External Programme Review, Accreditation, and Evidence-Traceable Regulatory Judgement

Standards, Evidence, Professional Reasoning, and Defensible Accreditation Decisions

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Abstract

External programme review protects the credibility of qualifications only when evaluators can explain how an applicable standard, a specific institutional claim, trustworthy evidence and defensible professional reasoning warrant a particular conclusion and regulatory response. Accreditation can otherwise reward documentary completeness, confuse uncertainty with failure, or conceal inconsistent treatment beneath numerical scores. This chapter develops an analytically rigorous and professionally operational account of external quality assurance with Rwanda as the principal regulatory context and selected African systems as bounded comparators. A purposive critical synthesis of official instruments, continental quality-assurance standards, assessment and argumentation scholarship, and the author's prior doctoral framework differentiates institutional authority, programme-level readiness, actual educational effectiveness and decision-making competence. It examines regulatory provenance, accreditation dossiers, evidence reliability, peer-review integrity, curriculum and resource appraisal, digital and AI-enabled provision, findings classification, procedural fairness and post-accreditation verification. Its principal contribution is a fully specified application of the Evidence-Traceable Accreditation Judgement (ETAJ) model within Integrated Evidence-Traceable Quality Governance (IETQG). An original toolkit comprising an authority register, evidence register, evaluator worksheet, claim-evidence-warrant matrix, findings guide, calibration exercise, model report and condition-closure record translates the model into auditable practice. Four constructed review scenarios illustrate contradictory curriculum documents, untested learning systems, staffing fragility and invalid assessment claims. ETAJ is a reason-giving architecture, not a substitute for binding HEC requirements or an independently validated decision instrument. Credible external assurance demands both evidence capable of sustaining a finding and lawful, proportionate decisions capable of withstanding informed challenge.

Keywords: external programme review; accreditation; evidence-traceable judgement; Rwanda Higher Education Council; regulatory provenance; Toulmin argumentation; programme implementation readiness

9.1 Introduction: Accreditation as public accountability and professional judgement

A programme may arrive before an external review panel with an attractive title, signed internal approvals, a complete course catalogue, carefully formatted module descriptions and an institutional assertion that all requirements have been met. On closer examination, the programme specification and the module register may disagree about credits and progression; the learning-management system may contain only empty course shells; or lecturers named in the submission may have no demonstrated availability to teach the proposed timetable. The question is not whether the dossier looks complete. It is whether the institution can legitimately offer the claimed qualification, deliver its educational promise to the proposed learners, assess achievement at the stated level and sustain these arrangements over the relevant programme lifecycle. The corresponding obligation on the reviewer is to demonstrate, rather than merely announce, why the available evidence supports a favourable, qualified or adverse judgement.

The preceding chapter located quality assurance within continuous institutional responsibility. It explained how monitoring, moderation, student feedback, corrective action and verified enhancement should enable universities to know what is happening between formal visits. External review introduces a different accountability relationship. The institution must make its assurance claims inspectable to evaluators who are not responsible for producing them, while the authorised public body must distinguish the panel's

professional advice from its own lawful decision. This separation safeguards independent scrutiny but also creates a risk of external judgement that misunderstands context, privileges superficial conformity or treats a brief visit as proof of sustained implementation. A credible process must therefore join institutional evidence, expert interpretation, transparent criteria and procedural fairness (Beerkens, 2018; Harvey & Williams, 2010; Higher Education Council [HEC], 2021).

External programme review is understood in this chapter as a structured, criteria-referenced inquiry by appropriately appointed persons who examine a particular academic programme's design, resources, readiness, enactment or outcomes. Accreditation is the status-conferring or regulatory decision, where applicable, made by a competent authority under the rules governing its jurisdiction. Review, recommendation and decision should not be used interchangeably: a panel's report does not itself create a right to offer a degree unless the relevant legal arrangements confer that effect. Nor should the presence of an institutional approval be mistaken for programme authorisation, professional licensure or recognition of a qualification abroad. These distinctions are fundamental to lawful communication with students and to the defensibility of official decisions (Republic of Rwanda, 2026; HEC, n.d.-a).

The chapter makes the argument that accreditation is a form of *defeasible practical judgement*. Evidence supports conclusions provisionally and to a degree, in relation to authoritative requirements and the justified purposes of the review; contrary evidence, missing records or changed circumstances may alter the conclusion. The argument is developed through a critical realist distinction among reported intentions, observed enactment and the underlying capabilities that make continuing performance possible, and through an adaptation of Toulmin's account of claims, data, warrants, backing, qualification and rebuttal (Toulmin, 2003; Sangwa, 2026). It culminates in the Evidence-Traceable Accreditation Judgement (ETAJ) model, developed in the author's doctoral work and operationalised here for the first time as a complete professional suite of linked records.

The analysis is a purposive critical documentary synthesis, not an independently conducted field evaluation or a systematic review with reproducible screening totals. The source base includes the approved master book architecture, the preceding completed chapters, the 2026 thesis, published Rwandan legal and HEC instruments identified through the official Council website, the African Standards and Guidelines for Quality Assurance (ASG-QA), the 2015 European Standards and Guidelines (ESG), relevant comparator-agency material and established scholarship on educational quality, institutional legitimacy and argument-based validation. Sources are selected for normative authority, conceptual relevance or the capacity to challenge an intuitive conclusion. Documentary publication verifies the existence and stated content of a rule or professional proposal; it does not establish that any particular institution complies. No new interviews, institutional case studies, peer-panel observations, confidential accreditation records, database-screening counts or measured improvement effects are claimed. Every institution and numerical value in the worked illustrations is explicitly hypothetical. The instruments require authority-specific adaptation before official use.

9.2 The purposes, philosophical foundations, and limitations of external quality assurance

External quality assurance serves several distinguishable purposes. It protects learners and the public from unsupported educational promises; tests whether qualifications satisfy applicable academic and professional expectations; informs legitimate accreditation, monitoring and recognition decisions; and may encourage institutions to investigate weaknesses their routine internal systems have normalised. It can also support comparability, public information, improvement and confidence among universities, employers and regulators. Yet each purpose implies different evidence and different consequences. A licensing review asks whether minimum conditions for lawful entry are satisfied; an enhancement review asks what an already functioning programme could improve; and a post-incident investigation may prioritise immediate learner protection and verified remediation. Treating these different inquiries as one universal scoring exercise obscures their reasons for existing (HAQAA Initiative, 2018; European Association for Quality Assurance in Higher Education et al., 2015).

A philosophical tension runs through external review. Quality as conformance presupposes publicly legitimate criteria that can be applied consistently, whereas quality as transformation or intellectual formation requires judgement about educational purposes and effects that are not entirely reducible to an inspection checklist. Harvey and Green (1993) established that competing conceptions of higher-education quality produce competing forms of evaluation. A panel focused only on conformity may confirm that the institution has a moderation policy without examining whether moderation protects the standards actually represented by a degree. A panel focused only on professional intuition may instead introduce unpublished personal preferences that universities cannot reasonably anticipate. The defensible middle position is to anchor regulatory findings in operative criteria while making interpretation of academically open-ended terms explicit and contestable.

Institutional theory provides a further corrective. Formal structures can signal legitimacy without being integrated into practice; pressures to conform can encourage institutions to reproduce recognisable quality-assurance language and templates, even when these do not govern routine teaching or resource decisions (Meyer & Rowan, 1977; DiMaggio & Powell, 1983). The warning applies equally to accreditation agencies. An evaluator who assumes that a completed template proves enactment may unintentionally reward ceremonial conformity. Nevertheless, the critique is not a reason to discard documentation. Written programme approval, academic regulations, curriculum matrices, staffing contracts and accessible student information are essential forms of institutional accountability. Their evidentiary significance must be bounded: a policy proves a policy exists; a verified implementation record may demonstrate that some aspect of the policy was enacted; repeated samples and credible monitoring may support a stronger claim of institutional capability.

A critical realist reading explains why these distinctions are more than procedural preferences. The actual capacity to deliver a qualification depends upon structures and relations that are not fully observable in a brief review: staff workload, informal decision rights, student preparedness, financial commitments, professional supervision and technology dependencies. Reviewers observe selected documents, practices and outcomes and then infer, with varying degrees of confidence, whether the relevant conditions exist. Because universities operate as open systems, observed pass rates or graduate employment do not identify one cause without considering other influences. Similarly, a successful laboratory demonstration does not independently establish capacity across all cohorts. External review should therefore recognise inferential uncertainty rather than convert partial observation into an unqualified claim about reality (Sayer, 2000; Sangwa, 2026).

Evidence-based regulation also has important limits. Beerkens (2018) argues that strong causal impact evaluation of quality-assurance regimes is difficult and that evidence informs professional and policy judgement through several imperfect channels. Review visits can be expensive, intrusive and administratively burdensome; published criteria can become obsolete; peer reviewers can disagree; institutions with stronger administrative capacity can assemble more persuasive documents; and standardisation can undervalue legitimate academic or disciplinary difference. External scrutiny can improve transparency and trigger reform, but neither a favourable decision nor an elaborate process is proof that the intervention caused better student learning. A mature agency should therefore review the performance of its own procedures, invite scrutiny of difficult decisions and remain proportionate in what it asks institutions to produce.

The ASG-QA offers a continental reference for internal assurance, external assurance and agencies, encouraging transparency, stakeholder involvement, structured review and improvement. The ESG supplies another professionally influential comparison, especially on explicit criteria, expert panels, reporting, complaints and appeals. Neither can replace a Rwandan legal requirement simply because it is widely cited internationally. Their principal contribution here is to help identify functions worth testing, while Rwanda's applicable legal and regulatory instruments determine binding authority (HAQAA Initiative, 2018; European Association for Quality Assurance in Higher Education et al., 2015).

The distinction between an *audit trail* and a *quality outcome* is especially significant for regulators whose decisions will affect students. A trail of approved procedures can show that an institution has formal arrangements for examining programmes; it may not reveal whether academic decision-makers challenge low-quality assessments or correct unsafe practical arrangements. Conversely, a small number of well-chosen learning artefacts may reveal an educational concern that a voluminous self-evaluation has overlooked.

Effective external assurance should therefore connect a credible minimum-evidence threshold with an independent check of how the institutional system works, rather than maximise document volume. This approach is particularly appropriate where institutions face limited quality-assurance budgets and many programmes require review (Beerkens, 2018; Ansah, 2015).

9.3 Institutional accreditation, programme accreditation, audits, and periodic external review

Institutional accreditation assesses questions pertaining to the legitimacy, capacity or quality systems of the provider as a whole, whereas programme accreditation focuses on a specific award, curriculum, field, qualification level, site or approved delivery arrangement. An institutional audit usually examines how organisational systems protect and enhance quality, potentially without making a separate accreditation decision for every programme. Periodic programme review may be institutionally commissioned, undertaken by a professional body or required by a regulator, and may occur independently of a fresh licence. The labels differ by jurisdiction. Rwanda's HEC accreditation webpage, for example, uses institutional accreditation in connection with definitive operating arrangements for certain private providers; the precise legal effect of any activity must be read from the current authoritative instrument rather than deduced from the word *accreditation* alone (HEC, n.d.-a).

