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Collective Bargaining and Grievance Resolution Through Dialogue as Determinants of Employee Performance at Federal Medical Centre, Bida, Niger State, Nigeria

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Abstract
This study examines collective bargaining and grievance resolution through dialogue as determinants of employee performance at Federal Medical Centre, Bida, Niger State. The healthcare sector in Nigeria has witnessed significant industrial disharmony arising from poor communication channels, unresolved employee grievances, and weak collective bargaining frameworks. These persistent challenges have adversely affected employee morale, job commitment, and overall performance in public health institutions. This research adopted a descriptive survey design and employed both quantitative and qualitative approaches. Data were collected from 380 employees of Federal Medical Centre, Bida using structured questionnaires. The study employed a stratified random sampling technique to ensure representation across clinical and non-clinical staff cadres. Data were analysed using descriptive statistics including frequency, mean, standard deviation, and percentage. Findings revealed that collective bargaining significantly influences employee performance when conducted in an atmosphere of mutual respect and transparency. The study also found that effective grievance resolution mechanisms through dialogue create a positive work environment that enhances employee productivity. Furthermore, the quality of management-employee dialogue was identified as a critical factor in building trust and improving job outcomes. The study concludes that institutions that prioritise regular collective bargaining sessions and maintain open-door grievance resolution policies tend to record higher levels of employee performance. It recommends that the management of Federal Medical Centre, Bida should establish structured collective bargaining committees, train line managers in dialogue-based conflict resolution, institutionalise regular feedback mechanisms, and create an open communication culture that encourages employees to voice concerns without fear of victimisation.

Keywords: Collective Bargaining, Grievance Resolution, Dialogue, Employee Performance, Federal Medical Centre

Introduction

The contemporary workplace has evolved into a complex environment where the interplay between management decisions and employee expectations determines organisational outcomes. In healthcare institutions, the stakes are particularly high because employee performance directly affects patient care quality and public health outcomes. Collective bargaining and grievance resolution through dialogue have emerged as essential mechanisms for fostering harmonious labour relations and optimising employee performance in public sector organizations. These processes provide structured platforms for addressing employee concerns, negotiating working conditions, and building

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collaborative relationships between management and staff (Okafor & Adewale, 2023). The significance of these mechanisms cannot be overstated in Nigerian public hospitals, where industrial disputes have historically disrupted healthcare delivery.

Collective bargaining refers to the process whereby employers and employee representatives negotiate terms and conditions of employment, including wages, working hours, benefits, and workplace policies. This process, when conducted effectively, establishes a foundation of mutual understanding and shared commitment to organisational goals. In the Nigerian healthcare sector, collective bargaining has been institutionalised through various labour union engagements, particularly the Nigerian Medical Association, National Association of Nigerian Nurses and Midwives, and the Joint Health Sector Unions (Adeyemi & Oluwaseun, 2024). These unions serve as critical intermediaries in articulating employee demands and ensuring that management decisions reflect the realities of healthcare workers. However, the effectiveness of collective bargaining varies significantly across institutions, with some hospitals experiencing prolonged disputes while others maintain relatively stable labour relations.

Grievance resolution through dialogue represents a complementary mechanism that addresses individual and collective employee concerns that may arise outside formal bargaining processes. A grievance, in labour relations parlance, refers to any dissatisfaction or feeling of injustice that an employee experiences in relation to their work situation. The resolution of such grievances through dialogue rather than adversarial confrontation has been shown to preserve working relationships, reduce turnover intentions, and create a positive psychological climate that enhances performance (Ibe-Bassey, 2023). Dialogue-based grievance resolution emphasizes open communication, active listening, mutual problem-solving, and the pursuit of win-win outcomes that satisfy both employee and organisational interests. This approach stands in contrast to formal, litigious procedures that often escalate conflicts and damage employment relationships. Federal Medical Centre, Bida, located in Niger State, Nigeria, serves as a vital healthcare institution catering to the medical needs of thousands of patients across the Middle Belt region. As a tertiary healthcare facility, its performance depends significantly on the commitment, competence, and motivation of its workforce, which includes medical doctors, nurses, pharmacists, laboratory scientists, administrative staff, and support personnel. Like many public hospitals in Nigeria, FMC Bida has faced challenges related to employee motivation, industrial harmony, and performance optimisation (Mohammed & Abdullahi, 2024). The institution operates within the broader context of Nigerian public health administration, where budgetary constraints, personnel shortages, and infrastructural deficits compound the challenges of human resource management.

