

The National CLEAR Programme

**CLEAR Apprenticeship Programme:
Level 4 Business Analyst apprenticeship
with CLEAR Intelligence**

An opportunity for NHS North West

October 2026

Welcome to the CLEAR Apprenticeship Programme - pilot

The CLEAR Apprenticeship Programme is a **Level 4 Business Analyst apprenticeship**, fully tailored for the NHS by the National CLEAR Programme, hosted by East Lancashire Hospitals NHS trust and delivered with Richmond Training. It is funded entirely through participating trusts' existing Growth and Skills Levy. This opportunity is open to NHS trusts in the NHS England North West region.

What makes it different from other apprenticeships is that it comes with an outcome. The apprentices use the AI-driven CLEAR Intelligence approach to run a real clinical audit on a service area the trust chooses, use what it finds to define a service improvement, and begin implementing it. The trust gets qualified, AI-capable staff and a real service improvement from the same piece of work.

The cohort starts in February 2027. Trusts take part as a team, with a minimum of 5 and a maximum of 20 apprentices per trust, rather than through individual places.

01

AI capability building.

Staff trained in AI-enabled ways of working; with the skills the NHS is going to need. AI capability is a priority area and demand for structured development is high: people on the ground are concerned about AI capability, risk and safety, and want structured development in it.

02

Not just a qualification.

Most apprenticeships build skills without changing how a service runs. This is built around a live service improvement. The end point is an implementation proposal with a benefits plan that the trust can begin implementing before the apprentice finishes, where the trust is in a position to take it forward.

03

NHS tailored.

CLEAR content and Richmond Training's business analysis teaching are interleaved stage by stage, so every technique is applied to a live NHS pathway as it is taught. Apprentices are not learning business analysis in one place and doing a CLEAR project in another.

04

We know the NHS.

33n has been delivering clinically-led CLEAR projects and programmes in the NHS for years. We understand the pressures, the issues and what will and will not work on the ground.

05

It does not require new money.

The programme uses Growth and Skills Levy the trust is already paying.



Dr John Jeans
National Lead, the CLEAR
Programme

The National CLEAR Programme

Part 1: Information about the CLEAR Apprenticeship Programme



About this pack

This information pack provides details about the CLEAR Apprenticeship Programme and explains how to submit an expression of interest (EOI).

The programme starts at the top rather than with individual learners, because the decision to commit levy, ring-fence it and release a team, specifically around trust improvement priorities, sits at executive level. This pack is written for the executive and senior leaders who make that decision. We also recommend involving leads from your apprenticeship, education and clinical audit and effectiveness teams from the outset.

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

- ✓ **What CLEAR Intelligence is:** How the audit works and what it can achieve.
- ✓ **Programme overview:** How the programme is structured, and the CLEAR Intelligence audit at its core.
- ✓ **What the trust gets:** The outputs produced across the programme and from the audit.
- ✓ **Funding and delivery:** How the programme is funded and who delivers what.
- ✓ **Who can take part:** The cohort, eligibility and commitment criteria.
- ✓ **How to apply:** What the EOI form asks for, what happens next and the EOI timeline.
- ✓ **Part 2:** Background to the National CLEAR Programme, the CLEAR approach and the independent evaluation of its impact.

The standard

Level 4 Business Analyst apprenticeship, ST0117 v1.2. Maximum funding £18,000.

The CLEAR Intelligence approach maps fully into the Business Analyst standard. Business Analyst is already widely used in the NHS, but typically as a generic upskilling route with no outcome attached.

End-point assessment uses two methods: Method 1 is assessed through a project proposal and presentation; Method 2 through a portfolio and professional discussion.

For questions about the programme or the EOI process, please contact the CLEAR team at info@33n.co.uk.

What CLEAR Intelligence is

CLEAR Intelligence is an audit approach that uses artificial intelligence to support the extraction of key information from free-text sources. It combines clinical expertise with advanced AI technology, including large language models, to review free text and clinical correspondence.