The unit of analysis determines what counts as adequate evidence. An institution-wide audit may reasonably examine central budgeting, governance, staff-development policy and quality-management information systems. A programme review must ask whether those capabilities have actually been allocated to the specific provision. An institution can possess a library subscription without granting students in a particular programme the relevant electronic access, and can employ many doctoral-qualified academics without allocating sufficient qualified supervision to a new doctoral pathway. Conversely, excellence in one programme does not license an inference that all other programmes, campuses and modalities are equally effective. Accreditation reports should state precisely whether findings concern the institution, an award, an intake, a delivery mode, a site, a professional specialisation or a particular stage of implementation (Sangwa, 2026).

Timing adds a second distinction. Initial review must make a forward-looking judgement under uncertainty, often relying on approved designs, committed resources, rehearsed processes and credible implementation plans. A renewal or re-accreditation review may reasonably demand several cohorts of assessment, progression, graduate outcomes and corrective-action records. Major programme modification requires attention to what has changed and whether prior approval or assurances remain applicable. Monitoring of an established programme should not permit continued reliance on documents that might once have been acceptable for a proposed programme but no longer establish current delivery. The strength and type of evidence should mature as students enrol and graduate.

African comparators illustrate these functions without establishing a single continental regulatory arrangement. Kenya's Commission for University Education publishes academic-programme standards and peer-review evaluation tools. Ghana's Tertiary Education Commission publishes information on accreditation and refers users to an accreditation roadmap; that official material supplies a comparator for institutional and programme oversight without justifying assumptions about a particular case record. South Africa's Council on Higher Education maintains distinct programme accreditation and institutional audit functions under the Higher Education Quality Committee. These official descriptions support a bounded comparison of functional needs, particularly source identification, programme evidence, peer scrutiny and a competent decision body. They do not authorise a Rwandan panel to apply Kenya's timetable, Ghana's appeal deadlines or South Africa's accreditation categories (Commission for University Education [CUE], n.d.; Ghana Tertiary Education Commission [GTEC], n.d.; Council on Higher Education [CHE], 2004).

Table 9.1

External review purposes and the limits of inference

Review object	Primary question	Strongest appropriate evidence	Inference to avoid
Institutional status	Is the provider lawfully authorised and adequately constituted?	Official authorisations; governance and resources; relevant site verification	Assuming every programme and modality is consequently approved
Proposed programme	Is the award defensible and sufficiently ready for the proposed intake?	Current specifications; aligned assessments; named and committed staff; configured facilities	Treating promises or procurement intentions as tested capacity
Established programme	Does delivery sustain standards and learner protection?	Assessed work; moderation; cohorts; implementation and corrective-action records	Inferring learning from completion or student satisfaction alone
Institutional audit	Do institutional assurance arrangements function and improve provision?	Decision trails; sampled programmes; independent challenge; verified closure	Confusing an approved IQA policy with effective assurance
Professional or specialist review	Are field-specific competencies and safeguards adequately supported?	Practice logs; supervision; safety; specialist accreditation criteria	Assuming general programme approval substitutes for professional permission

Note. Original synthesis by the author. Categories can overlap. Legal effects depend upon the relevant jurisdiction and instrument.

A useful comparative distinction concerns what may legitimately be transferred between jurisdictions. Kenya's disciplinary standards, Ghana's accreditation roadmap and South Africa's separation of programme criteria from institutional audits demonstrate that agencies must coordinate standards, evidence and competent decision-makers. They do not establish identical powers, thresholds or routes of redress. Comparability is therefore better understood as *functional intelligibility*: a Rwandan reviewer should be able to explain the function served by a foreign process and identify a relevant domestic analogue, while declining to import any unincorporated rule. This reduces two opposite errors, namely insulating domestic review from helpful international experience and treating international resemblance as evidence of lawful domestic authority (HAQAA Initiative, 2018; Council on Higher Education, 2004).

9.4 Establishing regulatory authority, criteria, applicability, and the current status of requirements

The first duty of a reviewer is not to request evidence but to establish what must be demonstrated and why the panel is entitled to require it. In Rwanda this starts with the governing legal and institutional architecture, not an inherited checklist. Presidential Order No. 044/01 of 24 July 2026, published in the Official Gazette on 30 July 2026, governs HEC's contemporary responsibilities, including programme and curriculum approval, standards, monitoring and technology-related oversight. Its repealing provisions must be read carefully: the 2020 presidential order is not an interchangeable substitute for the 2026 mandate. Law No. 010/2021 on the organisation of education, Ministerial Order No. 003/MINEDUC/2021 determining the qualifications framework, relevant standards and operative HEC instruments provide additional sources for particular questions (Republic of Rwanda, 2021a, 2021b, 2026).

An authority register should record the issuing body, precise title, version, date of issue, commencement where relevant, publicly accessible source, specific applicable clause, regulated object, intended decision and any uncertainty about scope. It should also record whether the material is legislation, a binding delegated instrument, an official evaluation standard, operational guidance, an institution's own undertaking or a voluntary professional benchmark. Classification must follow enabling authority and legal effect, not simply document titles. A regulator's webpage may remain useful for procedure but may retain older terminology; a newer upload date does not prove that the text was newly enacted. Reviewers should confirm supersession, transitional provisions and any material conflicts before elevating a sentence into a finding of non-compliance (HEC, n.d.-b; Republic of Rwanda, 2026).

Applicability is narrower than thematic relevance. An academic requirement may govern all higher learning institutions, only certain awards, new providers, distance programmes, specialist disciplines or activity undertaken after a specified date. A professional body's requirements may concern eligibility for practice rather than the institution's academic authority to award a degree. A foreign benchmark can assist in explaining an educational rationale while remaining nonbinding domestically. Reports should identify the legal status of each criterion, especially where a reviewer recommends action affecting admission, delivery, accreditation, qualification recognition or public communication. Uncertain applicability should be referred to an authorised officer for clarification rather than silently resolved through panel preference.

A practical safeguard is an *authority pause*. When the panel cannot establish that a proposed binding criterion is operative and applicable, it records the educational concern, seeks documentary or official clarification and avoids describing it as a proven statutory breach. Academic concerns do not disappear during this pause: the reviewer may explain why a design appears weak, ask for evidence under an applicable general criterion or identify an enhancement recommendation. But regulatory consequences should not rest on an undisclosed normative foundation. This distinction protects academic standards while also protecting universities against arbitrary expansion of review powers.

Table 9.2

Proposed normative-provenance and applicability register

Field	Required entry	Verification question
N-ID and source	Identifier; official title; issuer; stable URL	Can the original authoritative text be recovered?
Source status	Law, order, standard, procedure, guidance, benchmark	What confers authority, and for what purpose?
Date and version	Publication, effective date, amendment, review date	Is the provision operative for this cohort and review?
Scope	Qualification, modality, institution, programme, site	Does the requirement genuinely govern the claim?
Criterion	Exact clause or accurately recorded provision	Is the criterion specific enough to evaluate fairly?
Required evidence	Original minimum evidence or justified interpretation	Has professional advice been mistaken for a legal obligation?
Uncertainty and resolution	Open question, consulted authority, response	What remains unsettled before a binding finding?

Note. Original professional register. In an actual review the full official source and current version must be captured, not inferred from this model table.

Regulatory provenance requires a documented decision rule when sources appear inconsistent. A defensible reviewer first checks whether the instruments truly regulate the same action, then considers their dates, legal hierarchy, express amendment and repeal provisions, transition rules and any delegation under which technical standards were issued. Apparent inconsistency can arise because one instrument governs an institution, another a delivery modality and a third the professional practice for which a degree prepares graduates. Where the competent authority's interpretation is required, the case register should identify the question submitted, the date and capacity of the responding official, the response as received and any material limits. Informal telephone advice should not be converted into a universally binding rule without a confirmable legal basis. The object of this procedure is not to make every evaluator a legal adjudicator but to make the point at which academic expertise ends and authoritative interpretation begins both visible and safe.

9.5 Understanding accreditation dossiers, programme specifications, and institutional evidence

An accreditation dossier should permit a competent evaluator to reconstruct the programme as one coherent educational undertaking. It normally includes a proposal explaining educational need and graduate purpose; a programme specification identifying the award, mode, qualification level, credits, delivery duration, admissions, intended outcomes and progression; a complete module register and module descriptions; curriculum and assessment maps; institutional and external approval records; personnel and workload plans; resource and financial commitments; learner services; and applicable professional or partnership arrangements. For established provision, the dossier should increasingly include cohort, assessment, moderation, learner-support, programme-review and corrective-action evidence. The precise mandatory set is determined by applicable HEC procedures and the particular review brief, not by this descriptive inventory (HEC, n.d.-a, n.d.-b).

Programme proposal forms, programme specification forms and module description forms have different evidentiary functions. The proposal justifies why the institution should offer the qualification; the specification defines the authoritative programme-level promise; the module documents explain how individual parts contribute to it. Reviewers should reconcile these against a version-controlled master register rather than assume that repeated information is consistent. An easily overlooked defect occurs when an approved programme specification states one credit total, a timetable implies another, and several module descriptions have earlier codes or inconsistent year and semester labels. Such contradictions can affect qualification level, student workload, progression, graduation eligibility and the accuracy of institutional information. A dossier index should therefore contain cross-references and identify the controlling approved version of each artefact.

The credibility of a dossier depends partly upon its provenance. A curriculum committee minute establishes that a decision was recorded, not necessarily that the approved version is the one uploaded for inspection. A signed contract may demonstrate a lecturer's employment but not the hours reserved for the programme. A screenshot may establish that a platform page existed, not that students could access a functioning course or that an assessor has tested it. Documentary handling should therefore preserve document owner, creation date, approval status, version, relevant cohort, evidence custodian and relationships with other records. Where the evaluator requests sensitive examination scripts, learner cases or personnel documents, lawful access, minimisation, confidentiality and secure retention should shape the request.

A useful dossier has two levels. The principal narrative presents educational design and institutional argument without forcing reviewers to reconstruct it from hundreds of attachments. The evidence index then identifies the exact record supporting each material assertion. That architecture reduces administrative duplication while strengthening traceability. Instead of uploading multiple inconsistent curriculum spreadsheets, the institution should provide one authorised register and preserve older versions in a controlled archive. It should disclose unresolved discrepancies rather than hide them. Transparent acknowledgement of a deficiency, accompanied by a responsible and verifiable correction plan, is often more useful to professional evaluation than a superficially faultless narrative.

