

The National CLEAR Programme

AI in Healthcare Simulation

Preparing for the choices ahead

A guided simulation for health systems

Expression of interest information pack

Commissioned by the Department of Health and Social Care and NHS England. Hosted by East Lancashire Hospitals NHS Trust and The National CLEAR Programme, in partnership with The King's Fund and Intelligence Rising, and independently evaluated by Health Innovation Kent Surrey Sussex.



September 2026

Welcome to the National CLEAR Programme

Artificial intelligence is developing faster than NHS planning cycles. There is growing recognition that the choices leaders make over the next two to three years, about what to adopt, what to scale and how to prepare the workforce, will shape care for a decade.

This programme is a structured simulation that allows a health system to work through those choices before they carry a cost. Participants take decisions inside a modelled version of the system they already work in, see the consequences emerge, and decide again.

AI in Healthcare Simulation is commissioned by the Department of Health and Social Care and NHS England, and delivered through the National CLEAR Programme with The King's Fund and Intelligence Rising, and independent evaluation by Health Innovation Kent Surrey Sussex. Up to seven simulations will be delivered, in two approved phases: the first three sessions, then up to four further sessions with the evaluation and national synthesis. We are inviting expressions of interest from regions, integrated care boards and provider groups across England to host one.

The partnership brings the simulation to you. Each session runs from 9.30am to 4pm, face to face, on a date the host chooses between Monday 2 November and Tuesday 15 December 2026. It is funded: there is no cost to your organisation beyond staff time, a venue and catering.

We ask hosts to bring together 40 to 50 participants from across their system, mainly senior, but the simulation works better with operational colleagues alongside them, because the decisions being modelled reach operational teams first. What each system learns then feeds a national synthesis, giving the Department and NHS England insight into system readiness and into where there are gaps and strengths to benefit from AI.

What your system gets out of it

- **A funded day, designed and run for you.** Scenario design, materials, facilitation and an observer for every group.
- **A written insight report.** What your groups decided and where they diverged, suitable for a board or committee.
- **A place in the national picture.** A comparison of your decisions against the other participating systems.
- **Sight of where your own incentives pull against each other.** The day surfaces those conflicts at a point where finding out costs nothing.
- **Connections that do not otherwise get made.** Every respondent to the pilot survey made at least one new professional connection.

This is not a training course, but a structured rehearsal of decisions your system may face. We hope you feel encouraged to apply and help shape how the NHS prepares for the decisions ahead.

Part 1: Information about AI in Healthcare Simulation



About this pack

This information pack provides details about AI in Healthcare Simulation and explains the process for submitting an expression of interest (EOI). We have designed the programme to be as supportive as possible, providing selected hosts with the simulation design, facilitation and analysis, while minimising time commitment where possible.

The document is organised into the following sections for ease of reference:

- **Programme overview and scope:** what the programme entails, how it is phased and which organisations are eligible.
- **What the simulation is designed to surface:** the tensions the day is built to expose.
- **What a session involves:** the format and who needs to be in the room.
- **The day itself:** a provisional outline of how the day runs.
- **The support offer:** the resources and expertise participating organisations will receive, and what hosting costs you.
- **Expected outputs:** what your system receives, and what the national programme produces.
- **Information governance:** what information is collected and how it is handled.
- **What we ask of you:** the roles to nominate and the commitment involved in hosting.
- **How to express an interest:** dates, the application form and what happens next.
- **Questions and answers:** the questions applicants ask most often.
- **How applications will be assessed:** the criteria the selection panel will apply.
- **Project outline:** the stages from selection through to national synthesis.
- **Part 2:** who delivers the programme, and background to CLEAR and East Lancashire Hospitals NHS Trust.

This is a funded opportunity (there is no cost to your organisation to take part, aside from staff time, a venue and catering) to test how your system reasons about AI, with national-level support. Funding covers the simulation design, facilitation, materials, the written insight report, the national synthesis and the independent evaluation.

The sessions commissioned here are funded to their conclusion in March 2027.

Organisations wishing to run further sessions of their own would do so under a separate arrangement, which would carry a cost. Unsuccessful applicants will still be considered for later phases or self-funded involvement.

If you have any further questions, please contact the CLEAR team by email:
info@33n.co.uk

Programme overview and scope

The Department of Health and Social Care and NHS England have commissioned up to seven AI in Healthcare Simulations. Delivery is planned between November and December 2026, with evaluation and national synthesis completing by March 2027.