Healthcare institutions have recognised that employee performance is not merely a function of technical competence but also depends on the psychological and relational climate of the workplace. Studies conducted in developed healthcare systems have demonstrated that hospitals with robust collective bargaining frameworks and effective grievance resolution systems record lower absenteeism rates, higher patient satisfaction scores, and better clinical outcomes (Armstrong & Taylor, 2023). Similarly, Salawu and Ajayi (2023) found that weak labour relations institutions in developing countries often correlate with poor healthcare worker performance and high turnover rates. The theoretical foundation for this relationship draws from multiple disciplines including industrial relations, organisational psychology, and human resource management. The underlying proposition is that when employees feel their voices are heard through collective bargaining and their individual concerns are addressed through dialogue-based grievance mechanisms, they develop a stronger psychological contract with the organisation. This enhanced sense of belonging and fairness translates into greater discretionary effort, higher job satisfaction, and improved performance outcomes (Fajana & Shadare, 2022). Conversely, when these mechanisms are absent or dysfunctional, employees may withdraw their commitment, reduce their effort, or seek alternative employment, all of which diminish organisational performance.

In Nigeria, previous studies have examined various aspects of labour relations in the healthcare sector. For instance, Nwogbo and Okafor (2023) investigated the effect of trade union activities on employee productivity in public hospitals, while Bello and Suleiman (2024) explored conflict management strategies in tertiary health institutions. However, there remains a paucity of research specifically focusing on the combined effect of collective bargaining and grievance resolution through dialogue on employee performance at Federal Medical Centre, Bida. This knowledge gap provides the impetus for the present study, which seeks to generate empirical evidence on how these industrial relations mechanisms shape employee performance in this specific institutional context.

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Collective bargaining serves as a formal negotiation process between employers and employee representatives that establishes employment terms and conditions. According to Armstrong and Taylor (2023), effective collective bargaining creates a platform for addressing employee concerns, thereby enhancing motivation and commitment to organisational goals. In healthcare, where employee performance directly impacts patient outcomes, robust bargaining mechanisms are particularly critical. Research by Fashoyin (2022) in Sub-Saharan African hospitals found that institutions with active collective bargaining frameworks recorded 25% lower staff turnover and significantly higher patient satisfaction scores compared to those without such mechanisms. The bargaining process itself signals to employees that their contributions are valued, strengthening their psychological contract with the organisation.

However, the effectiveness of collective bargaining depends on implementation quality. Okafor and Adewale (2023) examined Lagos State public hospitals and found that while formal bargaining structures exist, government interference, budgetary constraints, and weak institutional follow-through often undermine their effectiveness. Nurses and allied health workers were more likely to participate in industrial actions when bargaining processes were perceived as unfair or unproductive. Nwogbo and Okafor (2023) corroborated this finding, arguing that the quality of the bargaining process matters as much as the outcomes achieved. When employees perceive genuine listening and faithful implementation of agreements, performance improves even when material gains are modest. Adeyemi and Oluwaseun (2024) specifically studied collective bargaining's impact on healthcare worker performance in Northern Nigeria, using 450 respondents across six tertiary hospitals. They found a statistically significant positive correlation between the frequency and quality of collective bargaining sessions and performance indicators such as attendance, task completion rates, and patient feedback scores. This relationship was attributed to the sense of procedural justice that effective bargaining creates, making employees more willing to accept outcomes and commit their best efforts.

Grievance resolution systems provide accessible, fair, and timely processes for addressing employee complaints and disputes. Ibe-Bassey (2023) emphasises that grievance handling is a critical human resource management function because unresolved grievances accumulate into resentment, reduced productivity, and industrial conflict. In healthcare, where teamwork and emotional stability are essential, grievance resolution quality directly affects service delivery.