The practical preparation of a dossier warrants a controlled submission protocol. An institution should identify its academic owner, establish a definitive submission date, place programme proposal forms, programme specification forms and module descriptions under explicit revision control, and maintain a change log explaining all post-submission corrections. Review secretariats should then issue a receipt identifying the version accepted for review, missing documents and the mechanism for requests for clarification. A site visit should not become an invitation for uncontrolled replacement of material documents, because a new document may change the claim the panel originally evaluated. Material late evidence should instead receive a dated addendum, an opportunity for panel reconsideration and, where applicable, an institutional response. This discipline is consistent with fairness to both the institution and other applicants, since the review must be able to distinguish an error corrected before judgement from a capability acquired only after an unfavourable observation.

9.6 Evidence quality: Authenticity, relevance, currency, completeness, sufficiency, and corroboration

External review depends upon an epistemic discipline: evidence is valuable only in relation to the proposition it is used to support. Authenticity asks whether a record is genuine and attributable to the represented authority or process. Relevance asks whether it bears on the criterion and programme claim. Currency concerns whether its date and condition match the review period. Completeness asks whether necessary components and contrary material are present. Sufficiency asks whether the evidence, considered as a whole, justifies the strength of the intended conclusion. Corroboration asks whether independent or complementary sources support, qualify or challenge it. These attributes interact, but they cannot sensibly be compressed into a raw document count (Toulmin, 2003; Kane, 2013).

The appropriate test depends upon the evidence type. An approved academic regulation is particularly useful for establishing the intended rule; a sample of examination papers and scripts is more relevant to its enactment. A staff list can establish a claimed resource inventory, while signed workload allocations, teaching records and direct verification are more informative about programme-specific availability. A simulated student account can test whether an online module works as configured; a lecturer's demonstration alone may not reveal what a real learner can access. Financial statements, budgets, vendor contracts and contingency plans can illuminate sustainability, but their inference differs according to whether they are audited historical records, approved allocations or optimistic projections. Review should make these limits visible.

Evidence should be triangulated by function, not multiplied decoratively. Two reports copied from the same unverified spreadsheet do not constitute independent corroboration. A timetable, employment letter and staff interview may together illuminate availability, yet all three can remain inadequate if the lecturer's simultaneous obligations elsewhere are unknown. Similarly, a high overall pass rate can be consistent with effective teaching, grade inflation, weak tasks or selection effects. Examination scripts, rubrics, external moderation and student progression provide more discriminating evidence. Where a material conflict occurs, an evaluator should seek the most directly probative underlying record rather than average inconsistent claims.

Sampling must be proportionate and explicit. A panel can rarely inspect every assessment, cohort, contract or student-service record. Its report should specify sampling logic, period, inclusion criteria, known omissions and constraints on generalising beyond inspected examples. Risk-sensitive purposive sampling is often suitable where resources are limited, but it should deliberately include a range of modules, achievement levels, locations and delivery modes rather than only exemplary materials selected by the institution. Anomalies should prompt follow-up or expansion where proportionate. Absence of evidence must also be interpreted carefully: nonproduction after a clear and feasible request may justify a finding of *not demonstrated*, whereas the reviewer should not infer a substantive failure from an inaccessible system caused by the reviewer's own permissions or from an undefined request.

A privacy and security boundary is essential. Accreditation does not provide an unrestricted entitlement to personal student files, clinical records, confidential disciplinary allegations, research data or proprietary technologies. Rwanda's personal-data legislation and relevant institutional obligations require attention to lawful purpose, access and protection. De-identified assessment samples, controlled demonstrations and restricted panel access can often establish the required fact without unnecessary disclosure. Where direct inspection is indispensable, the review arrangement should specify authorisation, custody, confidentiality and disposal. Evidence traceability should protect learners, not create a permanent uncontrolled archive of sensitive information (Republic of Rwanda, 2021c).

Table 9.3

Evidence appraisal: What a record can and cannot establish

Evidence class	Legitimate use	Verification method	Typical overclaim

Evidence class	Legitimate use	Verification method	Typical overclaim
Normative document	Applicable rule or institutional intent	Official source, approval, version	Treating policy as implementation
Allocation record	Programme-specific staffing, finance or facility commitment	Authorised budget, agreement, workload reconciliation	Assuming resources are available without conflict
Operational demonstration	Configured and functioning service or practical arrangement	Test account, live transaction, representative scenario	Inferring reliability from a single staged demonstration
Educational artefact	Assessment demand or student performance	Sample scripts, marking criteria, moderation, authenticity	Inferring graduate competence from polished artefacts alone
Monitoring dataset	Pattern meriting inquiry	Definitions, denominator, exclusions, triangulation	Treating aggregate rates as causal proof
Stakeholder testimony	Context, experience and plausible discrepancy	Diverse and protected participation, documentary checking	Treating anecdote as prevalence estimate

Note. Original analytical classification. Evidence sufficiency is claim-dependent and does not follow a universal numerical threshold.

Table 9.4

Model programme evidence register with claim-level traceability

Evidence ID and item	Assertion supported	Provenance and period	Verification, limit and next action
E-01: signed programme specification	Award structure and intended outcomes	Senate-approved version; date and cohort recorded	Match credits and module codes against PPF, PSF, MDFs and master register
E-02: lecturer allocation record	Staff available for first intake	HR-controlled allocation and contractual period	Check qualifications, concurrent commitments, teaching load and contingency
E-03: learner-role LMS test	Required first-term modules accessible	Live restricted demonstration; platform version and test date	Record user role, device, failed steps and whether first cohort is covered
E-04: assessment blueprint	Award-level achievement can be assessed	Approved tasks, rubrics and moderation schedule	Inspect construct coverage; prospective evidence cannot prove graduate attainment
E-05: cohort monitoring sample	Enacted provision and improvement	Defined academic year, source system and extraction date	Verify denominator, exclusions, de-identification and cross-check with work samples

Note. Original illustrative register developed for this chapter. Every entry in a real review should also store record custodian, access restrictions, version history, related criterion and claim identifiers, disconfirming records and a time-stamped reviewer disposition. The sample rows are not a completed institutional audit.

An evidence register is useful only when it remains a retrieval system rather than another ceremonial inventory. The reviewer should be able to move from a finding to a claim identifier and then to the original controlled record without relying on memory or hidden files. Where one document supports several claims, those relationships should be separately recorded because its probative force may differ in each context. Where a revised version corrects an error, both the earlier and revised record should remain distinguishable in the secured case file. This protects the institution from reliance on superseded evidence and the reviewer from silently accepting a replacement without examining the consequences. When privacy rules restrict access, a controlled evidence pointer and verification statement can be more appropriate than embedding a confidential source document in a widely distributed report.

9.7 Distinguishing documentary completeness from programme implementation readiness

Documentary completeness and implementation readiness are separate judgements, although both matter. Completeness means that the materials requested for a defined procedure have been submitted and can be located. Readiness means that a specified programme, in its intended mode and for its intended cohort, is

sufficiently able to begin and maintain academically defensible provision. A complete dossier can contain an untested timetable, a proposed laboratory yet to be equipped, lecturers whose workload cannot accommodate the modules assigned, or assessment arrangements that have never been moderated. Conversely, a programme with genuine operational strengths may present inconsistent or poorly organised evidence and need to improve its assurance records. External review should identify which defect is present rather than treating every missing or contradictory item as the same kind of weakness (Sangwa, 2026).

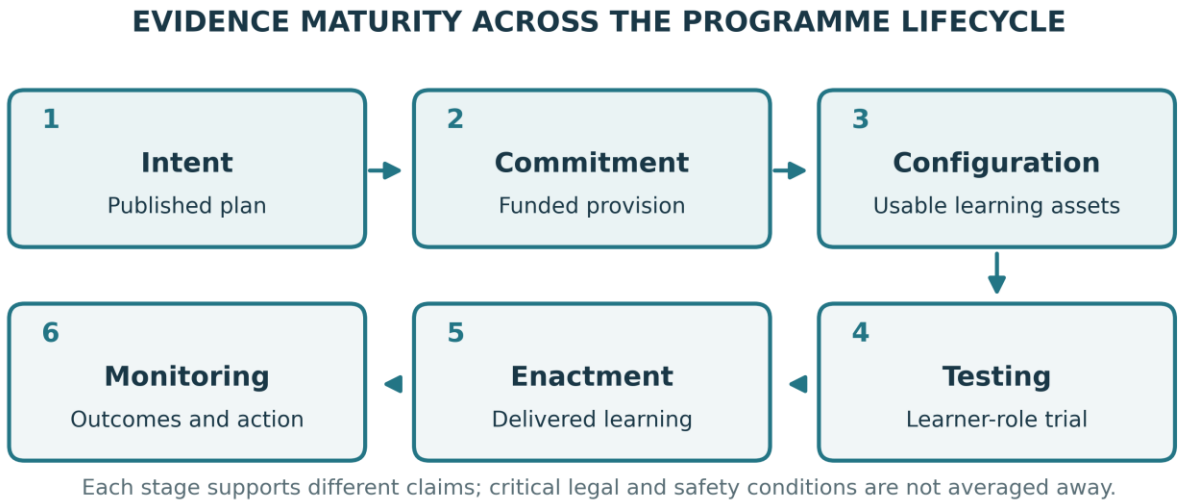
Readiness has a temporal and contextual meaning. Before a programme opens, a reviewer cannot demand three cohorts of graduate outcomes, but may reasonably require a coherent curriculum, lawful approvals, accessible learning environments, committed staff, testable systems and sufficient financial planning. At the point of first enrolment, the institution should demonstrate that the actual modules offered, assessment protocols, student information, academic advising and relevant facilities are in place. Once a programme has been operating, its claim must be supported increasingly by enactment: completed teaching schedules, assessment samples, moderation, learner experiences, placement records and corrective-action evidence. This sequence does not make evidence weaker by design; it makes demands appropriate to what can legitimately be known at each stage.

Readiness also differs from general institutional capability. A university may have a sound procurement function and a reliable information technology department but not yet have licensed specialist software or configured a student-facing course for a particular degree. The institutional capacity gives plausible backing for future provision but does not establish programme-specific configuration. For practical and professionally regulated disciplines, the relevant test may be especially unforgiving. A university's general partnership with a hospital does not establish sufficient supervised placements for a particular cohort. A memorandum of understanding may indicate intention but not capacity, timetable, eligible supervision or safety. Essential practice learning should not be approved on the assumption that a host will somehow find additional space when students arrive.

A useful evidence-maturity continuum distinguishes intention, commitment, configuration, tested operation, enacted provision and monitored effectiveness. The categories are not universal accreditation stages or a substitute for national criteria. They identify increasingly demanding types of claim. A proposal saying that an LMS will be acquired is an intention; a procurement contract is a commitment; populated and access-controlled courses are configuration; a successful representative learner journey is a test; real coursework and marked submissions show enactment; longitudinal service records and corrective action help assess sustainable effectiveness. Evidence should meet the threshold warranted by the programme lifecycle and the risk of the activity, not whichever stage the dossier happens to describe most favourably.