How the programme is phased

The programme comprises two phases. Phase 1 covers design, mobilisation, this expression of interest and the first three simulations, with a read-out at the end of them. Phase 2 covers up to four further simulations, the independent evaluation and the national synthesis, and is subject to approval by the Department and NHS England. Applications not selected for Phase 1 will be held and considered for Phase 2, and applicants will be told where that is the case.

Who we are inviting

We are inviting expressions of interest from regions, integrated care boards and provider groups across England, including provider collaboratives, federations, at-scale organisations and imaging networks. Up to seven will be selected. In submitting an expression of interest, an applicant is undertaking to bring cross-system participants into the room, and the CLEAR team will work with each selected host to get the balance right.

What the simulation covers

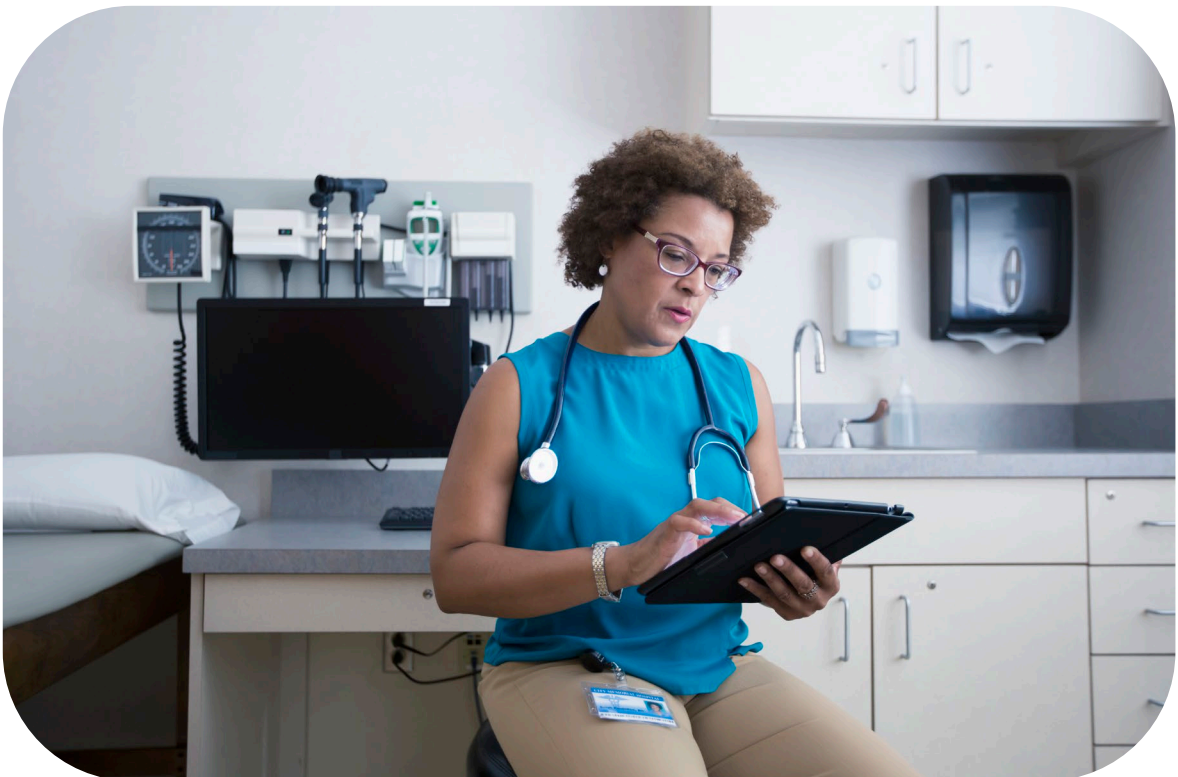
The simulation covers the period from 2027 to 2030, in three cycles. Each cycle opens with a changed picture of the health system, the AI technologies that have become available, and a set of decisions to take. Participants work in groups mirroring the real decision-making tiers of the NHS, and decide what to adopt, what to scale and what to invest in workforce readiness. Decisions are aggregated between cycles, so what one group chooses reaches the others.