Unlike traditional audits, which rely primarily on coded data, it can interpret information held within free-text notes and letters, investigation results and radiology reports. This releases information from free text that would previously have been available only from small samples. CLEAR Intelligence can now do this at scale and, by analysing this information alongside structured data fields, aims to give NHS teams previously unavailable insight into their key challenges, or to support routine audit.

What makes it different

Datasets and dashboards already exist, but they are limited to coded data, and some coded fields may be inaccurate or poorly coded.

Validating what is coded. Including free-text data makes it possible to check coded data where there is reason to think it may be inaccurate.

New lines of enquiry. Free text also holds information that is not collected in a structured way or coded at all, opening up questions that coded data alone cannot answer.

Focus area

Each participating trust will choose a priority area for its CLEAR Intelligence audit, and a team of at least five apprentices will undertake the full audit process.

What it produces

The output of the audit is an interactive interface. Teams can interrogate the data by asking questions in plain language through a chat-style tool, or view visualisations and the underlying data presented in a structured way. This can then generate a report with required data and visualisation and suggested areas of improvement and optimisation.

Why this sits at the centre of the programme

The audit gives apprentices a real clinical question, real data and a real stakeholder group to work with from month one. Everything they do afterwards, and everything they are assessed on, comes out of it.

How the programme is structured

CLEAR and Richmond Training Group deliver side by side at every stage, against shared outputs. The programme runs for approximately 15 months, with CLEAR support across the whole.

Months 1–6: CLEAR Intelligence

After a pre-launch phase to frame the clinical question, confirm data access and assess learners, apprentices scope the audit, map the current pathway, translate the clinical question into audit and data requirements, then CLEAR run, test and validate the audit. Apprentices use the findings to define and validate the improvement opportunity.

Months 7–12: Transformation

Apprentices work the opportunity up into a proposal the trust can act on: to-be process modelling, gap analysis, options appraisal, cost-benefit analysis and benefits baselining, alongside the stakeholder and clinical engagement needed to take it through the trust's own approval route. They then build their portfolio for the end of programme gateway at the end of month 12.

After gateway: Change proposal and assessment

Apprentices develop the detailed solution proposal, with factual clinical support and stakeholder access from CLEAR and procedural support from Richmond Training. End-point assessment is typically completed within three months of the end of programme gateway.

The AI Audit: months 1–6

The audit follows the 33n standard operating procedure across six phases in the first six months of the programme. Transformation and implementation follow in months 7–12.

Phase 1: Scope refinement – weeks 1–3

Phase 2: Information governance – weeks 1–8

Phase 3: Data preparation and ingestion – weeks 6–15

Phase 4: Prompt development – weeks 4–16

Phase 5: Report generation and delivery – weeks 17–23

Phase 6: Dissemination and socialisation – weeks 21–26

Information governance is the critical path. The data protection impact assessment (DPIA) goes in at week 2, before scope refinement closes, so that the review clock starts early. A trust's information governance team's responsiveness is the single biggest factor in whether the audit lands well.

Milestones: DPIA submitted (week 2), data scope locked (week 4), Data Processing Agreement signed (week 8), dataset accepted (week 15), prompt locked (week 16), report delivered (week 23), dissemination and close-out complete (week 26).

What the trust gets from this phase

A quality-assured audit report covering the current state of the pathway and potential levers for change, and a team of staff who have run the audit themselves.

Transformation: months 7–12

Once the audit report lands, apprentices turn the findings into a proposal the trust can act on. Timing depends on the trust's own approval route and the scale of the change proposed.

Stage 1: Socialisation of audit findings

Stage 2: Option identification and to-be modelling

Stage 3: Options appraisal and cost-benefit analysis

Stage 4: Clinical and stakeholder engagement

Stage 5: Implementation proposal and business case

Stage 6: Portfolio build for the end-of-programme gateway

Apprentices do the legwork of planning and engagement. Moving a proposal into implementation depends on the trust engaging with it and supporting it through its own governance.