Figure 9.1

Programme evidence maturity across the accreditation lifecycle



Note. Original proposed process map by the author. The progression represents increasing evidentiary expectations, not a claim that every programme follows a fixed causal trajectory. Material safety and legal thresholds remain non-compensatory at every stage.

A material readiness defect should be expressed as a precise gap between an essential undertaking and the strongest verified evidence presently available. For example: "The institution has supplied an LMS procurement agreement, but the proposed first-semester modules have not been configured and a representative learner-access test could not be completed." This is stronger than the vague allegation that the institution "lacks e-learning capacity." It explains what was examined, what remains uncertain and what evidence could resolve the concern. Where appropriate law and procedure allow conditional progression, the panel can propose a pre-enrolment verification requirement rather than speculate about eventual performance. Where a critical learning or safety condition is absent, delaying the relevant activity may be more defensible than approving it subject to a distant documentary report.

Prospective readiness should also be tested under adverse but foreseeable conditions. A programme with a viable single specialist lecturer should demonstrate how core teaching, assessment and supervision would continue during absence; a distance programme should identify the recovery route when the LMS or contracted internet service is unavailable; a laboratory programme should distinguish alternative teaching activities from competencies that cannot safely be certified without its equipment. These are not demands that an institution eliminate every risk before approval. Rather, they ask whether decision-makers have considered interruption pathways that would materially affect the advertised qualification and have funded practical responses. This establishes a natural boundary between the present chapter's accreditation-readiness test and the subsequent chapter's treatment of systemic resilience.

9.8 Adapting Toulmin's model of argumentation to accreditation reasoning

The transition from evidence to finding is the most consequential and least visible part of many reviews. A checklist typically records a criterion and a judgement, sometimes with a score, but omits the reason why the observed record establishes compliance or failure. Toulmin's model offers a useful explanation of ordinary practical inference. A *claim* is the proposition being advanced; *data* provide supporting grounds; a *warrant* explains why the data bear on the claim; *backing* supports that inferential rule; a *qualifier* indicates its strength and scope; and a *rebuttal* identifies circumstances under which it may fail (Toulmin, 2003). Unlike a purely deductive proof, such reasoning attends to context, disciplinary conventions and the defeasible character of real-world judgements.

Accreditation requires an adaptation because the panel does not begin with a free-standing claim alone. It begins with *normative authority*: a lawful or otherwise appropriately adopted evaluation criterion that makes the issue reviewable. The university then makes a programme claim, offers evidence, and is exposed to

verification. The reviewer must state the warrant that connects this evidence to the standard and the particular assertion. For example, a university may claim that all graduates achieve a specified analytical competence, supported by a capstone rubric. The warrant cannot simply say "a rubric exists"; it must explain that relevant tasks elicit the competence at the required level, student performance has been judged against clear criteria and moderation provides adequate confidence in the interpretation. A rubric without student work may support design readiness, but not demonstrated graduate achievement (Kane, 2013; Biggs, 1996).

The analogy with argument-based validation is instructive but bounded. Kane (2013) argues that validity concerns proposed interpretations and uses of test scores, and that an inference chain must withstand scrutiny. External programme review similarly interprets documents, demonstrations and educational outcomes before recommending consequential action. Yet accreditation is not merely a psychometric problem. Its rules arise from public authority, administrative law, professional standards and institutional rights, not only from measurement theory. The validity of an educational inference does not confer legal power on the reviewer, and legal authority alone does not establish the epistemic strength of a finding. The relevant innovation is to keep normative, epistemic and regulatory justification connected without confusing them.

Consider an illustrative claim: "The Bachelor of Applied Data Science is ready to assess independent research competence." A submitted research-methods module description and a draft dissertation rubric offer relevant evidence. The academic warrant would need to explain the relationship between the required inquiry competence, planned learning opportunities, assessment demand, qualified supervision, research ethics and moderation. The panel should then ask whether supervision is allocated and whether students can actually access research resources. If no approved assessment brief exists, the correct finding may be *not yet demonstrated* rather than an assertion that teaching has failed. If the submitted rubric assesses only recollection of statistical terminology, the panel may instead establish a positive design deficiency: the proposed assessment does not measure the claimed research competence.

Argumentation therefore strengthens the reviewer in two ways. It requires the assessor to make implicit standards visible, including the basis on which professional expertise is exercised. It also creates a place for disconfirming evidence. The claim might be substantially supported by capstone design, yet contradicted by missing supervisors or inaccessible datasets. Without rebuttal analysis, a confident narrative can survive simply because an evaluator has focused on a favourable subset of the dossier. The aim is not to produce cumbersome legalistic prose for every criterion. Reviewers can use concise, structured statements for routine matters and longer reasoning for serious, disputed or precedent-setting findings.

9.9 Claims, evidence, evaluative warrants, counter-evidence, qualifiers, and findings

A reviewable claim must identify the academic object, quality attribute, relevant population, time and level of assurance. "The programme meets all requirements" is too broad to test directly. "All first-year students in the proposed blended programme can access required learning materials through the approved platform before the first teaching week" is much more specific. It identifies a cohort, medium and practical condition; it can be checked through authenticated student accounts, content mapping and representative device testing. The claim should also indicate whether it concerns a current state, a prospective commitment or measured performance. When the claim changes during the review, the reason and associated evidence version should be retained.

Evaluative warrants should explain the rule of inference, not repeat the claimed conclusion. If the relevant standard requires suitable academic staffing, the statement "staffing is adequate because the staff list is adequate" is circular. A defensible warrant might explain that named faculty members possess qualifications and field expertise appropriate to the assigned modules, have binding appointments and feasible workloads, and are supported by succession or contingency arrangements proportionate to the proposed intake. Its backing may include the operative HEC staffing expectations, the qualifications profile of the award and credible disciplinary norms. The reviewer then tests contrary evidence such as duplicate assignments to full-time programmes or contracts expiring before the relevant module begins.

Uncertainty should be described precisely. A missing record is not always evidence that an activity never occurred. An observed defect is not always isolated: a failed inspection of two central modules may justify broader inquiry but not a claim that every module fails. A qualifier can describe the confidence, scope and lifecycle limits of a finding: "The available evidence supports prospective adequacy for the first cohort, contingent upon inspection of the completed specialist laboratory before practical classes commence." The statement neither overclaims proven long-term capability nor understates the need for a controlled pre-use check. Where an adverse judgement is supported by a directly verified failure, the qualification should not weaken that finding artificially.

Table 9.5

Model claim-evidence-warrant-rebuttal record

Review element	Illustrative entry for a hypothetical programme
Authority and criterion	Applicable qualification-level and assessment standards, version verified in the case record
Institutional claim	Capstone assessment will demonstrate independent analysis at award level
Evidence supplied	Programme outcomes map; capstone brief; draft rubric; staffing allocation; moderation policy
Verification	Map consistent, rubric inspected; supervisor workload not yet reconciled
Evaluative warrant	Valid inference requires suitable tasks, criteria, qualified supervision and moderation
Rebuttal or gap	An unreconciled supervision allocation may make assessment delivery infeasible
Qualifier	Educational design appears plausible; programme-specific operational capacity remains undemonstrated
Finding and remedy	Partially demonstrated; obtain verified staff allocations before the approved launch threshold

Note. Original constructed illustration, not an institutional finding or a statement of HEC-approved conditions.

Finding categories should distinguish at least four situations: demonstrated conformity, conformity supported only with material qualification, insufficient evidence to decide, and demonstrated deficiency. An additional *not applicable* category may be used where a criterion genuinely does not govern the programme, with the normative reason recorded. These categories are explanatory tools, not official Rwanda decision labels. "Not demonstrated" is especially important because proof and reality must not be conflated. An institution may eventually produce evidence that a service is operating; the review at that moment does not justify claiming the service is absent simply because verification was incomplete. Conversely, a verified absence of supervision or a design that fails an essential standard is not merely a paperwork omission.

A finding must be reviewable at two levels. Another expert should be able to understand the evidence, warrant, contrary material and conclusion. A decision-maker should also be able to identify the finding's significance, the rule under which it matters and the lawful responses open to the competent authority. Those two tests protect against different errors: intellectually weak findings supported by strong procedural language and intellectually strong observations that exceed the regulatory scope of the review. ETAJ makes both visible rather than treating the assessor's professional reputation as sufficient reason for deference.

To make the reasoning operational, the evaluator can draft a *falsification question* for each consequential institutional assertion. If a university claims that every essential outcome is validly assessed, which omitted outcome, invalid task or unmoderated assessment would disconfirm that assertion? If it claims sufficient clinical-placement capacity, what evidence of competing bookings, supervisor qualifications, patient-safety limits or absent agreements would defeat that conclusion? Framing questions in this way does not imply adversarial suspicion. It prevents confirmation bias by obliging the reviewer to search deliberately for the kinds of information that could change an apparently favourable finding. The panel should record what counter-evidence was sought, what was found and which reasonable checks were infeasible, so that apparent absence of rebuttal is not mistaken for evidence of thorough examination.

9.10 Reviewer expertise, independence, conflicts of interest, calibration, and consistency

Peer review derives much of its value from expert interpretation. Evaluating a nursing programme requires substantive understanding of supervised clinical competence, while an advanced computational programme may need reviewers able to assess mathematical progression, technical laboratories and rapidly changing professional practice. Curriculum specialists can test programme coherence; quality-assurance specialists can examine evidence systems and decision processes; student and accessibility perspectives can expose failures that subject experts overlook. A credible panel therefore requires a justified mixture of subject, pedagogical, regulatory and practical expertise rather than reliance on one senior academic who happens to hold an impressive title (HAQAA Initiative, 2018; European Association for Quality Assurance in Higher Education et al., 2015).

Expertise must be distinguished from independence. A reviewer may possess excellent discipline knowledge but have supervised the programme director, consulted on the curriculum, applied for employment at the institution or have an unresolved financial interest in a vendor used by the programme. Such relationships need not always constitute disqualification under every procedure, but they require disclosure and an authoritative conflict-management decision before evidence is assessed. Confidentiality obligations should include student records, examinations, staff information, commercially sensitive agreements and unpublished research. Access to material for evaluation does not entitle a reviewer to retain or repurpose it. A reviewer should also avoid private advice or informal negotiations that blur the boundary between an independent assessment and a consultancy assignment.

Consistency cannot be delivered solely through universal numeric weights. Programmes differ in qualification level, disciplinary hazards, research intensity, delivery modality and lifecycle stage. An identical “staffing” score might conceal a consequential gap in clinical supervision and a comparatively minor scheduling issue in a low-risk elective. What should be standardised is the decision process: common source checking, defined evidence criteria, documented warrants, shared findings terminology, comparable treatment of critical thresholds and a recorded rationale for departures from prior cases. Numerical ratings can support orientation or risk triage when an authorised instrument requires them, but they cannot replace the narrative justification of consequential decisions.