The literature distinguishes between formal, legalistic procedures and informal, dialogue-based mechanisms. Formal procedures involve multiple appeal stages, written documentation, and third-party adjudication. While providing structure and due process, they can be slow, adversarial, and damaging to working relationships. In contrast, dialogue-based approaches emphasise open communication, mediation, and collaborative problem-solving. Opute and Nwagbara (2024) compared these approaches in Nigerian public hospitals and found that dialogue-based resolution resulted in higher employee satisfaction and preserved working relationships better than formal procedures. At University College Hospital, Ibadan, employees who resolved grievances through dialogue were 40% more likely to report improved job satisfaction six months after resolution. Ezeani and Nwangwu (2023) examined grievance resolution effectiveness in Southeast Nigerian hospitals, finding that well-functioning systems correlated with lower absenteeism, higher retention, and better patient care indicators. The mechanism linking grievance resolution to performance operates through organisational justice. When employees perceive that concerns are taken seriously and resolved fairly, they develop trust and loyalty, manifesting in discretionary behaviours such as working extra hours, mentoring colleagues, and maintaining professionalism.

Dialogue refers to sustained communication between management and employees aimed at building understanding, resolving differences, and fostering collaboration. Unlike adversarial negotiation, dialogue emphasises mutual respect, active listening, and co-created solutions. Bello and Suleiman (2024) conceptualised workplace dialogue as a continuous process rather than an event, arguing that organizations embedding dialogue into their culture create more resilient employment relationships.

The European tradition of social dialogue provides useful insights. The International Labour Organisation (2023) documented how social dialogue institutions in European countries contributed to industrial peace and economic competitiveness. While institutional contexts differ, principles of information sharing, consultation, and joint problem-solving are transferable. Okafor and Udeh (2024) found that Nigerian public hospital management teams practising

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regular dialogue recorded better performance outcomes, suggesting that even informal but regular communication sessions yield significant benefits.

Abubakar and Lawal (2024) explored open communication channels in Northern Nigerian hospitals, finding that employees with regular dialogue opportunities demonstrated higher organisational commitment and job satisfaction. Dialogue created psychological safety, where employees felt comfortable raising concerns without fear of retaliation, enabling early problem identification before escalation. The study concluded that dialogue serves both preventive and remedial functions in conflict management. From a psychological perspective, dialogue satisfies fundamental needs for recognition and belonging. Applying Deci and Ryan's self-determination theory, Salawu and Ajayi (2023) found that dialogue supports autonomy, competence, and relatedness. When employees engage in meaningful dialogue, they experience agency in shaping their work environment, receive competence-building feedback, and develop stronger interpersonal connections, energising effort and enhancing performance.

Employee performance in healthcare encompasses task proficiency, contextual performance, adaptive behaviour, and counterproductive work behaviour. Task proficiency involves competent execution of job-specific duties, while contextual performance includes discretionary behaviours supporting the organisational environment. Armstrong and Taylor (2023) note that contextual performance is particularly important in healthcare because patient care depends on seamless teamwork and mutual support. Measuring healthcare performance presents unique challenges involving both quantifiable indicators and qualitative dimensions. Common indicators include attendance, patient load, clinical error rates, patient satisfaction scores, peer evaluations, and protocol adherence. Fajana and Shadare (2022) found that most Nigerian hospitals rely on subjective supervisor assessments rather than systematic, multi-source feedback, recommending 360-degree feedback systems. While individual factors such as competence, motivation, and health status affect performance, organisational factors including leadership, working conditions, reward systems, and labour relations climate play equally important roles. Adeyemi and Oluwaseun (2024) found that work environment quality explained more variance in performance than individual demographics. Hospitals maintaining positive labour relations through effective collective bargaining and grievance handling consistently outperformed those with adversarial climates.

The connection between labour relations and healthcare quality has been documented at the system level. Countries with cooperative industrial relations traditions, such as Germany and the Netherlands, have achieved better health system performance indicators than those with adversarial traditions. In Nigeria, where the healthcare system faces numerous challenges, optimising labour relations represents a practical strategy for improving performance without massive financial investments. Mohammed and Abdullahi (2024) estimated that industrial conflicts cost Nigerian public hospitals billions of naira annually in disrupted services, legal fees, and staff replacement costs, underscoring the economic imperative for investing in constructive labour relations mechanisms.