What the trust gets from this phase

An implementation proposal with options analysis, cost-benefit analysis, to-be process, implementation plan and benefits plan, ready to take through the trust's approval route.

Who runs the audit

The apprentices do. 33n supervises, provides the tooling, holds professional accountability and signs off at every gate.

The audit is not run for the trust and handed over. It is run with the trust's own staff, under expert supervision, which is why they come out of it with the skills to do it again.

How it works across a team of apprentices

All apprentices work the whole audit, not a slice of it. Each produces their own version of the core outputs where the output allows it: their own stakeholder analysis, process model, requirements set, labelled sample and interpretation of findings.

Course work runs alongside project work. Individual work runs through each phase, with a session where the team agrees a single output before the end-of-programme gateway milestone. One agreed output leaves the phase, and the individual versions are kept as portfolio evidence.

Some steps are done once. Technical pipeline execution, the governance submission and the final report build are single-threaded, with the cohort reviewing and interrogating rather than duplicating.

The Business Analyst standard is assessed on what each apprentice can evidence as their own work, and comparing independent analysis before making a recommendation is normal business analysis practice. This is also why the minimum commitment is a team of five to eight, rather than individual places.



How it is funded

The funding comes from each trust's own Growth and Skills Levy. The trust pays Richmond Training through its digital apprenticeship account, and Richmond Training passes the agreed proportion to 33n.

Executive sponsorship

This programme starts at the top rather than with individual learners, because the decision to commit levy, ring-fence it and release a team, specifically around trust improvement priorities, sits at executive level. That is a different route to the one most apprenticeships take, and we do not expect organisations to navigate it alone.

From the point an expression of interest is accepted, 33n works alongside the executive sponsor and the trust's apprenticeship leads and clinical audit and effectiveness leads to make the case internally, settle the levy and funding arrangements with the training provider, identify the right staff for the programme, and see them through to enrolment. We have been through this process with East Lancashire Hospitals NHS Trust and will apply what we learned there to make it quicker for the organisations that follow.

Who delivers what

A CLEAR programme, hosted by East Lancashire Hospitals NHS Trust, and delivered with Richmond Training.

The National CLEAR Programme / 33n: Owns the NHS relationship and is the face of the programme. CLEAR owns and runs the CLEAR Intelligence process and delivers a validated report with suggestions for change. CLEAR then supports apprentices in the transformation phase that follows, using CLEAR methodology. 33n is subcontracted by Richmond Training.

East Lancashire Hospitals NHS Trust: Host trust for CLEAR, and pilot employer taking around 20 places on the programme.

Richmond Training: Main education provider. Delivers the business analysis teaching, coaching, compliance, and end-of-programme gateway and end-point assessment administration.

Your trust: Provides executive and clinical sponsorship, commits growth and skills levy, agrees the focus of the audit and releases a team of apprentices. The trust takes ownership of the transformation projects that follow the audit, into implementation.

The cohort we are recruiting to

The cohort starts in February 2027. Trusts take part as a team, with a minimum of 5 and a maximum of 20 apprentices per trust, rather than through individual places: the model does not work with one or two apprentices from a trust.

Geography

The cohort meets in person for a full-day workshop each month, so participating organisations need to be within reasonable travelling distance of each other. We will group confirmed places into one or more regional cohorts, keeping travel sensible for everyone taking part.

For this first cohort we are prioritising organisations in the North West, where the programme is hosted by East Lancashire Hospitals NHS Trust.