Reviewer calibration should occur before panels encounter a live institution and again when substantial disagreement emerges. A calibration exercise presents the same anonymised, fully specified hypothetical dossier excerpt to several reviewers, asks them to identify the applicable criterion and independently formulate findings, then compares the results. Divergence may reveal misunderstandings of a standard, different assumptions about missing evidence, disciplinary bias or inconsistent risk tolerance. The aim is not to force unanimity through group pressure. It is to agree which questions are legal, which are evidentiary and where legitimate expert interpretation remains open. Material minority reasoning should be preserved when it exposes unresolved uncertainty, particularly where the decision affects students' opportunities or institutional rights.

Table 9.6

Calibration exercise for an external panel

Case element	Shared evidence	Calibration question
A. Curriculum arithmetic	480 credits in PPF and PSF; annual allocations conflict; three module descriptions have duplicate codes	Does the defect prevent authoritative identification of the curriculum, or can a targeted reconciliation suffice?
B. Digital launch	LMS licence active; populated first-semester courses absent; ICT staff demonstrate only an administrator account	Which readiness claim is supported, and which learner-facing test is still required?

Case element	Shared evidence	Calibration question
C. Staffing	Three lecturers nominated; two are assigned to overlapping full-time programmes; no approved workload plan	Is the evidence insufficient or does a verified capacity deficiency already exist?
D. Assessment	Research outcomes are advanced; sample tests mainly assess recall; moderation policy exists	How should constructive alignment and assessment validity be argued?

Note. All cases and quantities are constructed. The moderator should record the authority used, evidence sought, classification, proposed response and unresolved disagreement. No universal correct regulatory result is implied without the operative criteria.

Good panel leadership protects deliberation from both domination and fragmentation. The chair should distinguish technical clarification, provisional individual assessment, joint examination of contradictions, report drafting and final recommendation. Panels should avoid allowing the most senior or confident member to convert a personal preference into a mandatory condition. They should also avoid pressuring reviewers to abandon serious safety or academic concerns simply to produce a unanimous score. A reasoned dissent, fairly summarised, may strengthen a recommendation by revealing where the competent decision body needs to consider risk or obtain additional clarification.

Calibration should explicitly test the panel's treatment of *missing*, *contradictory* and *failed* evidence. Reviewers might agree that no staff-allocation record was submitted but disagree whether that supports “not demonstrated” or a verified absence of staff. The distinction can be resolved only by checking what verification was attempted and whether the institutional explanation establishes existing resources. Likewise, a faulty LMS student-role test should be repeated after ruling out a review-team permissions mistake before becoming a major finding. Review leadership should retain a concise calibration memorandum containing the questions on which reviewers agreed, any discretionary interpretations that remain open, and the referral route for questions beyond the panel's mandate. Agreement generated by suppressing disagreement is not equivalent to reliable judgement; the purpose is disciplined comparability rather than artificial unanimity.

9.11 Assessing curriculum content, coherence, academic standards, staffing, infrastructure, and sustainability

Curriculum evaluation begins with the educational worth and qualification-level demands of the intended award. The programme rationale should explain the disciplinary, scholarly, professional or public problem addressed, while the graduate profile should articulate capabilities that are neither trivial nor implausibly broad. The review should determine whether subject coverage includes essential foundations, methods and contemporary knowledge, whether omissions are consequential, and whether any apparent duplication is pedagogically purposeful or an inefficient repetition. Benchmarking against comparable awards is useful for identifying questions but should not become an unexamined requirement that every university reproduce another institution's course list. Disciplinary innovation deserves intellectual scrutiny rather than automatic suspicion (Lattuca & Stark, 2009; Biggs, 1996).

Coherence requires following learning across the entire award. A curriculum map should make visible where programme outcomes are introduced, developed and assessed, while a progression analysis should examine prerequisites, the sequencing of conceptual difficulty, term-by-term workload and culminating demonstration of graduate independence. The evaluator should reconcile codes, module titles, credit values, duration, mode, placement and assessment information across the controlling programme specification, proposal, module register and descriptions. Qualification-level requirements must be verified against the operative Rwanda Qualifications Framework and any applicable specialist conditions; reviewers should not invent a universal credit or annual-load requirement from an illustrative template. An arithmetic error may be consequential when it affects the award's required learning volume, even if every individual module appears academically sound (Republic of Rwanda, 2021b).

Assessment deserves a separate validity inquiry. A programme claiming that graduates can diagnose complex organisational problems cannot rely exclusively on recall tests of management vocabulary. An engineering programme promising safe technical design needs evidence of applied problem-solving and appropriate practical assessment; an advanced research degree needs defensible original inquiry and supervision. Reviewers should inspect assignment briefs, assessment blueprints, rubrics, marking practices, moderation and student work at different achievement levels where available. They should ask whether grading discriminates meaningfully among performance levels and whether assessments are secure, fair and accessible. A robust assessment policy is supporting evidence, not a substitute for examining the tasks and decisions produced under it (Kane, 2013; Boud & Molloy, 2013).

Staffing adequacy concerns the alignment of people with work. Qualifications and titles matter, but reviewers also need to know who will teach each module, assess learning, provide pastoral or academic support, supervise practice or research, and cover absences. A staffing matrix should cross-tabulate appointments, recognised academic credentials, subject expertise, teaching allocation, concurrent commitments, employment status and continuity risks. Programmes should demonstrate that visiting or part-time faculty are available during the relevant period and that specialist partnerships are enforceable rather than merely aspirational. Reviewer findings must be sensitive to institutional diversity: a small institution can use a carefully governed shared facility or visiting scholar, provided that the arrangement satisfies the applicable standard and can be relied upon by enrolled students.

Infrastructure should be evaluated as an educational function, not as a photographic inventory. A laboratory is relevant when it has appropriate equipment, safety, consumables, qualified support, accessible scheduling and maintenance suitable for the activities being taught. A library is relevant when programme students and faculty can obtain necessary scholarly resources under usable access and licensing arrangements. An online platform is relevant when it enables the intended academic interactions, assessment and student support under realistically expected conditions. Sustainability adds the question of whether these resources can be maintained for the duration of existing and foreseeable student commitments. An impressive opening budget cannot prove viability if recurrent software, subscriptions, specialist staffing, placements or maintenance have not been costed.

A programme can be strong in most dimensions and still fail a critical one. It is not defensible to offset an unavailable clinical placement with excellent classroom teaching or to compensate for inadequate graduate assessment with an unusually attractive student-services brochure. The idea of non-compensatory thresholds protects essential academic, legal and safety conditions. For less fundamental weaknesses, a holistic judgement may legitimately take remedial capacity, context and risk into account. The panel must explain which deficiencies cross a threshold, which may be corrected without jeopardising learners and how the operative instrument permits the proposed treatment. This avoids both mechanical score averaging and an arbitrary insistence on perfection (Sangwa, 2026).

Table 9.7

Programme-level academic evaluation matrix

Domain	Core evaluative test	Illustrative corroborating evidence	Critical failure to investigate
Educational rationale	Is the award necessary, worthwhile and appropriately distinguished?	Needs analysis; research and professional context; graduate aims	Marketing assertions replacing educational justification
Qualification integrity	Do level, credits, duration and progression meet applicable criteria?	Authoritative register; RQF mapping; programme specification	Contradictory credit or award records
Curriculum coherence	Is essential knowledge developed in a credible sequence?	Outcome map; module content; prerequisites; assessment map	Content gaps and unsupported graduate claims
Assessment integrity	Can performance evidence warrant the award-level inference?	Tasks, scripts, criteria, moderation, academic-integrity controls	Recall-only assessment of advanced competence

Domain	Core evaluative test	Illustrative corroborating evidence	Critical failure to investigate
Staffing and supervision	Are suitably qualified personnel truly allocated and available?	Contracts, qualifications, workload, contingency	Named but unavailable lecturers or supervisors
Learning environment	Are required facilities, resources and support usable by the proposed cohort?	Access tests; laboratory inspection; licences; learner journey	Purchased but nonfunctional or inaccessible services
Sustainability	Can students reasonably complete the advertised award?	Multi-year budgets; dependency analysis; continuity and teach-out provisions	Fragile provision with no funded contingency

Note. Original synthesis for professional use. This matrix supplements but does not replace the official criteria applicable to any real evaluation.

Postgraduate provision introduces criteria that should not be inferred from undergraduate templates. HEC's *Postgraduate Degree Framework*, dated July 2026 and publicly listed among its October 2026 guideline uploads, provides a contemporary official reference for postgraduate admission, pathways, supervision, research, examination and institutional responsibility (HEC, 2026b). A reviewer should establish which provisions apply to the degree and cohort under examination, verify the institution's approved rules and examine the relationship among available supervisors, their subject expertise, candidate workload, research ethics, research facilities, milestones and independent examination. The framework's publication does not establish that a particular university has already implemented its provisions, and it should not be presented as retroactively applicable without considering commencement, transitional arrangements and competent clarification. For doctoral awards especially, possession of a thesis-writing guide is insufficient evidence of an operating supervisory and examination system.

External review should also scrutinise programme information that students use to make long-term commitments. Admission advertisements, approved prospectuses, learning agreements and graduation rules should agree about awarding institution, tuition and mandatory fees, programme duration, scheduled attendance, language of instruction, supervised practical work, recognised learning pathways and material technological costs. Claims of professional recognition or international equivalence must be tied to the competent body and its specific decision, not inferred from the institution's accreditation status. In cross-border programmes, the panel should distinguish marketing partnerships, academic collaboration, franchise delivery, joint qualifications and separately approved awards, since they involve different responsibilities for teaching, assessment, student complaints and the legal identity of the final credential.

9.12 Reviewing online, blended, AI-supported, and practically intensive programmes

Digitally mediated programmes should be assessed against the same defensible academic purposes as other awards, together with delivery-specific risks and requirements. Rwanda's HEC distance-learning guidelines of March 2026 and its 2025 virtual-learning and AI guidance provide official starting points for evaluating digital provision in their published scope. The review should determine which delivery mode is approved, how meaningful engagement occurs, what students can access under real connectivity constraints, how assessments and identity safeguards operate, and how digital services remain available when systems fail. The internationally familiar terms *online*, *blended*, *distance* and *self-paced* are not substitutes for the operative national classification or a programme's actual participation obligations (HEC, 2025, 2026a).

A live LMS inspection should test the academic journey, not merely the existence of a platform licence. Reviewers can request a restricted student role and follow a representative path: logging in, locating the approved module, accessing required material on realistic devices, understanding intended outcomes, participating in a learning activity, receiving feedback, submitting a task and locating academic or technical support. The panel should confirm course version, enrolment rules, assessment configuration, staff permissions, accessibility and incident escalation. A populated pilot module can illuminate quality but cannot automatically prove that every level of a multi-year degree is ready; a proportionate sampling strategy should

cover critical pathways, the first delivery period and specialist risks. Evidence from administrative accounts alone may be misleading if ordinary students face different access permissions or device constraints.

