Interreg CENTRAL EUROPE

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RehAllianCE

A2.1 Pilot action enabling internationalization and accelerating commercialization for SMEs in MedTech sector

D.2.1.3 Report on transnational pilot action

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Content

Abbreviations

ABBREVIATION	EXPLANATION
A	Activity
AI	Artificial Intelligence
API	Application Programming Interface
AR	Augmented Reality
CE	Central Europe
D	Deliverable
EEG	Electroencephalography
EMG	Electromyography
GDPR	General Data Protection Regulation
HIPAA	Health Insurance Portability and Accountability Act
HR	Heart Rate
HRV	Heart Rate Variability
ICT	Information and Communication Technologies
IRL	Integration Readiness Level
IMU	Inertial Measurement Unit
IARA	Institute for Applied Research on Ageing
MRL	Manufacturing Readiness Level
MDR	Medical Device Regulation
MedTech	Medical Technology
meCUE	Modular Evaluation of Key Components of User Experience
MoCA	Montreal Cognitive Assessment
PP	Project Partner
RPM	Remote Patient Monitoring
SME	Small and medium sized enterprise
SpO_2	Peripheral Capillary Oxygen Saturation
SWOT	Strengths, Weaknesses, Opportunities and Threats
SDMT	Symbol Digit Modalities Test
TUG	Timed Up and Go Test
TRL	Technology Readiness Level
UX	User Experience
VR	Virtual Reality
WP	Work package

PROJECT PARNTERS	
CUAS	Carinthia UAS -non-profit limited liability company
GAPR	Upper Silesian Accelerator for Commercial Enterprises Ltd. (Lead partner)
NSB	NSBPROJECT
PBN	Pannon Business Network Association
ProMIS	Local Health Authority 4 Veneto orientale
STERN	BioRegio STERN Management GmbH

1. Executive Summary

This report presents the design, implementation and key outcomes of the transnational pilot action carried out within WP2 (A2.1) of the Interreg Central Europe project RehAllianCE. The pilot aimed to test and evaluate cross-border validation and consulting services supporting small and medium-sized enterprises (SMEs) in the development, validation and market uptake of innovative rehabilitation and healthcare technologies. The overarching objective of the transnational pilot was to assess how specialised test facilities and market-oriented consulting services can accelerate the commercialisation of technology-driven rehabilitation solutions, while strengthening user-centred development and transnational collaboration within the Central Europe (CE) region. To this end, an open call enabled SMEs from the Interreg CE programme area to access tailored services addressing different stages of product development, from technical validation and user acceptance to regulatory readiness and market entry.

The pilot was implemented by three complementary project partners (PP)/ service providers:

- **Pannon Business Network (PBN, Hungary)**, offering technology validation and testing in smart living and home-care environments;
- **Carinthia University of Applied Sciences (CUAS, Austria)**, providing living lab-based, user-centred and rehabilitation-specific validation services;
- **NSBPROJECT (NSB, Italy)**, delivering specialised consulting on market analysis, regulatory frameworks, competitive positioning and ecosystem building in digital health.

In total, eight SMEs from five CE countries participated in the pilot, representing a broad range of rehabilitation-related technologies, including robotics, wearables, assistive devices, telemetric systems and digital health applications. SMEs engaged in individual or combined services depending on their maturity level and specific needs. Key activities included technical and usability assessments, real-world and clinical validation, user and stakeholder feedback collection, regulatory and market analyses and strategic guidance for scaling and internationalisation.

The pilot demonstrated that transnational access to specialised infrastructures and expertise provides tangible benefits for SMEs. The results of the pilot project indicate that participating companies have gained greater clarity regarding their validation pathways, including a more structured understanding of technical testing, user-centered validation and the generation of clinical evidence. The services also provided valuable insights into regulatory requirements, reimbursement conditions and market access mechanisms across various European healthcare systems. By incorporating user feedback and stakeholder perspectives, product development became more closely aligned with user needs and clinical workflows. Overall, the pilot activities offered SMEs comprehensive support, enabling them to make more informed decisions, set clearer development priorities, and strengthen their marketing strategies. The combination of technical validation and market-oriented consulting allows companies to better assess development uncertainties and strategically position their solutions.

At a high level, the pilot generated several important lessons learned:

- **Demand-driven, flexible service design** is essential to address the diverse maturity levels and needs of rehabilitation SMEs.
- **User-centred and real-world validation** significantly enhances the relevance and credibility of innovative rehabilitation solutions.
- **Cross-border collaboration** enables SMEs to access expertise and infrastructures not available at regional level but requires clear coordination and communication mechanisms.
- **Early integration of market and regulatory perspectives** alongside technical validation supports faster and more robust pathways to market.