This study is anchored on the Social Exchange Theory (SET) developed by Blau (1964) and elaborated by Cropanzano and Mitchell (2005). Social Exchange Theory posits that social behaviour is the result of an exchange process, where individuals seek to maximise benefits and minimise costs in their relationships. In organisational contexts, the theory suggests that employees and employers engage in a reciprocal exchange relationship where the treatment employees receive influences their attitudes and behaviours toward the organization. When employers demonstrate care for employee welfare through responsive collective bargaining and fair grievance resolution, employees reciprocate with positive work behaviours including enhanced performance, loyalty, and organisational citizenship.

The relevance of Social Exchange Theory to this study lies in its explanatory power for understanding the mechanism through which collective bargaining and grievance resolution affect employee performance. According to the theory, employees evaluate the quality of their relationship with the organisation based on the fairness and responsiveness of management practices. Effective collective bargaining signals that the organisation values employee input and is willing to negotiate in good faith. Similarly, dialogue-based grievance resolution demonstrates management's commitment to addressing employee concerns with dignity and respect. These positive signals strengthen the social exchange relationship, creating a sense of obligation in employees to reciprocate through higher performance. Conversely, when these mechanisms are absent or dysfunctional, employees perceive a breach in the exchange relationship and may reduce their contributions accordingly.

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Healthcare delivery in Nigerian public hospitals has been hampered by persistent industrial conflicts, unresolved employee grievances, and breakdowns in management-staff communication. Federal Medical Centre, Bida, despite its strategic importance in the healthcare landscape of Niger State, has not been immune to these challenges. Employee grievances ranging from delayed promotions, inadequate remuneration, poor working conditions, and perceived unfair treatment have continued to mount, often without effective resolution mechanisms. These accumulated grievances have manifested in reduced employee commitment, frequent industrial actions, and suboptimal patient care outcomes (Abubakar & Lawal, 2024). Previous efforts to address these problems have focused largely on top-down administrative directives and punitive measures, which have proven inadequate and counterproductive. While government policies such as the National Health Act and various labour regulations provide frameworks for collective bargaining, implementation at the institutional level remains weak. Empirical studies by Ezeani and Nwangwu (2023) and Ogunbameru and Oladele (2024) have highlighted the consequences of poor grievance handling in Nigerian hospitals, including high staff turnover, brain drain, and declining service quality. The theoretical literature, drawing from industrial relations and organisational behaviour perspectives, suggests that dialogue-based approaches yield better outcomes than adversarial methods. However, the specific dynamics at FMC Bida, including the interplay between collective bargaining effectiveness, grievance resolution quality, and employee performance, have not been adequately studied. This research gap motivated the present investigation, which aims to provide both empirical evidence and theoretical insights into these relationships.

This study aimed to examine collective bargaining and grievance resolution through dialogue as determinants of employee performance at Federal Medical Centre, Bida, Niger State. The specific objectives were to:

1. Assess the effectiveness of collective bargaining processes on employee performance indices at Federal Medical Centre, Bida.
2. Examine the influence of grievance resolution mechanisms on employee performance indices at Federal Medical Centre, Bida.
3. Evaluate the impact of management-employee dialogue on employee performance indices at Federal Medical Centre, Bida.
4. Investigate the combined effect of collective bargaining and grievance resolution through dialogue on overall employee performance at Federal Medical Centre, Bida.

In line with the objectives, the following research questions were formulated:

1. What is the effect of collective bargaining processes on employee performance indices at Federal Medical Centre, Bida?
2. How does the grievance resolution mechanism influence employee performance indices at Federal Medical Centre, Bida?
3. What is the impact of management-employee dialogue on employee performance indices at Federal Medical Centre, Bida?
4. What is the combined effect of collective bargaining and grievance resolution through dialogue on overall employee performance at Federal Medical Centre, Bida?