AI-assisted educational activity complicates evidence in two directions. Institutions may use AI to prepare teaching resources, personalise practice, assist feedback, manage analytics or produce administrative reports; students may use it to support learning or generate submissions. Reviewers must ask whether the assessed construct remains identifiable and whether unaided or appropriately supervised individual performance can be established when that is what the award claims to certify. They should examine task-level AI rules, disclosure, staff capability, validation of automated outputs, fair alternatives, privacy and appeals. AI-detection percentages alone are not a reliable proof of academic misconduct, and automated grading should not escape meaningful human accountability simply because a software vendor calls it objective (UNESCO, 2023; HEC, 2025; Kane, 2013).

Review panels may themselves employ AI for preliminary document indexing or contradiction spotting, subject to lawful data processing and authorised tool use. Such assistance should not replace verification against originals, specialist academic interpretation or accountable human conclusions. A generated summary may omit a limiting clause; a language model may misstate an official provision or invent a citation; and an uploaded dossier may contain sensitive records whose disclosure to a third-party service is not permitted. For consequential reviews, the evaluator should preserve source citations and human-authored reasoning and disclose any material automated assistance under the agency's applicable policy. Reviewer efficiency has no value if it diminishes accuracy, confidentiality or the institution's ability to contest the finding.

Practically intensive programmes require a parallel scrutiny of physical competence and learner safety. Clinical, laboratory, engineering, fieldwork, teacher-education and placement-based courses may use simulation or remote instruction to support learning but cannot assume that every practical performance can be fully demonstrated through a virtual substitute. Reviewers should identify indispensable hands-on outcomes, approved supervision arrangements, facilities, safety protocols, logbooks and valid practical assessments. They should inspect partnership capacity for the planned cohort rather than accept a general cooperation letter as sufficient. Where a virtual simulator makes an educationally plausible contribution, its legitimate assessment scope should be described precisely, and requirements for real-world performance should be preserved where applicable.

The most difficult cases combine these dimensions. A blended healthcare qualification may have excellent online theory instruction and a meticulously configured platform but insufficient practice supervisors. An AI-supported professional programme may produce sophisticated learner projects without a defensible means of showing that graduates can make unaided safety-critical decisions. A distance degree may maintain strong academic standards for students with broadband while excluding others through mandatory high-bandwidth synchronous assessments. These are not reasons to reject innovation; they are reasons to examine the entire programme-specific learning and evidence chain under the criteria that actually apply (UNESCO, 2023; HEC, 2026a; Sangwa, 2026).

The March 2026 HEC distance-learning guidelines make this requirement more concrete than an abstract digital-readiness discussion might suggest. Appendix I articulates an evaluation method concerned with infrastructure, materials, staff and student readiness, assessment, policies, governance and financial sustainability; Appendix II contains criterion-level assessment forms, including a four-point scale labelled 0 (*Never*), 1 (*Sometimes*), 2 (*Meets*) and 3 (*Always*) (HEC, 2026a, pp. 21–23). These are part of the published HEC instrument and are not interchangeable with the author-developed finding categories in Table 9.9. A reviewer using an official HEC form should complete its required scores and observations faithfully, while ETAJ can supply the additional provenance, claim-evidence linkage, inferential explanation and treatment of contradictory evidence needed to justify a consequential overall conclusion. The discussion of non-compensatory critical conditions in this chapter is a professional decision safeguard, not a statement that HEC has abolished its published scoring mechanism.

Table 9.8

Connecting HEC distance-learning assessment with ETAJ without replacing the official form

Review task	Published HEC assessment reference	Complementary ETAJ recording question
Evaluate learner-facing LMS	Appendix II: functionality, access and related indicators scored 0–3	Which user role and pathway were tested, and what contrary evidence exists?
Review digital course materials	Appendix I and relevant modality-specific indicators	Do sampled artefacts support outcome-level engagement for the actual cohort?
Evaluate readiness and human support	Staff/student readiness, policies and management domains	Do staffing and support allocations exist beyond policy and attendance lists?
Formulate consequential finding	HEC scoring, narrative observations and applicable official procedure	What authority, verified evidence and warrant justify the qualified conclusion?
Confirm improvement	Official follow-up requirements and authorised milestones	Which independently checked records demonstrate actual closure of the original risk?

Note. Author's comparative implementation aid based on HEC (2026a, Appendices I–II). The official rubric must be consulted directly for complete, current item wording, scoring and any mandated thresholds. ETAJ is an explanatory overlay, not an alternative regulatory scoring system.

9.13 From findings to proportionate recommendations, accreditation conditions, deferral, and non-approval

Evidence does not determine an accreditation outcome without a further act of judgement concerning consequence. A material deficiency may be established to a high degree of confidence while the lawful response still depends on programme lifecycle, student exposure, the seriousness and reversibility of the problem, the possibility of timely correction, and the decision categories authorised by the competent body. Conversely, uncertainty about evidence may justify a request for clarification rather than a punitive inference that the programme has failed. The reviewer should distinguish the *finding*, which describes the warranted state of assurance, from the *recommendation*, which proposes what should happen, and the *decision*, which belongs to the authorised body. These separations preserve intellectual honesty and institutional due process (Sangwa, 2026; Republic of Rwanda, 2026).

A proportionate response should attend to five considerations. The first is legal authority: does the regulator have the power to impose the proposed outcome or condition? The second is materiality: does the finding affect an essential qualification requirement, safe learning, reliable assessment, truthful student information or another fundamental standard? The third is evidence strength: is the defect observed and corroborated, or is its existence simply not yet demonstrated? The fourth is timing: can the matter be remedied before learner exposure, or are current students already at risk? The fifth is reversibility: would premature approval cause harm that later documentation cannot adequately undo? The proposed response must state these considerations in relation to the specific case rather than recite “proportionality” as a conclusion.

Recommendations for improvement are appropriate where the programme meets applicable minimum criteria but could strengthen an aspect of design or monitoring. A condition, where the relevant decision framework permits it, should be reserved for a clearly defined requirement whose completion can be verified by a stated deadline and whose status is compatible with the risk of proceeding. Deferral may be appropriate where essential information or activity remains incomplete and the operative procedure provides a route for further determination. Non-approval or refusal requires particular care: it should rest upon the applicable grounds, accurately described deficiencies and the authority's valid procedure, not simply on a panel's discomfort with an unfamiliar curriculum. The labels and procedural mechanisms available in any actual Rwanda case must be taken from current HEC instruments and the authorised decision body; the conceptual categories here do not purport to prescribe HEC outcomes.

Table 9.9

Proposed findings-to-response guide for professional reasoning

Evidentiary situation	Materiality and learner exposure	Potential response to consider, if authorised	Verification or safeguard
Standard demonstrably satisfied	No material unresolved defect	Favourable recommendation; enhancement advice if useful	Routine monitoring of implementation assumptions
Minor correctable discrepancy	Low risk; no essential standard in doubt	Targeted correction or time-bound noncritical condition	Revised controlled artefact and QA confirmation
Material readiness unproven	Essential delivery claim; students not yet exposed	Clarification, deferral or pre-launch evidence requirement	Independent test before recruitment or delivery as applicable
Critical deficiency verified	Immediate threat to safe, lawful or academically credible provision	Adverse recommendation or restriction available in law	Protect affected learners; confirm remedial readiness before use
Evidence materially contradictory	Confidence presently insufficient	Investigate, sample, hear institutional explanation	Resolve discrepancy and record amended inference

Note. Original decision-support guide, not a representation of Rwanda's exhaustive authorised outcome categories. "Condition" and "deferral" must not be assumed available in every procedure.

Conditions must be evidence-bearing instruments, not aspirational instructions. "Improve academic staffing" is too vague to enforce consistently. A properly drafted condition identifies the relevant criterion, verified gap, required action, documentary or operational evidence of completion, responsible office, due date, reviewing authority and consequence of non-fulfilment as established by law. A condition concerning a crucial facility should state whether completion is necessary before student enrolment, before the specific practical activity or by another formally permitted milestone. Conditions that require an institution to produce a policy it already possesses, without addressing observed implementation, merely recreate the documentary-compliance problem the review should correct.

Proportionality also restrains excessive regulation of legitimate academic difference. A reviewer may prefer traditional lectures, a familiar module name or a particular foreign textbook. Such preferences are not binding standards unless validly incorporated into the applicable framework. Where a programme uses an innovative pedagogical route that meets the educational purpose of the authorised requirement and supplies credible evidence of effectiveness, the panel should examine the evidence rather than demand imitation. Equally, claims of innovation cannot excuse absent safety provisions, weak individual assessment, insufficient supervision or an unapproved delivery modification. Impartiality requires scepticism both towards untested novelty and towards the assumption that conventional format implies quality.

A particularly dangerous decision error is *conditional approval without a credible control point*. A programme might be permitted to correct a typographical module code after a decision, but allowing practical classes to commence before a laboratory is safe would transfer a foreseeable risk to students. Conditional progression is defensible only if the applicable process authorises it and the condition specifies who can prevent the affected activity until verified completion. A reviewer should also consider whether remedial action depends on uncertain external procurement, recruitment or partner capacity. If the remedy is unlikely to be completed within the available period, calling it a condition may conceal a substantive readiness failure. The proper regulatory response remains the competent authority's decision, not the evaluator's private risk tolerance.

9.14 Review reporting, procedural fairness, institutional responses, appeals, and accountability

A credible report makes its reasoning intelligible to three audiences: the institution that must understand and respond, the competent authority that must decide, and interested readers who need assurance that standards were applied fairly. It should identify the review's legal mandate, scope, methodology, panel composition, disclosed conflicts, official criteria, evidence reviewed, sampling limitations, factual clarifications, findings, counter-evidence, recommendations and any dissent material to the decision.

Concision is valuable, but not at the expense of reasons. A report that merely lists “criterion 4: partially met” does not allow an affected university to identify what to correct or why the evaluator considered its evidence insufficient.

Procedural fairness requires that institutions have reasonable notice of applicable criteria, access to a clear process, opportunities to correct factual errors and channels to contest material findings or decisions under the operative procedure. An institution's opportunity to respond should not be reduced to a ceremonial acknowledgment. If it produces credible, previously unavailable documentary evidence or demonstrates that a panel misread a module allocation, the reviewers should reconsider the affected finding and preserve the change trail. At the same time, review fairness does not require the panel to accept a late assertion without verifying it. The final report should distinguish factual corrections, additional evidence, disagreement over standards, disagreement over inference and challenges to the proposed consequence, since each may need a different remedy.