Target cohort size	30–40
ELHT places	Around 20
Places through this EOI	Around 10–20
Minimum per trust	5 apprentices
Working team size	5–8 apprentices
Maximum number of trusts	Around 4
Cohort start	February 2027

Who can take part

To take part, a trust needs to:

- ✓ Be within the target geography of the NHS North West region
- ✓ Have an executive sponsor who supports the programme
- ✓ Be prepared to commit Growth and Skills Levy funding for the next levy year to this programme
- ✓ Identify suitable learners, with names confirmed by the end of November
- ✓ Commit to an initial meeting with 33n, including executive leadership and the trust's clinical audit function, to agree the audit focus
- ✓ Provide clinical sponsorship for the audit, and access to clinical subject-matter experts and stakeholders throughout
- ✓ Confirm the information governance route and data access for the audit at pre-launch stage
- ✓ Release learners for off-the-job learning and the face-to-face days: a minimum of 348 hours over the 15 months, around 6 hours a week. This includes a full-day workshop each month and around an hour a week for the project catch-up, with the remainder as an overall target across the programme rather than a fixed weekly allocation
- ✓ Be willing to take the resulting improvement proposal/s through the trust's own approval route, with a view to beginning implementation during the programme.
- ✓ Support learners to meet English and maths requirements where applicable

Learners this suits

The programme is aimed at staff who already sit close to service change and data, and who the trust wants to develop into people who can lead AI-enabled improvement. Typically, that includes clinical audit and effectiveness staff, service improvement and transformation leads, informatics and business intelligence staff, operational and service managers, and clinicians with an interest in data and pathway redesign.

It's not an entry-level route. Apprentices act as the implementation layer on a live audit: stakeholder liaison, information governance navigation, data co-ordination, clinical validation support and project management. They need enough standing in the organisation to get access to clinical teams and data, and enough time to do the work.

Eligibility

Richmond Training assesses role and project suitability, prior learning and experience at pre-launch. The prerequisites are not complicated to meet.

- Residency criteria applies
- Commitment to attendance from both the employer and the apprentice
- English and maths requirements apply in some cases. Richmond Training will confirm this at initial assessment
- The apprenticeship cannot duplicate training someone already has, so apprentices cannot already hold a Business Analyst qualification at this level or above

Not ready for this cohort?

If the timing is not right for your organisation, you can still complete the EOI form and select the option to register interest in future cohorts.

Completing the expression of interest

The online EOI form asks for:

- Trust name, region and main contact
- Executive sponsor name and role
- The number of learners you expect to put forward (minimum five)
- Confirmation that you can commit Growth and Skills Levy funding for the relevant levy year, and confirm learner names by end of November.
- Confirmation that you can attend an initial scoping meeting with executive leadership and clinical audit
- Confirmation that you can provide clinical sponsorship and access to clinical subject-matter experts, and support the information governance and data access route for the audit
- Confirmation that you can release learners for the off-the-job and face-to-face commitment, and that implementation could begin during the end-point assessment period
- The service or service line you would focus the audit on, the key challenge and the outcome you are hoping for
- Confirmation that you are willing to take the resulting proposal through your own approval route
- Whether you are ready for this cohort, or interested in future cohorts

What happens after you submit

If you are shortlisted, we will be in touch to set up a meeting.

Between selection and the cohort starting, there is a window in which trusts secure their apprentices, with support from 33n and Richmond Training. Internal approval and identification of individuals happens here, rather than at expression of interest stage.

Before month 1 there is a pre-launch phase: audit scoping work with the executive sponsor and clinical audit team, and Richmond Training's initial assessments of learners.



Expression of interest process

We are inviting expressions of interest from NHS trusts to take part in the first cohort of the CLEAR Apprenticeship Programme, starting in February 2027.

Information webinar We will be holding an information webinar on Thursday 5 November, 10am – 11am, to tell you more about the programme and answer questions. Please register for the webinar [here](#).

Application process Please complete the Expression of Interest form and **submit it by 16 November**. The online application form is available [here](#).

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

KEY DATES



The National CLEAR Programme

Part 2: Background to CLEAR



Introducing the National CLEAR Programme

What is CLEAR?