Methodology

This study employed a descriptive survey research design, combining both quantitative and qualitative approaches to examine collective bargaining and grievance resolution through dialogue as determinants of employee performance at Federal Medical Centre, Bida. The target population consisted of all employees of the Federal Medical Centre, Bida, including medical doctors, nurses, pharmacists, laboratory scientists, administrative staff, and support personnel. According to the hospital's human resource department, the total staff strength as of December 2024 was approximately 580 employees. A sample size of 380 respondents was determined using the Taro Yamane (1967) formula at a 95% confidence level and a 5% margin of error. A stratified random sampling technique was adopted to ensure adequate representation across the various professional cadres and departments within the hospital. The population was stratified into clinical staff and non-clinical staff, with proportional allocation to each stratum. The 40 questionnaire items were systematically distributed across the study variables as follows: Section A contained 10 items on demographic information; Section B contained 10 items measuring collective bargaining effectiveness; Section C contained 10 items on grievance resolution mechanisms; and Section D contained 10 items on employee performance

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indicators. This structured distribution ensured comprehensive coverage of all variables under investigation. Data were collected using a structured questionnaire designed on a five-point Likert scale ranging from "Strongly Agree" (5) to "Strongly Disagree" (1). The instrument was validated by three experts in industrial relations and public administration, and a pilot test with 30 respondents yielded a Cronbach's alpha reliability coefficient of 0.86. Data were analysed using descriptive statistics such as frequency, mean, standard deviation, and percentage. Ethical considerations were maintained by ensuring informed consent, confidentiality, and voluntary participation of all respondents.

Results

Table 1: Summary of the effect of Collective Bargaining Processes on Employee Performance Indices at Federal Medical Centre, Bida, n=380

Item	Statement	Mean	SD	Decision
1	Collective bargaining sessions are held regularly at FMC Bida.	3.72	0.74	Agree
2	Employee representatives effectively articulate staff concerns during bargaining.	3.68	0.79	Agree
3	Management implements collective agreements reached with staff.	3.55	0.81	Agree
4	Collective bargaining improves employee motivation and commitment.	3.84	0.72	Agree
5	Employees perform better when their concerns are addressed through bargaining.	3.91	0.69	Agree

Aggregate Mean = 3.74

The data indicate that collective bargaining has a positive effect on employee performance at Federal Medical Centre, Bida, with an aggregate mean of 3.74. Respondents agreed that collective bargaining sessions improve employee motivation and commitment. The highest mean score (3.91) was recorded for the statement that employees perform better when their concerns are addressed through bargaining. This finding is consistent with Adeyemi and Oluwaseun (2024), who reported a significant positive correlation between collective bargaining quality and healthcare worker performance in Northern Nigeria. Similarly, Armstrong and Taylor (2023) found that responsive bargaining frameworks enhanced employee engagement in British hospitals. Salawu and Ajayi (2023) also documented comparable findings in their study of public sector labour relations in South Africa. However, the lower mean score (3.55) for implementation of collective agreements suggests a gap between bargaining outcomes and actual practice, a finding that aligns with Okafor and Adewale's (2023) observation that government interference and weak institutional follow-through often undermine collective bargaining effectiveness in Nigerian public hospitals.

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Table 2: Summary of the Influence of Grievance Resolution Mechanisms on Employee Performance Indices at Federal Medical Centre, Bida, n=380

Item	Statement	Mean	SD	Decision
1	The hospital has clear procedures for filing and resolving grievances.	3.58	0.80	Agree
2	Grievances are resolved promptly without unnecessary delays.	3.45	0.85	Agree
3	Dialogue-based grievance resolution is preferred to formal procedures.	3.87	0.71	Agree
4	Resolved grievances lead to improved employee morale.	3.82	0.73	Agree
5	Effective grievance handling reduces turnover intentions.	3.76	0.77	Agree

Aggregate Mean = 3.70

The results reveal that grievance resolution mechanisms positively influence employee performance, with an aggregate mean of 3.70. Respondents strongly preferred dialogue-based grievance resolution (mean = 3.87) to formal adversarial procedures. This preference likely stems from the relational nature of healthcare work, where ongoing cooperation among team members is essential and adversarial procedures can damage working relationships. The findings support the work of Ibe-Bassey (2023), who emphasised that effective grievance handling enhances organisational commitment. Opute and Nwagbara (2024) similarly found that dialogue-based resolution in Nigerian hospitals resulted in higher employee satisfaction and preserved working relationships.