Participants act in their own roles rather than adopting personas, which surfaces authentic constraints and real decision logic. The technologies used are drawn from three distinct categories — capabilities available today, emerging capabilities, and scenario constructs used to stress-test decision-making — which are set out on page 7 and signalled clearly in the room. The scenario is modelled rather than predicted. The disagreements it surfaces are not.

What the simulation is designed to surface

Every system reasons about AI differently. The simulation is built to make that reasoning visible, and in particular to surface:

- Where the incentives of national bodies, systems and providers pull in different directions
- Which assumptions about AI do not survive contact with a decision
- How your system would respond if a technology arrived faster than expected, or failed
- Where culture, behaviours and system readiness, including workforce, affect decisions and the ability to get the best from technology
- Which conversations your leaders are not currently having with each other



What a session involves

Each simulation is a single day, delivered face to face at an easily accessible venue. Up to seven sessions will be delivered across England.

The format

- Face to face, in person
- 9.30am to 4pm, including registration, lunch and a structured debrief
- 40 to 50 participants, working in groups that mirror the system's decision-making tiers
- A date of the host's choosing between Monday 2 November and Tuesday 15 December 2026
- Facilitated by the partnership: The King's Fund, Intelligence Rising and the CLEAR team, with an observer for each group

Who needs to be in the room

The simulations work because we bring people together from across multiple organisations to make the implications of individual and group decisions visible. Participants should be mainly senior, but the room is stronger when operational colleagues are present alongside them. We ask hosts to aim for a mix that includes:

- Integrated care board executive and non-executive leadership
- Provider executive and clinical leadership
- Primary care and PCN leadership
- Operational and service management colleagues
- Local authority and social care colleagues
- Digital, data and transformation leads
- Where possible: NHS England regional colleagues, charities, patient or public representation, and academic or innovation partners

Pilot feedback asked for stronger representation from general practice, from patients and from dissenting voices. The CLEAR team will work with your nominated lead on the mix, and we would rather help you fill a gap than have it go unmentioned.

What we do not ask of you

Hosts do not design anything, prepare materials or brief facilitators, and no prior involvement in AI work is needed. Background and scene-setting material is issued by the partnership in advance, so that the day itself is spent on the simulation.

The day itself

The outline below is provisional and is included so that prospective hosts can see the shape of the day and plan accordingly. Timings will be confirmed with selected hosts before their session.

Provisional outline

9.30	Arrival, registration and coffee
10.00	Welcome and framing
10.15	AI today: a briefing on current capability, adoption and regulation
11.00	Setting up the simulation
11.15	Cycle 1: the first set of AI scenarios
11.55	Break
12.10	Cycle 2: the second set, shaped by the decisions taken in cycle 1
12.50	Lunch
13.35	Cycle 3: the third set of scenarios
14.15	Break
14.25	Structured reflection
15.05	Debrief: what this means for your system
15.45	Next steps and close
16.00	Ends

Each cycle runs for around forty minutes. Groups take their decisions, those decisions are aggregated, and the consequences shape the cycle that follows. The technologies used fall into three categories, signalled clearly in the room:

Available today. In live NHS use, with real adoption and regulatory constraints. Covered in the 10.15 briefing.

Emerging. In development, trial or early deployment, and credibly available by 2030. Most scenario cards.

Scenario constructs. Plausible but unproven, used to stress-test decisions. Not forecasts.

The support offer

Selected hosts will receive comprehensive support and resources throughout the programme, at no cost to their organisation.

A facilitated day, designed and run for you

The full simulation, brought to your venue: scenario design, materials, facilitation and an observer for each group.

A written insight report

A written report to participants after your session, setting out what your groups decided, where they diverged and what that reveals.

A place in the national picture

Your system's findings feed the national synthesis alongside the other participating systems, so you can see how your system compares.

Independent evaluation

Baseline and post-session measurement by Health Innovation Kent Surrey Sussex, which sits outside the delivery partnership.

Funding covers scenario design and regional adaptation, facilitation, structured observation, insight capture, the written report and the evaluation contribution. Independence of the evaluator protects the credibility of what the programme reports nationally.

What hosting costs you

- **Venue.** A room for 40 to 50 people with space for groups to work separately. There is no cash cost where you use your own estate.
- **Catering.** Refreshments on arrival and lunch for 40 to 50 people, funded locally.
- **Staff time.** Release of participants for the day, the nominated lead for two to three days across October and November, and the executive sponsor on the day.

