Interreg Danube Region

Co-funded by the European Union

DIGI4Care

Recovery that stays connected

Policy Factsheet

Recommendations to support national decision making in taking up digital medical technologies prepared by DHI Cluster

Key messages

1. **Digital rehabilitation and remote monitoring can improve continuity of care after hospital discharge for patients with cardiovascular diseases and diabetes.**
2. **Wearable devices and clinician-supported monitoring increase patient engagement, adherence, and long-term self-management.**
3. **Integrated digital rehabilitation pathways support more coordinated, preventive, and data-driven healthcare systems.**

Learnings & Results

The DTP INTERREG project **DIGI4Care** (Digital Medical technologies reshaping the Danube Region Healthcare systems throughout the patient journeys from prevention to rehabilitation) aimed at redefining patient pathways by testing, validating and strategically integrating digital and AI solutions.
Four pilots were performed in the project.

- **Pilot 1**: Digital Health Technologies for Prevention and Screening
- **Pilot 2**: Tele-ultrasound Training for Emergency Medical Services
- **Pilot 3**: Digital Health for Post-Clinical Rehabilitation
- **Pilot 4**: Digital Solutions for Dementia and Cognitive Disorders

In Bulgaria, Pilot 3 tested **digital rehabilitation and remote monitoring for patients with cardiovascular diseases and diabetes** after hospital discharge.

The pilot used wearable and connected devices, mobile applications and clinician-facing monitoring platforms (Fitrockr) to support remote follow-up and patient engagement.

The strongest learning came from implementing wearable monitoring in home and outpatient settings and observing both its potential and practical limitations.

Key outcomes and observations:

- Clinician-supported monitoring improved compliance and engagement.
- Daily measurements increased patient awareness and self-monitoring.
- Adoption varied by digital literacy, motivation, disease severity and baseline self-care behaviours.

Connectivity and interoperability issues affected about 10-15% of participants and highlighted the need for simpler onboarding.

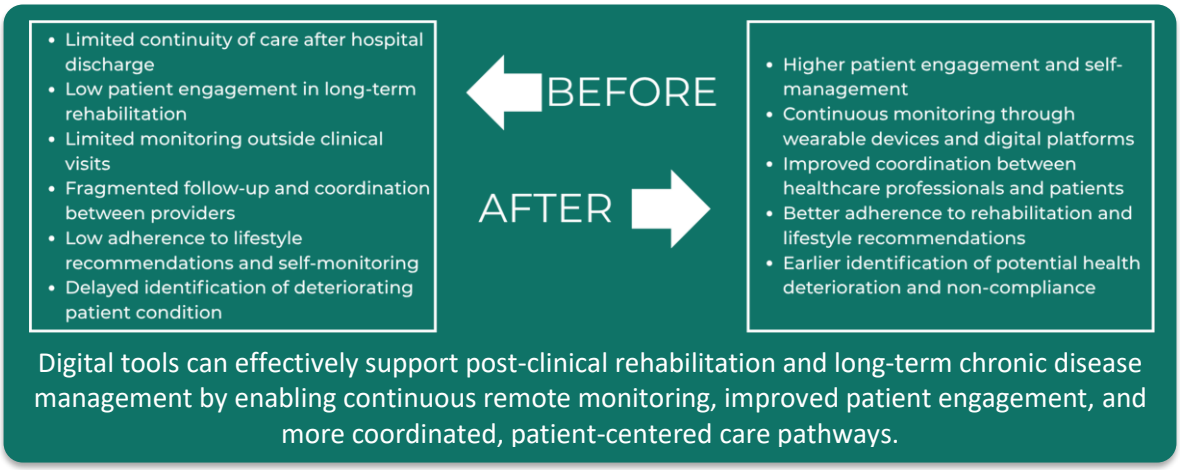
Main results achieved:

- **Increase of institutional capacity:**

Healthcare professionals gained experience in remote patient monitoring, digital rehabilitation workflows and interpretation of patient-generated health data.

- **Use of Digi4Care strategies and action plans:** The project outputs helped structure digital rehabilitation workflows and align them with chronic disease management priorities.
- **Uptake and use of DIGI4Care solutions:** Wearables, mobile applications and monitoring platforms were deployed in real-world post-clinical care.

The results are intended to provide country-related information and support evidence- based decision taking by policy makers beyond the project implementation.



Benefits for policymakers

Pilot 3 shows that digital rehabilitation and remote monitoring can support more sustainable, coordinated and patient-centred care in Bulgaria.

- **Improved continuity of care:** Remote follow-up supports the transition from hospital discharge to long-term rehabilitation.
- **Higher patient engagement:** Wearables and monitoring encourage active self-management and adherence.
- **Earlier identification of risks:** Continuous monitoring helps detect deterioration and reduced adherence earlier.
- **More efficient use of resources:** Remote monitoring can reduce unnecessary visits and prioritise high-risk patients.

Recommendations for policymakers

1. Integrate digital rehabilitation and remote monitoring into routine post-clinical care pathways.
2. Develop reimbursement and sustainability models for wearable-supported rehabilitation and remote monitoring.
3. Invest in interoperability, connectivity and simplified onboarding to support long-term implementation.
4. Train healthcare professionals to use digital rehabilitation workflows and patient-generated health data.
5. Support patient education and digital literacy to improve engagement and adherence.

DHI cluster