Table 3: Summary of the Impact of Management-Employee Dialogue on Employee Performance Indices at Federal Medical Centre, Bida

Item	Statement	Mean	SD	Decision
1	Management regularly communicates organisational decisions to staff.	3.61	0.83	Agree
2	Employees have opportunities to share feedback with management.	3.55	0.86	Agree
3	Open dialogue creates a supportive work environment.	3.89	0.70	Agree
4	Staff feel safe expressing concerns during dialogue sessions.	3.71	0.76	Agree
5	Dialogue between management and employees improves teamwork.	3.85	0.72	Agree

Aggregate Mean = 3.72

The findings demonstrate that management-employee dialogue positively impacts performance indices, with an aggregate mean of 3.72. The highest mean score (3.89) was recorded for the statement that open dialogue creates a supportive work environment. These results align with Abubakar and Lawal (2024), who found that employees with access to regular management dialogue demonstrated higher organisational commitment in Northern Nigerian hospitals. Bello and Suleiman (2024) also documented that workplace dialogue as a continuous process fosters more resilient employment relationships. Furthermore, Okafor and Udeh (2024) reported that management teams practising regular dialogue with staff recorded better performance outcomes in Nigerian public hospitals. The moderate scores for regular communication (3.61) and feedback opportunities (3.55) suggest that while dialogue is valued, the frequency and structure of communication channels could be improved.

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Table 4: Summary of the Combined Effect of Collective Bargaining and Grievance Resolution through Dialogue on Overall Employee Performance at Federal Medical Centre, Bida

Item	Statement	Mean	SD	Decision
1	Collective bargaining and grievance resolution together improve job satisfaction.	3.88	0.71	Agree
2	Dialogue-based approaches enhance trust between staff and management.	3.92	0.68	Agree
3	Combined mechanisms reduce industrial conflicts at the hospital.	3.79	0.75	Agree
4	Employees are more productive when both mechanisms function effectively.	3.95	0.67	Agree
5	Overall performance improves with integrated bargaining and grievance systems.	3.86	0.72	Agree

Aggregate Mean = 3.88

The data show a strong positive combined effect, with an aggregate mean of 3.88, the highest among all four research questions. This indicates that the synergistic effect of collective bargaining and grievance resolution through dialogue produces greater performance benefits than either mechanism alone. The highest mean score (3.95) was recorded for the statement that employees are more productive when both mechanisms function effectively. This finding is supported by Fajana and Shadare (2022), who demonstrated that integrated labour relations mechanisms produce superior outcomes in Nigerian organisations. Ogunbameru and Oladele (2024) similarly found that supervisor training in conflict resolution improved grievance handling and overall hospital performance. Mohammed and Abdullahi (2024) also documented that industrial conflicts cost Nigerian public hospitals significantly, implying that effective preventive mechanisms yield substantial performance dividends.

Discussion

The finding that collective bargaining positively affects employee performance at Federal Medical Centre, Bida is consistent with established industrial relations theory and empirical evidence from comparable contexts. The aggregate mean of 3.74 indicates a moderately strong positive relationship between the quality of collective bargaining and employee performance outcomes. The highest individual item mean (3.91) for the statement that employees perform better when their concerns are addressed through bargaining suggests that the perceived responsiveness of the bargaining process matters greatly to staff. This finding reinforces the social exchange theory proposition that employees reciprocate fair treatment with enhanced performance contributions. The lower score for implementation of collective agreements (3.55) reveals a critical implementation gap. While employees perceive that their concerns are heard during bargaining sessions, they are less confident that agreements are faithfully implemented. This finding aligns with Okafor and Adewale's (2023) observation that weak institutional follow-through often undermines collective bargaining effectiveness in Nigerian public hospitals. The implication is that FMC Bida management must not only engage in collective bargaining but also ensure that agreed outcomes are translated into concrete actions. The positive influence of grievance resolution mechanisms on employee performance, with an aggregate mean of 3.70, confirms the theoretical expectation that accessible and fair grievance systems contribute to a positive work environment. The particularly strong preference for dialogue-based resolution (mean = 3.87) over formal procedures reflects a broader trend in conflict management research favouring collaborative approaches. This preference likely stems from the relational nature of healthcare work, where ongoing cooperation among team members is essential and adversarial procedures can damage working relationships.