Everything else is met by the programme. If venue or catering cost is the only obstacle to a strong application, say so on the form and we will discuss it with you rather than rule you out.

Expected outputs

What your organisation receives

- A facilitated one-day simulation for 40 to 50 participants from across your system
- A structured debrief on the day, capturing the room's own reflections while they are fresh
- A written insight report, suitable for a board, committee or executive team
- A breakdown of who was in the room by role category and organisation type, so the composition of your session can be read alongside its findings
- A comparison of your system's decisions against the national picture, once the programme completes

What the national programme produces

- A national synthesis drawing together findings from all sessions
- Insight into system readiness and where there are gaps and strengths to benefit from AI
- An independent evaluation by Health Innovation Kent Surrey Sussex

System-wide opportunities

- A shared language for AI decisions across tiers that do not usually decide together
- Sight of where your own incentives pull against each other, at a point where finding out costs nothing
- An opportunity to learn about emerging AI capabilities
- Strategic insight into how your system responds to AI opportunities and challenges
- A documented account of the day to use for strategy and planning
- Connections between leaders who would not otherwise meet. Every respondent to the pilot survey made at least one new professional connection

How we describe the room

Participants are recorded against ten role categories: integrated care board executive and non-executive; provider executive; clinical leadership; primary care and PCN leadership; operational and service management; digital, data and transformation; local authority and social care; NHS England regional; patient, public and charity representation; and academic and innovation partners. The categories are the same for every session, so room composition can be compared across the programme.

Outputs are anonymised before they leave your organisation. The simulation runs under the Chatham House Rule, outputs are non-attributable, and no comment is attributed to an individual in the report, the synthesis or the evaluation.

Information governance

Information Governance (IG) is central to this project.

No patient data is involved

No patient data of any kind is required. No patient-identifiable information (e.g. names, NHS numbers, full DOBs) is collected, transferred, stored or analysed at any point, and no Data Sharing Agreement is required.

What information is collected

The information collected is limited to the following:

- Participant details for the day: name, job title, organisation and email address, for invitation and attendance purposes
- Dietary and accessibility requirements, where these are provided
- Decisions and observed behaviours recorded by facilitators and observers as group activity rather than individual statements
- Structured debrief responses and evaluation feedback, collected at the end of the day

How contributions are handled

The session runs under the Chatham House Rule and all outputs are non-attributable. Facilitators and observers record what groups decided and why, not who said what. Contributions are anonymised before they leave your organisation, and a system is named in the national synthesis only with that organisation's agreement.

Health Innovation Kent Surrey Sussex conducts the independent evaluation and receives anonymised participant feedback.

Legal basis and storage

Participant information is processed in line with UK GDPR, the Data Protection Act 2018 and NHS information governance requirements. It is transferred via encrypted channels, stored securely with access restricted to approved personnel and audit trails in place, and retained only for as long as the programme and its evaluation require.

CLEAR will support your organisation through the process, responding to any local IG requirements.

What we ask of you

Hosting a session is a real commitment, and it is set out plainly here rather than discovered in November.

Roles to nominate

Each participating organisation will be asked to assign key roles. This includes an executive sponsor to champion the work at leadership level and attend on the day, and a nominated lead to act as single point of contact for the CLEAR team, coordinating the invitation list, the venue and the logistics. The nominated lead should expect to commit two to three days in total, across October and November.

What you provide

Participating organisations provide:

- A venue for 40 to 50 people, with space for groups to work separately as well as together
- Catering, including refreshments on arrival and lunch, funded locally
- Recruitment of the 40 to 50 participants from across the system. This is the largest part of the commitment and the part only the host can do
- A nominated date between Monday 2 November and Tuesday 15 December 2026
- Release of staff time for the day itself, 9.30am to 4pm

What you agree to

Participating organisations also agree to:

- Take part in the independent evaluation, including baseline and post-session measurement and follow-up at three months
- Receive the written insight report at a named board, committee or forum
- Allow anonymised findings to contribute to the national synthesis

Population and system footprint

No minimum population or organisational size applies. What matters is the breadth of the room rather than the size of the system. An organisation that can convene genuinely across tiers is a stronger host than a larger one drawing from a single organisation.

