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# REMO

Remote patient-targeted health monitoring to reduce clinical workload

## Deliverable 6.2

### Public summary report

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# 1. Introduction

## 1.1. Purpose of the document

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This document provides a summary of the REMO project for public dissemination. The purpose of this summary is to increase the project's visibility and make it accessible to a broader audience.

It includes a brief description of the project's background, objectives, and structure, providing a concise introduction for interested parties. Confidential information from the consortium has been omitted to ensure the content can be widely shared without any usage restrictions.

## 1.2. Related documents

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There are no other deliverables related to this document.

## 2. Public Summary

### 2.1. Background

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Healthcare systems worldwide are facing increasing pressure due to demographic ageing, shortages of healthcare professionals, rising costs, and the growing prevalence of chronic and long-term health conditions. These challenges are particularly relevant in areas requiring continuous follow-up, rehabilitation, preventive care, mental health support, and sleep-related monitoring, where traditional hospital-centred models are often insufficient to ensure timely, personalised, and sustainable care.

Remote Patient Monitoring (RPM) offers an important opportunity to address these challenges by enabling continuous or periodic monitoring outside traditional clinical environments. By combining patient-centred data collection, monitoring technologies, and AI-supported analysis, RPM can support earlier identification of health deterioration, improve follow-up after clinical interventions, and facilitate more continuous care pathways between hospitals, rehabilitation centres, assisted-living environments, and patients' homes.

Despite this potential, many existing monitoring solutions remain fragmented, disease-specific, poorly integrated into clinical workflows, or limited in their ability to provide actionable information to healthcare professionals. REMO addresses these limitations by developing and validating remote monitoring approaches that combine interoperable platforms, sensing and data collection technologies, AI-supported analysis, and clinically meaningful feedback mechanisms

Following national funding constraints and the consequent revision of the consortium and workplan, the REMO project scope has been consolidated around the clinical use cases that remain feasible with the funded consortium. The revised project focuses on two main clinical areas: SPIDA – Monitoring system for spinal disorders rehabilitation and MIND-SLEEP – Integrated Monitoring of Sleep and Mental Well-being for Preventive and Supportive Care. This consolidation preserves the core ambition of REMO: enabling more continuous, personalised, and data-driven health support while ensuring that the project remains realistic, clinically relevant, and aligned with the available consortium capacity.

### 2.2. Aims

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The REMO project aims to support the transition towards more continuous, personalised, and data-driven healthcare by integrating remote monitoring technologies into clinical and supportive care pathways. The project focuses on developing and validating solutions that can assist healthcare professionals in monitoring patients beyond traditional care settings, while also empowering patients through better follow-up, personalised feedback, and more informed health management.

In its revised scope, REMO concentrates on two clinical use cases. The first, SPIDA, addresses remote monitoring in the context of spinal disorders rehabilitation, supporting follow-up, rehabilitation progress assessment, and personalised coaching. The second, MIND-SLEEP, focuses on the integration of sleep and mental well-being monitoring for preventive and supportive care, aiming to provide insights into factors that influence health, recovery, and quality of life.

To achieve these goals, REMO will combine patient-centred data collection, monitoring devices, interoperable platforms, dashboards, and AI-supported analysis. The project will explore how data

collected in daily-life environments can be transformed into clinically meaningful information, supporting healthcare professionals in decision-making and enabling more timely and personalised interventions.

REMO also aims to ensure that the proposed solutions are aligned with clinical workflows and with key requirements related to privacy, security, usability, interoperability, and trustworthiness. By embedding remote monitoring data into practical healthcare and supportive care processes, REMO seeks to reduce workload, improve continuity of care, and contribute to more efficient and patient-centred health services.

### 2.3. Impact and Innovation

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REMO will contribute to the development of remote health monitoring solutions that support prevention, rehabilitation, and supportive care. Its main impact lies in enabling healthcare providers and related organisations to move from episodic and reactive care models towards more continuous and data-informed follow-up. This is particularly relevant in contexts where patients require monitoring outside hospital settings, such as home-based rehabilitation, preventive care, sleep monitoring, and mental well-being support.

The project's innovation is based on the integration of monitoring technologies, AI-supported analysis, interoperable platforms, and clinical workflow integration. Rather than focusing only on isolated devices or standalone applications, REMO aims to develop solutions that can be connected to broader healthcare processes and provide actionable insights for professionals and patients.

In the SPIDA use case, REMO will support spinal disorders rehabilitation by enabling remote assessment and follow-up of patient progress. This can contribute to improved rehabilitation pathways, better patient adherence, and more personalised support between clinical appointments. In the MIND-SLEEP use case, REMO will explore how sleep and mental well-being data can be combined to support preventive and supportive care, helping to identify relevant patterns and provide more meaningful feedback to patients and healthcare professionals.

The expected impact includes improved continuity of care, reduced pressure on healthcare professionals, better patient engagement, and more efficient use of healthcare resources. By focusing on feasible and clinically relevant use cases, the revised REMO project maintains its ambition to demonstrate how remote monitoring and AI-supported analysis can support more sustainable, personalised, and accessible health services.

### 2.4. The Consortium

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The REMO consortium is composed of 11 partners from three countries: Portugal, Lithuania and Romania. Following the Change Request process, the consortium was revised to reflect the actual funding status of the participating organisations and to ensure alignment between the project scope, available resources, and implementation capacity.

The consortium brings together a balanced combination of academic and research institutions, technology providers, healthcare-related organisations, and clinical expertise. This composition

ensures that the project covers the main elements required for the development, integration, validation, and dissemination of remote health monitoring solutions.

The Portuguese partners contribute expertise in project coordination, artificial intelligence, data analysis, software development, clinical knowledge, health-related validation, and dissemination. The Lithuanian and Romanian partners complement the consortium with technological, clinical, and implementation-oriented capabilities, supporting the development and validation of the project's remote monitoring solutions.

Together, the partners provide complementary competences across the remote patient monitoring value chain, including patient-centred data collection, monitoring technologies, interoperable platforms, dashboards, AI-supported analysis, privacy and security, clinical workflow integration, and stakeholder engagement.

The revised consortium is therefore well positioned to implement the two remaining clinical use cases: SPIDA – Monitoring system for spinal disorders rehabilitation and MIND-SLEEP – Integrated Monitoring of Sleep and Mental Well-being for Preventive and Supportive Care. Its added value lies in combining technological innovation with clinical relevance and practical validation, ensuring that REMO's results can contribute to more continuous, personalised, and data-driven healthcare.

### 3. Conclusions

This updated public summary reflects the revised scope and structure of the REMO project following the Change Request process. Although the project has been consolidated due to national funding constraints, its core ambition remains unchanged: to support more continuous, personalised, and data-driven health monitoring through the integration of patient-centred data collection, monitoring technologies, interoperable platforms, and AI-supported analysis.

The revised project focuses on two clinically relevant and feasible use cases: SPIDA – Monitoring system for spinal disorders rehabilitation and MIND-SLEEP – Integrated Monitoring of Sleep and Mental Well-being for Preventive and Supportive Care. These use cases provide a focused basis for demonstrating the value of remote monitoring in prevention, rehabilitation, supportive care, and personalised follow-up.

The public summary will continue to support dissemination and communication activities through the project website, social media channels, public presentations, and other communication materials. Future updates may be introduced as the project progresses, but the central message remains the same: REMO aims to contribute to more accessible, sustainable, and patient-centred healthcare by supporting the use of remote monitoring and AI-enabled health data analysis in real clinical and supportive care contexts.