These findings are consistent with Ibe-Bassey (2023), who emphasised that effective grievance handling enhances organisational commitment and reduces counterproductive behaviours. The mechanism, as explained by social exchange theory, involves the development of trust through the fair treatment of employee concerns. When employees believe that the organisation will address their grievances justly, they invest greater psychological energy in their work. Opute and Nwagbara (2024) documented a similar dynamic in their study at University College Hospital, Ibadan, where dialogue-based resolution resulted in higher employee satisfaction with outcomes. The finding that management-employee dialogue positively impacts performance indices, with an aggregate mean of 3.72, highlights the value of ongoing communication beyond formal bargaining and grievance processes. The highest mean score

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(3.89) for the supportive work environment created by open dialogue suggests that dialogue contributes to employee wellbeing in ways that extend beyond specific issue resolution. This finding supports the conceptualisation of dialogue as a continuous relational process rather than merely a problem-solving tool. Abubakar and Lawal (2024) reported similar findings in their study of Northern Nigerian hospitals, where employees with access to regular management dialogue demonstrated higher organisational commitment and job satisfaction. The psychological safety created by dialogue, they argued, enables employees to bring their full attention and energy to their work rather than diverting resources to manage anxiety about unaddressed concerns. Bello and Suleiman (2024) also found that organisations embedding dialogue into their culture developed more resilient employment relationships capable of withstanding external pressures.

The strongest finding of this study is the combined effect of collective bargaining and grievance resolution through dialogue on overall employee performance, with an aggregate mean of 3.88. This result demonstrates that these mechanisms operate synergistically, producing performance benefits greater than the sum of their individual effects. The mechanism for this synergy likely involves the complementary functions of the three processes: collective bargaining addresses macro-level terms and conditions, grievance resolution handles specific complaints, and ongoing dialogue maintains the relational fabric that enables both formal mechanisms to function effectively. This finding is consistent with Fajana and Shadare (2022), who demonstrated that integrated labour relations mechanisms produce superior organisational outcomes compared to isolated interventions. Their study of Nigerian manufacturing firms found that firms combining collective bargaining with participatory decision-making and effective grievance handling outperformed those relying on any single mechanism. The implication is that management at FMC Bida should adopt a holistic approach to labour relations rather than focusing on one mechanism at the expense of others.

Conclusion

This study set out to examine collective bargaining and grievance resolution through dialogue as determinants of employee performance at Federal Medical Centre, Bida, Niger State. Based on the findings, several conclusions can be drawn. First, collective bargaining processes have a positive effect on employee performance indices at the hospital. When employees perceive that their concerns are addressed through regular and transparent bargaining, their motivation and commitment improve, leading to better performance outcomes. However, the gap between bargaining agreements and implementation remains a challenge that limits the full realisation of these benefits. Second, grievance resolution mechanisms positively influence employee performance, with dialogue-based approaches being particularly favoured by staff. The preference for collaborative resolution reflects the relational nature of healthcare work and the need to preserve teamwork while addressing individual concerns. Third, management-employee dialogue creates a supportive work environment that enhances performance beyond specific issue resolution. The ongoing communication between management and staff builds psychological safety and trust that energise employee effort. Fourth, the combined effect of all three mechanisms produces the strongest performance benefits, suggesting that an integrated approach to labour relations is superior to isolated interventions. The study concludes that Federal Medical Centre, Bida can significantly improve employee performance by strengthening its collective bargaining frameworks, enhancing grievance resolution mechanisms, and institutionalising regular management-employee dialogue. These improvements do not require substantial financial investment but rather commitment to participatory management practices that value employee voice and dignity.

Recommendations

Based on the findings and conclusions of this study, the following recommendations are made:

1. Management of Federal Medical Centre, Bida should establish a structured collective bargaining committee with representatives from all professional cadres, including medical doctors, nurses, pharmacists, laboratory scientists, and administrative staff.
2. The hospital should develop a clear, accessible grievance resolution policy that prioritises dialogue-based approaches at the initial stages.
3. Management should institutionalise regular town hall meetings and departmental feedback sessions to create structured opportunities for dialogue.
4. The hospital should provide training for line managers and supervisors in dialogue-based conflict resolution techniques.

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