HEC publishes *Appeals and Complaints Procedures for the Higher Education Council Services*, dated December 2025, on its current guidelines page. The document establishes an official reference point for relevant complaint and appeal arrangements, but the chapter does not reproduce unverified deadlines or treat every appeal route as applicable to every accreditation action. A case-specific report should identify the operative appeal mechanism, competent recipient, permitted grounds and submission requirements from the authoritative version supplied to the institution. Ghana's GTEC accreditation materials offer a comparative starting point, but any detailed claim about panel-response deadlines or Board procedure must be traced to the corresponding authoritative Ghanaian instrument and must not be transferred to Rwanda (HEC, 2025a; GTEC, n.d.).

The distinction between panel expertise and decision authority should remain visible after deliberation. A panel ordinarily offers professional findings and recommendations within its commission. The authorised decision-making body determines the regulatory consequence, subject to applicable law and procedural rules. Where that body departs materially from a panel recommendation, a reasoned record should explain the basis rather than erase the difference. Where the panel is commissioned by an institution for internal external-peer review rather than formal accreditation, the resulting report should be labelled accordingly. Universities must not present favourable peer advice, membership in a professional association or a publisher's endorsement as equivalent to national programme accreditation.

Transparency must be compatible with confidentiality. Publishing aggregate outcomes and sufficiently reasoned determinations can support accountability, but reports may include personal staff information, student assessment samples, medical or disciplinary material and commercially sensitive contract details. The institution and regulator should determine public and restricted versions in accordance with applicable law and official policy, with no fabrication of evidence or concealment of materially adverse conclusions. The records should preserve the factual chain necessary for an appeal without exposing more personal data than the process lawfully requires. A well-governed record therefore separates public findings, restricted evidentiary annexes and secure underlying source records.

The HEC *Appeals and Complaints Procedures for the Higher Education Council Services*, dated December 2025, expressly discusses accreditation appeals alongside other HEC services and distinguishes an appeal against a substantive decision from a complaint about service delivery (HEC, 2025a, sections 3–9). Importantly, the document's introduction refers to the former 2020 order, whereas the Council's contemporary mandate is governed by the 2026 presidential order. This chronological difference does not by itself prove that the procedure has ceased to operate. It does require the relevant officer to establish how the appeal procedure remains applicable under the current governance arrangements before presenting its procedural provisions as operative in a particular case. An institution should receive the decision, sufficiently specific reasons, information about the applicable review route and an unambiguous identification of the final authoritative record.

Reviewer accountability should extend beyond confidentiality and conflict declarations. Agencies and commissioning bodies need methods to detect systematic disagreement among panels, recurrent ambiguity in criteria, inappropriate reliance on institutional prestige or resources, and disproportionate demands for

records. An internally quality-assured external process might audit a sample of adverse and favourable recommendations against their underlying evidence, record the causes of successful appeals and revise training when interpretive errors recur. Such examination does not make the agency infallible; it is an institutional expression of the same evidence-to-improvement principle that the regulator asks universities to demonstrate (Beerkens, 2018; Leiber et al., 2015).

9.15 Post-accreditation monitoring, verification, corrective action, and programme enhancement

Accreditation is a time-bounded public judgement embedded in an educational lifecycle, not a perpetual guarantee about future delivery. A favourable initial determination depends upon assumptions concerning staffing, enrolment, funding, infrastructure, academic standards and student support that subsequent circumstances may confirm or defeat. Monitoring should return to those material assumptions rather than merely request the same annual dossier in an unchanged form. An institution planning an intake of forty students, for example, should investigate the consequences when actual enrolment becomes substantially higher, because workload, equipment access, feedback time and placement capacity may cease to match the approved proposal. A regulator's formal monitoring requirements, where applicable, determine the obligatory schedule and documentation (HEC, 2021; Sangwa, 2026).

Corrective action should not be closed when a responsible officer reports that something has been "addressed." Closure evidence must match the nature of the original deficiency. A corrected module code may be verified through the controlled curriculum register and updated student information. An assessment-validity defect needs moderated replacement tasks and, when delivery has occurred, suitable samples of student performance. A lack of staff availability may require workload reconciliation and evidence that teaching was actually provided. A security or accessibility problem requires operational testing with relevant user roles rather than a general assurance letter from a vendor. Where students were affected, the institution should identify their academic position, explain any remedy or alternative and document fair treatment.

Monitoring should examine both the achievement of conditions and the emergence of new risks. Staff turnover, loss of a placement partner, discontinuation of essential software, an accreditation standard revision or an institutional merger may materially alter the capability originally examined. A change-control process should record what changed, which outcomes or cohorts are affected, whether official approval is required and which evidence demonstrates continuity or lawful transition. This is especially important in online programmes whose digital platforms and third-party services can change rapidly. A new system's usability and security cannot simply be inferred from the quality of the previous vendor's service.

The strongest post-accreditation system integrates external findings with internal quality assurance. Programme leaders own corrective actions, academic governance assesses curricular and award-level implications, specialist services supply operational capacity, institutional QA independently verifies completion, and the authorised external body receives required evidence and makes any reserved decision. Review should avoid duplicative demands where the institution's existing quality evidence can be inspected credibly. Yet efficiency should not eliminate independent challenge, particularly for critical matters. The outcome is a continuing evidence trail that connects a condition imposed at approval with its later verification and with observed consequences for learners.

Table 9.10

Proposed accreditation condition and verified-closure record

Closure field	Required content
Condition identifier	Shared N-ID, claim ID, finding ID and authorised decision reference
Basis and risk	Applicable criterion; verified original deficiency; affected cohort and learning activity
Action and owner	Specific corrective step, approved authority, accountable officer and resourcing
Due point	Legal or formally authorised deadline; pre-enrolment or pre-use threshold where necessary

Closure field	Required content
Closure evidence	Corrected document, operational test, academic artefact or appropriate longitudinal sample
Independent verification	Named evaluator; evidence reviewed; contradictions; date and conclusion
Decision and residual risk	Competent closure decision; ongoing monitoring; student-protection actions

Note. Original professional template. Its use does not confer independent authority on an institutional quality officer to close a regulator-imposed condition.

Post-accreditation accountability is best understood as a two-way responsibility. Universities should report material changes honestly and repair substantiated deficiencies, while the competent body should make the expected evidence, acceptance criteria, time limits and closure authority clear from the outset. Requiring an institution to repeat an entire accreditation dossier to prove that a single staff allocation has been corrected can impose avoidable administrative cost; accepting a new staffing policy without testing whether lecturers are now available creates the opposite problem. Risk-sensitive verification should ask for the least burdensome evidence that is nevertheless sufficient to close the original finding and protect current learners. Where improvement is incomplete, reports should disclose residual risk rather than label administrative activity as successful enhancement.

9.16 The Evidence-Traceable Accreditation Judgement model and its operational application

ETAJ consolidates the chapter's argument into an operational model for making accreditation reasoning inspectable. It is the accreditation-judgement component of the broader Integrated Evidence-Traceable Quality Governance (IETQG) framework advanced in the author's doctoral thesis. IETQG connects institutional capability, programme assurance, regulatory judgement, monitoring and enhancement; ETAJ specifies the narrower chain through which an evaluator moves from an applicable rule to a reviewable decision and follow-up. The distinction matters because external review cannot manufacture educational capability and an institution's strong quality-management system cannot authorise its own regulatory verdict. The model seeks coherence between the two forms of responsibility without collapsing them (Sangwa, 2026).

The model contains eight linked stages. First, *normative authority* establishes the current and applicable criterion. Second, *institutional claim* specifies exactly what the programme asserts. Third, *evidence* records the material offered for that proposition. Fourth, *verification* tests the material's provenance, quality, correspondence and contradictions. Fifth, *evaluative warrant* states the professional inference and its backing, qualifiers and rebuttals. Sixth, *finding* records what the evidence establishes, demonstrates inadequately or contradicts. Seventh, *regulatory response* connects materiality and confidence to an authorised and proportionate consequence. Eighth, *follow-up* specifies how important assumptions, conditions and outcomes will be checked after the decision. These stages may be revisited during analysis, but the final record must permit reconstruction of the completed chain.

Figure 9.2

Evidence-Traceable Accreditation Judgement: Eight-stage decision architecture



Note. Original operational redrawing by the author of the ETAJ architecture advanced in Sangwa (2026). The diagram expresses a proposed evaluative process, not a government-approved accreditation procedure or an empirically validated causal model.

Four evaluative gates protect the chain. The *authority gate* checks whether the proposed binding requirement is operative and applicable. The *evidence gate* checks whether the evidence is authentic, relevant and sufficient for the specified claim and lifecycle. The *warrant gate* checks whether a legitimate inference survives meaningful counter-evidence and appropriately states uncertainty. The *response gate* checks legal competence, materiality, proportionality, timing and learner protection. The gates are neither additive scores nor substitutable strengths. A strong evidence bundle cannot cure lack of legal power, and an authorised response cannot cure an indefensible interpretation. Critical requirements concerning safety, legal status, essential educational achievement and learner protection should not be averaged against unrelated strengths.

Table 9.11

Operational ETAJ reviewer worksheet

Field	Prompt to be answered in the evaluator's own words
Review identity	Programme, qualification, site, mode, cohort, review stage, panel and date
N-ID / authority	What exact current criterion applies, and why?
C-ID / claim	What precise assertion is being tested and at what level?
E-ID / evidence	Which traceable records and representative samples bear on it?
V-ID / verification	How were source, version, implementation and contradictions checked?
W-ID / warrant	Why does this evidence support or fail to support the claim? What backs the inference?
Q-ID / qualification	What uncertainty, alternative explanation or counter-evidence remains?
F-ID / finding	Met, qualified, not demonstrated, deficiency, or not applicable, with reasons
R-ID / response	What proportionate action is available to the competent authority?
M-ID / monitoring	Who will verify closure, against what evidence and by what authorised milestone?

Note. Original author-developed instrument, not an HEC assessment form. Identifier prefixes are illustrative and should be reconciled with official case-management systems.

The model's practical value can be illustrated through four linked hypothetical observations involving a proposed Bachelor of Marketing and Digital Commerce at a fictional Rwandan university. These examples are not statements about any actual programme, reviewer, university or HEC decision. The invented review dossier claims a coherent 480-credit curriculum, an operational blended delivery mode, adequate academic staffing and valid programme-level assessment. The evaluator should not treat that combination of claims as an integrated truth before checking each component. Nor should the panel assume that one failure automatically defeats every other claim. The review proceeds criterion by criterion, connecting related risks while recording their different evidentiary status.