How to express an interest

The programme begins with a straightforward expression of interest (EOI) process, designed to select a committed and diverse cohort of hosts. Below we outline how it will work, the information webinar and the indicative timeline.

Information webinar

We are holding a webinar on Friday 11 September 2026, from 10:00 – 11:00 covering what the simulation involves, what hosting requires and how applications are assessed.

Attendance is strongly encouraged but is not required in order to apply.

You can register for the webinar [here](#).

Application

Please complete the expression of interest form and submit it by the deadline of 5pm on Friday 18 September 2026. It takes around fifteen minutes, one submission per organisation, and closes automatically at the deadline.

Application form link is [here](#).

Notification

Applicants will be notified on Friday 25 September 2026. Selected hosts then work with the CLEAR team to confirm a date. Applications not selected for Phase 1 will be held and considered for Phase 2, and applicants will be told where that is the case.

Questions? Please contact the CLEAR team by email: info@33n.co.uk

Information webinar

Friday 11 September 2026

EOI deadline

5pm Friday 18 September 2026

Applicants notified

Friday 25 September 2026

Sessions delivered

2 Nov to 15 Dec 2026

Questions and answers

The questions below are the ones applicants ask most often. They are also covered at the information webinar.

What does it cost us? Nothing beyond a venue, catering and staff time. Simulation design, facilitation, observers, materials, the insight report, the national synthesis and the independent evaluation are all funded by the programme.

Who pays for the venue and catering? The host organisation. Where venue or catering cost is the only obstacle to a strong application, tell us on the form and we will discuss it with you.

Do we need prior AI work or expertise? No. No prior involvement in AI work is needed, and no preparation is required beyond the background material issued in advance.

How senior do participants need to be? Mainly senior, but the room is stronger with operational colleagues alongside them, because the decisions being modelled reach operational teams first.

What if we cannot fill 40 to 50 places? Tell us at application stage. The CLEAR team works with every host on the invitation list, and we would rather help you fill a gap than discover it in November.

What if our only workable dates fall outside the window? Say so on the form. Dates are confirmed with selected hosts, and a strong application will not be discounted on dates alone.

Is patient data involved? No. No patient-identifiable information is collected, transferred, stored or analysed at any point, and no Data Sharing Agreement is required.

Will our organisation be named nationally? Only with your agreement. The session runs under the Chatham House Rule and all outputs are non-attributable.

What happens if we are not selected in Phase 1? Applications are held and considered for Phase 2, and applicants are told where that is the case.

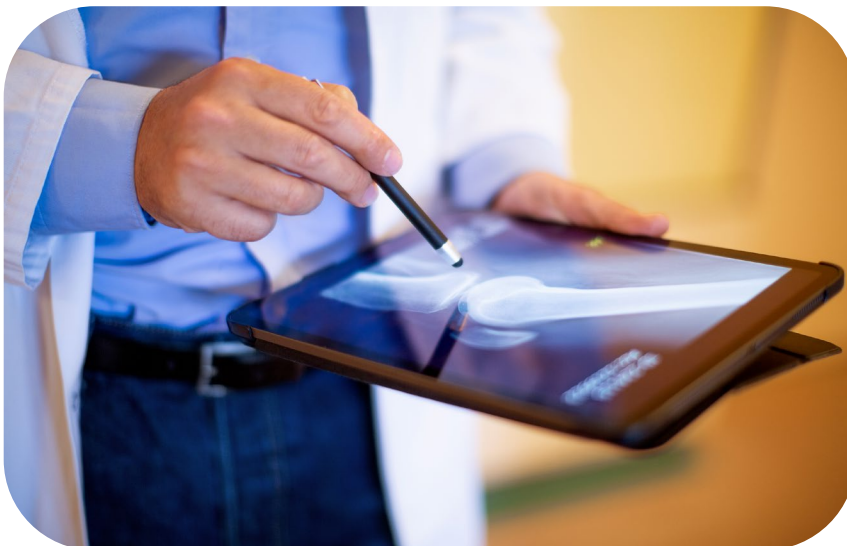
Can we run the simulation again ourselves afterwards? Yes, under a separate arrangement which would carry a cost. Please contact the CLEAR team to discuss it.

