for 10-14 years while 19.7% and 26.1% of respondents have worked for 15-19 years and 20 years or more, respectively.

Table 3: Frequency Distribution for Employees' Participation in Decision-making

SN	Items	SA	A	U	D	SD
1	Employees are allowed to participate in decision-making	44 15.5%	114 40%	16 5.6%	74 26.1%	36 12.8%
2	Employees participate in the long-term planning of hospital policies	42 14.8%	98 34.5%	12 4.2%	90 31.7%	42 14.8%
3	Employees are encouraged to participate and make contributions during decision-making	50 17.6%	134 47%	22 7.8%	68 23.9%	10 3.5%
4	Employees are consulted when hospital redeployment is to be made	6 2.1%	32 11.3%	6 2.1%	190 66.9%	25 17.6%
5	Employees are consulted when training and development programs are required	4 1.4%	46 16.2%	2 0.7%	178 62.7%	34 12%
6	Employees are consulted to determine appropriate work schedules.	4 1.4%	72 12.8%	20 3.5%	224 78.9%	30 10.6%
7	Department heads are given authority by management to enhance work procedures.	22 7.8%	124 43.7%	2 0.7%	126 44.4%	10 3.5%
8	Department heads are given authority by management to rotate jobs and personnel	20 7%	112 39.4%	6 2.2%	134 47.2%	12 4.2%
9	Department heads are given authority by	16	62	32	158	16

SN	Items	SA	A	U	D	SD
	management to control attendance and leave of absence	5.6%	21.8%	11.3%	55.6%	5.6%
10	Trade union representatives are directly consulted by management on changes in staff levels	-	18 6.3%	26 9.1%	222 78.2%	38 13.4%
11	When making changes to work procedures, management confers with the trade union.	-	30 10.6%	10 3.5%	196 69%	48 16.9%
12	Management allows the trade union to negotiate for condition of work of the employees	50 17.6%	164 57.8%	8 2.8%	34 12%	28 9.9%

Table 3 displayed the respondents' answers about whether or not employees engage in decision-making. It revealed that 55.5% of respondents agreed that employees are permitted to do so. In comparison, 38.9% disagreed, and 5.6% could not decide on this. Also, 49.3%, 46.5% and 4.2% of the respondents agreed, disagreed and were undecided that they are involved in the long-term planning of hospital policies. The last item on this table seeks respondents' views on whether employees are encouraged to contribute during decision-making, in which 64.8%, 27.4%, and 7.8% agreed, disagreed and undecided, respectively.

The view of respondents on consultation of employees is shown in Table 3 above. The first item showed that only 13.4% of respondents agree that employees are consulted when management wants to make redeployment in the hospital 84. 5% of the respondents disagree with this view. In comparison, 2.1% of the respondents are undecided about this. Employees are consulted for training, and a development program is the assertion of the second item on the table. 17.6% agreed, 74.7% disagreed, and only 0.7% disagreed with this assertion. The last item on the table illustrated that 14.2% of the respondents agreed, 89.5% and 3.5% disagreed and undecided that employees are consulted for suitable work time schedules.

The responses of respondents regarding employees' delegation were also displayed in the table. It contains three items; the first asked if management grants department heads power to enhance work procedures; 51.5% of respondents agreed, 47.8% disagreed, and 0.7 were undecided in their responses; the second item asserts that management gives department heads authority to rotate jobs and personnel - of which 46.4%, 51.4%, and 2.2% agreed, disagreed and undecided, respectively. Lastly, the table revealed that, 11.3 percent were undecided, 27.4% agreed and 61.2% disagreed that management granted department heads the power to regulate attendance and leave of absence.

Table 5 above presents the joint decision-making issue. 6.3% of the respondents agreed that the hospital management consults trade union representatives on changes in staff levels, 91.6% disagreed while 9.1% of the respondents are undecided on this. The table showed that hospital

administration did not contact the trade union before making changes to work procedures, as 85.9% disagreed. In comparison, only 10.6% agreed, and 3.5% said they were unconcerned about the hospital management consulting the trade union about process changes. Finally, the table showed that 75.5%, 21.9%, and 2.8% agreed, disagreed, and were undecided that the hospital management allowed the union representatives to negotiate for pay and members' work conditions respectively.