Worked illustration A: Conflicting curriculum records. The proposed programme and specification forms both identify a 480-credit award, yet the annual timetable allocates the award differently from the approved course register; the same code is assigned to two distinct modules and several module descriptions identify years or trimesters inconsistent with the master sequence. The claim is that the academic programme has a consistent, qualification-aligned structure. The evidence demonstrates that documents exist, but the discrepancy prevents the reviewer from reconstructing one unambiguous controlled curriculum. The warrant is that qualification integrity and student progression depend upon identifying a definite award structure whose modules, credits, assessments and progression rules agree. The finding is a *demonstrated documentation and design-control deficiency*, with the materiality determined by whether reconciliation changes the qualification totals, award-level demand or student study pathway. A proportionate recommendation is a signed, version-controlled master register, fully reconciled with specifications and module descriptions, followed by academic reapproval where applicable and regulator notification where required. A reviewer must not independently invent the corrected credit distribution or claim that the fictional award violates a particular annual credit rule without checking the operative RQF provision.

Worked illustration B: The incomplete LMS. The institution produces an active platform subscription, a digital-learning policy, screenshots and a staff-training attendance list. During a supervised demonstration, the panel cannot locate learner-facing modules for the coming teaching period; a test student cannot view the required assessment instructions or submit work. The assertion of operational blended readiness is therefore not demonstrated and aspects of configured functionality are directly observed to be absent. The appropriate warrant distinguishes procurement from delivery: a licence and staff orientation do not demonstrate that students can undertake the promised learning journey. The panel should request course configuration, accessibility checks, representative student-role tests, support arrangements and a verified academic sign-off before the relevant launch threshold. The actual regulatory consequence depends upon the approved modality, HEC requirements, timing and the competent authority; the observation alone does not authorise a reviewer to cancel institutional accreditation.

Worked illustration C: Staffing fragility. Three qualified academics are named for the programme, but two appear on conflicting schedules for other degrees and the institutional submission contains no approved teaching-load reconciliation. Their qualifications are documented and should not be disputed. Their programme-specific availability, however, is insufficiently established, and the overlapping assignments may support a stronger adverse finding if verified against binding workloads. The panel should seek current contracts, module allocations, timetables, expected marking burden and contingency support. If evidence reveals that all planned courses can in fact be staffed, the initial concern should be closed and the reasons recorded. If no viable arrangements exist for core modules, the review should identify a material readiness deficiency and consider the authorised response appropriate to the risk of admitting a cohort without instruction.

Worked illustration D: Assessment promises without corresponding tasks. The graduate profile promises original market research, critical interpretation of evidence and defensible strategic recommendations. Yet the supplied final-year assessment specifications consist almost entirely of short recall questions, with no authentic research task, assessed project or performance evidence that would justify the advanced claims. The contradiction lies in constructive alignment, not merely the number of assessment documents. A reviewer should examine the full assessment map, ask whether additional capstones or practice tasks exist, and consider moderation arrangements and staff competence. If the record is complete, the finding may be a verified assessment-design deficiency; if a substantial capstone brief is omitted and subsequently

verified, the conclusion should be revised. A proportionate remedy is to redesign and formally approve relevant tasks and criteria before students are assessed under the defective arrangement, subject to the valid decision route.

The cases demonstrate why an accreditation report needs both issue-specific conclusions and an integrated judgement. Curriculum contradiction, unconfigured online delivery, uncertain staffing and assessment misalignment interact, but they cannot be resolved by awarding compensatory points for institutional ambition. The controlling question is whether the combined, verified evidence supports the programme's claim to an academically and legally credible first intake, and if not, which precisely evidenced barriers require correction before different aspects of delivery can proceed. An ETAJ report should separate unresolved questions from demonstrated breaches, retain the institution's response and specify what information would justify a revised determination.

The hypothetical observations should now be integrated into a decision narrative without pretending that a particular HEC decision is predetermined. The conflict in the programme register is a demonstrated document-control weakness; the LMS trial supplies direct evidence of missing student-facing functionality; the staffing situation remains partly unresolved until allocations are checked; and the assessment mapping may demonstrate a design defect if the dossier truly contains no valid advanced tasks. A competent panel should describe each separately and then ask whether, together, the unresolved issues make commencement of the promised learning academically untenable. The distinction matters because a combined risk can be material even when one isolated discrepancy would have been easily corrected. The recommendation should identify a sequence of verifications, including curriculum reconciliation, configured learner-path testing, workload confirmation and approved assessment redesign, that could make a revised determination possible.

For an institution seeking to use ETAJ within an existing management information system, the smallest operational unit is not a completed form but a traceable *claim record*. It contains a normative source ID, programme claim, linked evidence with version and custodian, a verification account, the reviewer's warrant, counter-evidence and qualifier, the classified finding, any institutional response and the final competent decision. A dashboard can summarise outstanding risks, but it should never hide the underlying distinction between a source not submitted, a source disputed and a directly observed failure. Role-based access, retention limits, edit history and an independent approval record are necessary wherever the evidence contains private records or the decision has consequential legal effects. This record architecture may be implemented with ordinary securely governed files and a controlled register; adoption of costly specialist software is not a precondition for defensible reasoning.

External Programme Evaluation and Accreditation Toolkit: Integrated operating protocol

The complementary tools requested in the master outline are operationally linked through one evidence register and common identifiers. The authority register in Table 9.2 establishes the requirement and its applicability; Table 9.3 sets evidence-quality tests; Table 9.4 supplies the version-controlled evidence register; Table 9.5 shows claim-evidence-warrant reasoning; Table 9.6 supplies a pre-review calibration exercise; Table 9.9 classifies findings and candidate responses; and Table 9.11 is the evaluator worksheet. For actual use, a case manager should assign one immutable case identifier and a separate identifier for every norm, claim, evidence item, finding, response and closure record. An item may support multiple claims, but each link must be explicit. Records should preserve both the initial and corrected document versions, reasons for revisions, restricted access permissions and a chronology of decisions.

Table 9.12

Model external programme review report and case-management template

Report section	Minimum professional content

Report section	Minimum professional content
1. Mandate and scope	Authorising instrument, review purpose, programme and delivery description, panel remit
2. Sources and method	Current normative register; evidence catalogue; sampling; meetings; system and site tests; limitations
3. Programme account	Award purpose, qualification level, curriculum, cohorts, locations, delivery and professional conditions
4. Criterion findings	N-ID, C-ID, E-ID, verification, warrant, qualifiers, rebuttals and finding category
5. Cross-cutting risks	Interactions across staffing, assessment, resources, access, safety, technology and sustainability
6. Institutional response	Factual corrections, additional verified evidence, contested interpretation and panel reconsideration
7. Recommendation	Reasoned, proportionate response within authority, including any pre-use safeguards
8. Decision record	Competent decision-maker, decision date, legal effect, notice and available review channels
9. Follow-up	Condition and deadline, responsible officer, verification evidence, closure authority and monitoring

Note. Original reporting template. The fields supplement, rather than replace, the official report form required by the competent agency.

A workable procedure starts with an intake check of the review brief, the institution's authority and the intended award. The secretariat then freezes an identifiable version of the submitted dossier, assigns reviewers subject to conflict declarations and completes the normative-provenance register. Reviewers independently analyse the programme claims and evidence, conduct proportionate demonstrations or inspections, and record initial findings. A structured panel meeting tests the warrants against counter-evidence and distinguishes unresolved factual matters from substantive deficiencies. The institution is given the opportunity required by applicable procedure to correct facts and submit responses. The panel then finalises a report with evidence-linked recommendations for the competent decision body. After the decision, any lawful conditions are entered into a closure register, where verification is completed independently to the degree required by the risk and official procedure.

A final quality test should be applied to every high-stakes finding. Can the reader identify an operative requirement? Is the programme claim specific? Could the cited evidence be retrieved and checked? Does the warrant explain the inference rather than repeat the conclusion? Has plausible contrary evidence been considered? Is uncertainty accurately expressed? Does the requested consequence follow from the authority and seriousness of the issue? Is there a fair route for factual correction or challenge? Is the proposed condition capable of being verified at a realistic, authorised milestone? A reviewer who cannot answer these questions should refine the finding before relying on it in an adverse recommendation.

ETAJ has important boundaries. It has not been empirically shown to increase inter-rater agreement, reduce mistaken decisions or improve student outcomes. It may impose additional recording burdens if institutions and agencies implement every field as a separate bureaucratic form rather than integrate the logic into existing systems. It cannot resolve contested professional standards simply by displaying the argument in a table, nor can it confer cross-border authority or eliminate reviewer bias. Future research should compare conventional and ETAJ-assisted panels using the same ethically accessible, anonymised cases; assess agreement and reasons for disagreement; measure usability, time and record completeness; and examine whether condition-closure verification actually improves the accuracy of subsequent judgements. Such tests should be prospectively documented, not reconstructed as though already completed (Beerkens, 2018; Sangwa, 2026).

Conclusion: Defensible judgement and the responsibilities that follow accreditation

External programme review is credible only when public authority, academic knowledge and evidence are brought into disciplined relationship. An institution has a legitimate responsibility to design a worthwhile

qualification and to demonstrate that the programme can be delivered as promised. An evaluator has a corresponding duty to identify the criteria actually applicable, inspect evidence at the proper level and stage, distinguish unknowns from demonstrated failures, and show the reasoning by which findings have been reached. A competent authority must then determine any consequence through the powers and procedures that govern it. None of these duties can be replaced by a thick dossier, an attractive dashboard, a single overall score or the status of a distinguished reviewer.

The chapter has translated the thesis's Evidence-Traceable Accreditation Judgement model into a practical, auditable reasoning architecture, supported by normative provenance, evidence appraisal, claim-evidence-warrant analysis, reviewer calibration, findings classification, reporting and condition verification. Its eight stages and four gates make different sources of decision weakness visible. They also establish that academic expertise is most valuable when it is expressed through transparent, contestable warrants rather than through unexplained authority. The proposed toolkit is deliberately adaptable: it can clarify the judgement process without pretending to replace official HEC instruments, discipline-specific standards, university autonomy or legally established appeal arrangements.

Accreditation should therefore be regarded as a consequential but provisional judgement about educational quality under identifiable conditions. Once programmes enrol students, the originally assumed resources, partnerships, technologies and academic practices must endure, adapt and remain open to verification. That recognition connects this discussion to the next challenge in the volume. Pandemics, conflict, environmental hazards, cyber incidents, vendor failure and financial stress can invalidate apparently sound initial assumptions. Institutional resilience is consequently not an unrelated topic added after accreditation; it is one of the conditions that determine whether an authorised educational promise remains credible over time.

The methodological status of the chapter's proposals deserves a final boundary. Their practical plausibility is supported by established argumentation theory, source-sensitive regulatory reasoning, comparative standards and the author's earlier conceptual integration, but neither the diagram nor the completed forms demonstrate causality. An empirical research programme could test whether experienced review panels using ETAJ produce more complete warrants, detect more evidence contradictions or reach decisions that are more understandable on appeal, while also measuring additional time and cost. Such work would require case selection, explicit comparison conditions, anonymisation, appropriate ethical review where human participants are involved and prospectively recorded evaluation protocols. Until then the model remains a transparent professional proposition rather than a demonstrated improvement in accreditation accuracy.

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