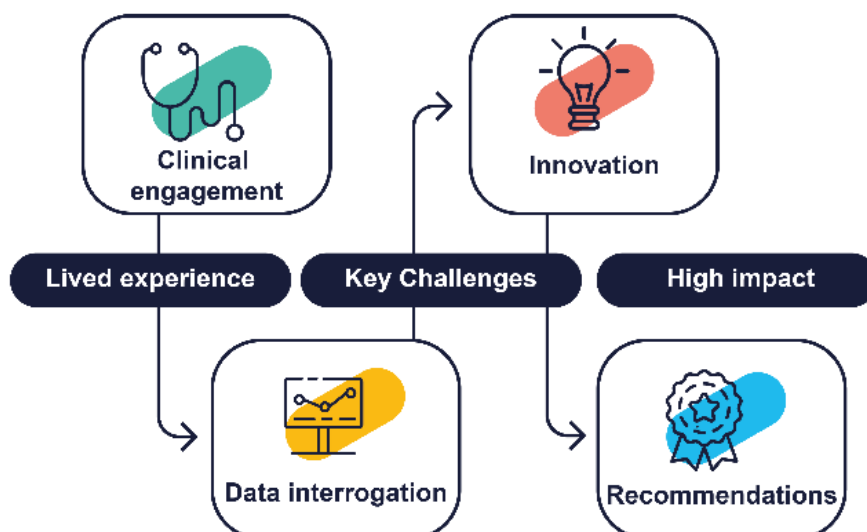
CLEAR supports organisations across the breadth of primary and secondary care in transformation, data analysis and workforce redesign to improve the quality, safety and efficiency of services and deliver sustainable change. Since launching in 2019, we have completed **more than 75 projects** across key NHS priority areas with **productivity gains of more than £50m**.

[!\[\]\(115eff7009a76771e6b7adb966005e4c_img.jpg\) Watch this 90-second animation for a quick guide to CLEAR](#)

Originally developed in partnership with Health Education England and now commissioned by NHS England, regions and systems, the Clinically Led workforceE and Activity Redesign (CLEAR) programme places clinicians at the heart of healthcare decision making and innovation.

CLEAR is hosted by East Lancashire Hospitals NHS Trust and delivered by the trust and 33n - a team of NHS clinicians, educational specialists and data analysts united in their passion to improve services, address workforce challenges and enhance patient care.

Our goal is to provide solutions to the changing needs of the healthcare system, support the sustained recovery of services, encourage staff retention and shape services for the future. The CLEAR approach involves four key stages:



The impact of CLEAR

An independent, [economic evaluation](#) of the programme found that CLEAR is cost-effective, encourages retention and is more likely to deliver results than other complex change programmes.

KEY FINDINGS OF THE EVALUATION SHOWED:

£4.19

CLEAR recommendations are more likely to be implemented because of significant levels of clinical engagement – and have an average potential return on investment for some projects of £4.19 (potentially up to £14) over 5 years for every £1 invested.

£1.90

CLEAR provides more cost-effective delivery of complex change programmes than the alternatives – resulting in a cost saving of £1.90 for every £1 spent.

1%

CLEAR appears to have a positive impact on staff retention and wellbeing – the cost of a CLEAR project is covered if one medical consultant remains in post for a year or there's 1% improvement in the annual staff retention rate within a site.

87%

Clinicians taking part in CLEAR develop valuable new skills in clinical engagement, data analysis and interrogation, and project management and leadership. Evaluation shows that 87% felt confident in the design of innovative solutions and 62% said it helped improve their chances of career progression.



The CLEAR team has energised all those who have been involved, we've seen real engagement with all staff groups and a transformational approach with measurable, realistic and deliverable outcomes which will revolutionise our theatre programme over the next year."

Kerry Broome

Deputy Chief Operating Officer, The Queen Elizabeth Hospital
(QEH) King's Lynn NHS Foundation Trust

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