If your question is not answered here, please contact the CLEAR team by email:
info@33n.co.uk

How applications will be assessed

The criteria are published here so that applicants can judge whether this is the right moment for their system, and so that the process is transparent to everyone who applies. The first two criteria carry the most weight.

- 1. A live decision the simulation would inform.** The strongest applications name a specific choice the system faces in the next six months rather than a general interest in artificial intelligence. The programme is a rehearsal for decisions, not an introduction to the technology.
- 2. Convening reach across the system.** The ability to bring together people from multiple organisations and tiers who do not normally decide together, mainly senior but including operational colleagues. A room drawn from a single tier or organisation will not make the implications of decisions visible.
- 3. Executive sponsorship.** A named executive sponsor who will attend on the day rather than only endorse the application.
- 4. Practical readiness.** A venue for 40 to 50 people with space for groups to work separately, catering arrangements in place, and at least three workable dates within the delivery window.
- 5. Willingness to act on what emerges.** A named board, committee or forum that will receive the insight report, and agreement to take part in the independent evaluation.
- 6. National spread.** Applied by the selection panel rather than scored on the application. We are seeking coverage across NHS regions and a mix of organisation types so that the national synthesis reflects the whole system. A strong application may be held for Phase 2 on this basis, and applicants will be told where that is the case.



Project outline

From selection through to the national synthesis. Host organisations are directly involved in Stages 1 and 2, and receive the outputs of Stage 3. Stages 2 and 3 for sessions beyond the first three are subject to Phase 2 approval.

Stage 1: Selection and set-up September to October 2026

Key activities Hosts confirmed · Date and venue agreed · Nominated lead in post · Participant mix designed with the CLEAR team · Invitations issued · Background material circulated



Stage 2: Delivery November to December 2026

Key activities The simulation, 9.30am to 4pm · Structured debrief on the day · Baseline and post-session measurement · Written insight report to participants



Stage 3: Synthesis and evaluation January to March 2027

Key activities National synthesis across all sessions · Independent evaluation by Health Innovation Kent Surrey Sussex · Follow-up at three months · Insight into system readiness reported to the Department and NHS England



Part 2: Who delivers AI in Healthcare Simulation



Partners

Department of Health and Social Care and NHS England

This programme is commissioned and funded by the Department of Health and Social Care and the NHS England AI team. Colleagues from the team are shaping the scenarios and the questions with the partnership and, where capacity allows, will take part in facilitation on the day.

33n and the National CLEAR Programme

33n specialises in data-driven healthcare redesign. Our clinically led team of more than 70 specialists brings together NHS clinicians, educationalists, project managers and data engineers. We deliver the National CLEAR Programme, originally developed in partnership with Health Education England and now commissioned by NHS England, regions and local systems, to help organisations across primary and secondary care transform services through data analysis, workforce redesign and AI-enabled improvement—enhancing quality, safety and efficiency while delivering sustainable change.

East Lancashire Hospitals NHS Trust

East Lancashire Hospitals NHS Trust hosts the National CLEAR Programme and is the contracting organisation for this commission. As an NHS-to-NHS arrangement, contracting can be completed in parallel with mobilisation rather than ahead of it.

The King's Fund

The King's Fund is an independent charitable organisation working to improve health and care in England. It brings framing, credibility and convening power, and leads insight capture, same-day synthesis and the written report to participants.

Intelligence Rising

Intelligence Rising, also known as Technology Strategy Roleplay, is a registered charity whose method was developed by researchers across the Universities of Cambridge, Oxford and Wichita State. It leads scenario design and regional adaptation, and facilitation on the day.

Health Innovation Kent Surrey Sussex

Health Innovation Kent Surrey Sussex leads evaluation and impact measurement. It sits outside the delivery partnership, which is what gives that assessment independence.

Why CLEAR is delivering the programme?

AI in Healthcare Simulation sits slightly outside CLEAR's usual work, and it is worth being explicit about that. Most CLEAR projects redesign a clinical pathway using that service's own data. The programme does not analyse data or redesign a pathway. It rehearses a decision.

What carries across is the method: clinically led, facilitated, evidence-informed, and designed so that capability stays with the NHS rather than with a supplier. The contracting route is also the same, which is why the programme has been commissioned through CLEAR.

A 90-second introduction to CLEAR

A short animation explaining the CLEAR approach is available [here](#).



clearprogramme.org.uk

info@33n.co.uk