Table 4: Frequency Distribution on Work Performance

SN	Items	SA	A	U	D	SD
1	I have clear understanding of the long-term plans of the hospital	28 9.9%	126 44.4%	14 4.9%	94 32.9%	22 7.7%
2	I am satisfied with the working environment of the hospital	16 5.6%	158 55.6%	18 6.3%	88 31%	10 3.5%
3	I feel a sense of belonging with the team working towards shared goals.	26 9.2%	198 69.7%	16 5.6%	40 14%	4 1.4%
4	I am satisfied with how the management of the hospital handles complaints from staff	12 4.2%	82 28.9	16 5.6%	158 55.6%	16 5.6%
5	I am satisfied with the opportunities for professional improvement at the hospital	12 4.2%	120 42.3%	16 5.6%	126 44.4%	10 3.5
6	I am satisfied with the flexibility of working in the hospital	16 5.6%	92 32.4%	14 4.9%	150 52.8%	12 4.2%
7	Employees get promoted for doing good work	42 14.8%	192 67.6%	20 7.4%	26 9.2%	4 1.4%
8	I am given enough recognition by management for work that is well done	52 18.2%	172 60.6%	24 8.5%	28 9.9%	8 2.8%
9	I would recommend employment at this hospital to my friend	18 6.3%	164 57.8%	52 18.3%	46 16.2%	4 1.4%
10	My hospital has up-to-date equipment and facilities	28 9.9%	184 64.7%	16 5.6%	40 14.8%	16 5.6%
11	I can serve my patients efficiently.	54 19%	178 62.7%	12 4.2%	16 5.6%	4 1.4%

SN	Items	SA	A	U	D	SD
12	I pay equal attention to all patients irrespective of their status	100 35.2%	164 57.8%	4 1.4%	2 0.7%	2 0.7%

Table 4 showed the respondents' responses on the dependent variable, i.e., organisational performance. Twelve questions were asked on the issues of organisational performance. The first enquired on whether the respondents have a clear understanding of the long-term plans of the hospital. 54.3% of the respondents consented, 40.6% of the respondents did not agree, and 4.9% were indecisive. Hence, over 50% of the respondents clearly understood the hospital's long-term plans. The second item in the table revealed that 61.2%, 34.5% and 6.3%, respectively, agreed, disagreed and were undecided whether they felt satisfied with the hospital's working environment. Also, most of the respondents felt a sense of belonging with the team working towards shared goals; 78.9% consented, 15.4% disagreed, and 5.6% were undecided. This implied that a more significant percentage of the study's respondents felt a sense of belonging in the teamwork. Item four on the table sought respondents' views on whether they felt satisfied with how the hospital's management handled staff complaints. Only 33.1% of the respondents claimed they were happy with how staff complaints are handled in the hospital, a more significant percentage of 61.2% claimed that they were not pleased with how staff complaints were handled in the hospital, while 5.6% remained undecided.

Furthermore, 46.5%, 47.9% and 5.6% agreed, disagreed and were undecided that they felt satisfied with the opportunities for professional improvement at the hospital. At the same time, item six on the table revealed that 38.0% of the respondents, felt satisfied with the flexibility of work in the hospital. Majority, i.e. 570%, and 7.0% of the respondents disagreed and were undecided about this. The seventh item on the table showed that 82.4% of the respondents agreed that employees got promoted for doing good work. 10.6% disagreed with this, 7.4% remained undecided. Item eight showed responses on whether the respondents were given enough recognition by management for work well-done. 78.8% agreed. In contrast, only 12.7% and 8.5% of the respondents disagreed and were undecided, respectively.

In addition, 64.1%, 17.6% and 18.3% agreed, disagreed and undecided on whether they could recommend employment at the hospital to their friends. Likewise, 74.5% of the respondents agreed, 19.7% disagreed, and 14.8% were undecided as to whether the hospital had up-to-date equipment and facilities. The eleventh item on the table showed that a more significant percentage of the respondents, i.e. 81.7%, agreed that they could serve their patients efficiently, and only 7.0% and 4.2% disagree and were undecided. Finally, the last item on the table revealed 93.0% of the respondents agreed that they pay equal attention to all patients irrespective of their status. In comparison, only 1.4% disagreed with this, 1.4% of the respondents remained indecisive.

Discussions of Findings

Employees' Involvement in Decision-Making and Organisational Performance

The test result showed that employees' participation in decision-making has a moderate and positive impact on overall organisational performance. This implied that a unit change in employees' involvement in decision-making will undoubtedly lead to an increase in the overall organisational performance. The performance of an organisation is increasingly dependent on involving employees in decision-making. Arguments support the idea that organisational efficiency is enhanced because of the quality of the decision-making process, and the decision-making process now experiences more commitment from the employees who have been allowed to participate in the workplace (Hasani & Sheikhesmaeili, 2016). Using SEM-PLS, the significance level 0.000 confirms the significant relationship between employees' participation in decision-making and the organisation's performance. Findings revealed that employees are involved and encouraged to participate in decision-making.

Employees' Consultation in Decision-making and Organisational performance

The result suggested that employees' consultation in decision-making positively and significantly affected the overall performance. This predicted that a unit change in employees' consultation in decision-making positively leads to an increase in the organisation's performance. This result extended the works of Pitelis and Wagner (2019), which assessed the effect of a democratic form of management where employees are consulted on performance and discovered a positive relationship between the performance and employee consultation as this approach gives the employees room to contribute and execute creative ideas that are brought up in decision-making process. This means that consultation of employees in decision making significantly affects an organisation's performance, especially in public hospitals.

Employees' Delegation and Organisational Performance

The result showed that employees' delegation positively and significantly affects overall organisational performance. This predicted that a unit change in employees' delegation would positively increase overall organisational performance. The current result is consistent with Stone's (2008) study, which found that giving employees the liberty to make their own judgments improves managerial abilities. According to Looise *et al.*, (2011), there is a noticeable difference in the pace of advancement among various organisations. Certain organisations delegate authority and power to their employees, which encourages improved performance from them.

Joint Decision-Making and Organisational Performance

The finding showed that joint decision-making positively and significantly affects overall organisational performance. This predicted that a unit change in joint decision-making would positively increase organisational performance. Employers can benefit from increased compensation and existential advantages by implementing various collective bargaining strategies (Meyer & Heppard, 2000).

Overall, the study demonstrated that employees' participation, including employees' involvement, consultation, delegation, and joint decision-making, can comparatively enhance individual employee characteristics such as increased productivity, job satisfaction, and overall organisational performance. The results also provided credence to the notion that employees' dedication, job satisfaction, and productivity all have comparatively significant impact on employees' engagement (Komal & Tahir, 2007).

PRACTICAL IMPLICATIONS

The study findings offered significant awareness into improving management practices within the Nigerian health sector, particularly in public hospitals where hierarchical structures are prevalent. The research confirmed that employees' participation in decision-making significantly improves organisational performance. Therefore, managers in the health sector should encourage inclusive decision-making processes by giving employees opportunity to participate in planning, policy creation, and problem-solving. This approach can increase employees' commitment, reduce resistance to organisational change, and promote more efficient and responsive service delivery.

Employees' consultation also emerged as a vital factor in driving organisational effectiveness. When staff are genuinely consulted on matters such as training, staff redeployment, and scheduling, they are more likely to feel valued and motivated, which improves their overall performance. To achieve this, hospital administrators should institutionalised mechanisms such as staff advisory committees, consultation forums, and feedback systems that allow employees to express their views and influence outcomes.

Delegating authority to employees has also been shown to positively influence organisational performance. By giving employees the freedom to take decisions within their areas of responsibility, organisations can enhance managerial effectiveness, encourage innovation, and promote a culture of accountability. This can be operationalised by authorising department heads, unit managers, and team leaders to make decisions on operational issues without always requiring top-level approval, thereby improving workflow and service efficiency.

Additionally, joint decision-making plays a complementary role in organisational success. Engaging employees in collective decisions through committees, cross-functional teams, and participatory workshops encourages a sense of ownership and teamwork. This is particularly important in healthcare settings where multidisciplinary collaboration is essential for quality outcomes and coordinated patient care.

In summary, the study reinforced the practical application of Komal and Tahir's Employees Participation Theory, which posits that involving employees in decision-making enhances job satisfaction, organisational commitment, and productivity. It also supports the Conflict Theory, which emphasised that excluding employees from key decisions can lead to dissatisfaction and internal conflict. Managers in the Nigerian health sector are therefore encouraged to move beyond top-down approaches and actively integrate employees' voices into their strategic and operational decisions. Doing so can yield substantial benefits for employees morale and institutional performance.

CONCLUSION AND RECOMMENDATIONS

The research concludes that involving employees in decision-making is a known approach in organisation management. This has gained a reasonable level of acceptance across the board as employees are encouraged to make inputs in decision-making. However, hospital management must still catch up on some essential aspects of employees' decision-making such as work schedules, conditions of service, and welfare matters. All these significantly impact how the employees react to work and their overall performance. Results showed high dissatisfaction because they do not have influence or input regarding freedom in operational matters, welfare and work routine and professional advancement. Therefore, the study concludes that consultation of employees, delegation of employees and participation of employees in the round decision-making process is a viable measure of significantly improving organisational performance.

The following recommendations are deemed essential in the light of the findings and conclusion above:

i. Management should enact a standard policy to ensure all cadres of employees are involved in decision-making so that opinions that cut across all interest levels can be adequately assessed and adopted where suitable.
ii. Management should incorporate the habit or policy of consulting employees on issues relating to workforce deployment and allocation of job roles to maximise skills in suitable roles.
iii. Management should equip department heads with professional skills and education that will aid in fine-tuning their ability to make sound judgments. This will help them to efficiently handle staff complaints and reduce the workload on the management.
iv. Management should create a simple and easily understandable model for employees' participation in decision-making to avoid confusion about the motive of involving them in the decision-making process.

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