Overall, the transnational pilot action confirmed the feasibility and added value of coordinated, cross-border support services for rehabilitation innovation. The results demonstrate that combining technical validation, user-centred approaches and market intelligence within a transnational framework can effectively support the advancement of rehabilitation solutions towards market readiness. The insights generated provide a solid basis for the evaluation (*D2.3.1 Evaluation from A2.1 transnational pilot action*) and inform the further development, harmonisation and scaling of joint service offerings within RehAllianCE (*D2.3.2 Jointly developed solution based on transnational pilot results*). In this context, the pilot contributes to improving access to specialised research and innovation infrastructures, strengthening transnational collaboration, and supporting the uptake of advanced rehabilitation technologies across CE.

2. Introduction

RehAllianCE's objective is to optimise the utilisation of new technologies in rehabilitation, thereby enhancing the quality of life for residents of CE. Rehabilitation is a form of care that aims to help people regain or improve the abilities they require to lead a daily life. One of the challenges is that such care often falls on the family without sufficient support from a systemic or technological perspective. The RehAllianCE PPs are working to establish a more efficient connection between the supply and user sides with the goal of facilitating the development of technology-driven rehab products in a transnational pilot action.

The RehAllianCE project assists medical technology (MedTech) small and medium-sized enterprises (SMEs) and SMEs developing products, services and solutions for rehabilitation in achieving breakthroughs and accelerating the commercialisation of their products. To meet this need, the PP provided services tailored to the specific requirements of SMEs seeking assistance with the validation of technology-driven products and guidance on market access in the rehabilitation sector. The services are part of the transnational pilot action and include support in testing new technologies for rehabilitation. Beyond service delivery, the pilot places strong emphasis on systematic feedback from SMEs to enable continuous refinement of the service portfolio and ensure alignment with real market needs.

2.1. Goal of the Transnational Pilots

The objective of the transnational pilot action is to evaluate the testing facilities and/or consulting services of PBN, CUAS and NSB in order to ascertain the most effective way to accelerate the commercialisation and internationalisation of new technology for the rehabilitation sector. As part of the evaluation of the testing facilities and consulting services, eight SMEs from the rehabilitation sector or related fields were given the opportunity to take advantage of tailored services. SMEs from the Interreg CE programme area were invited to apply for technological and/or consulting services offered as part of an open call (*D2.1.1 Open call preparation and service catalogue for rehabilitation solution developers* and *D2.1.2. Onboarding and open call summary*)

The results of the services provided are documented in this report, which describes the implementation phase. The results of the evaluation of the services provided by the participating SMEs are summarised within *A2.3 Joint development of solutions based on results of transnational pilot and regional living labs pilots*, which provides initial insights into developing recommendations for future replication and scaling with recommendations for commercialisation and internationalisation of MedTech devices/rehabilitation products in the RehAllianCE Manual and Methodology for regional authorities.

2.2. Background and Context

The implementation of the transnational pilot aims at improving user-centred development of innovative rehabilitation solutions based on advanced technologies such as robotics and information and communication technologies (ICT).

The RehAllianCE partnership is a collaboration of six partners. CUAS, PBN and NSB provided targeted support to SMEs to test and explore new technologies with newly developed services. An overview of the five technology-enabled healthcare priorities that can help improve rehabilitation interventions and outcomes for the general population is shown in Figure 1.

Figure 1:The five technology-enabled healthcare priorities that can help improve rehabilitation interventions and outcomes for the general population identified by the RehAllianCE partners.

To this end, SMEs from the rehabilitation or related sectors were engaged in co-design and testing different types of services. This engagement took place along the product development phases, from idea/concept, implementation/evaluation and production/anchoring. Following the results of the pilots, PPs will work together to develop solutions to improve access to research and innovation international infrastructure in the field of technologies dedicated to rehabilitation. This concept establishes an EU-wide network with co-design testing capacities for medical rehabilitation measures. It also improves access to development, testing and validation platforms for rehabilitation solution developers, thereby boosting SMEs' competencies in commercialisation and internationalisation.

2.3. RehAllianCE Service Providers

The service providers were responsible for defining, implementing and delivering the services tested within the transnational pilot action.

2.3.1. PBN – Pannon Business Network Association

PBN is the collaborative centre for applied research, training and advanced manufacturing to catalyze value creation by digitalization in Hungary. Linked to industry, academia and citizens, it is facilitating digital, human-centred, resilient and green transformation with focus on business and healthy ageing through its connected divisions. PBN provides smart spaces for the digitalization in manufacturing through its digital innovation hub, **am-LAB**, as well as for the digitalization in home care in the frame of the smart senior room, **at.home**.

A key feature of PBN is its extensive international reach by having realized over 100+ international applied research projects with 500+ European partners. Backed by a wealth of industrial experience and knowledge on Hungarian and regional SMEs, the committed team of 30 with engineering and economic background are motivated to foster the reorientation of the regional economy towards health manufacturing industry.

2.3.2. CUAS - Carinthia UAS -non-profit limited liability company

With its regional roots and an international orientation CUAS is active in the priority fields of health and social affairs, business and various technology topics of engineering and constructions. Its core tasks are higher education, applied research, knowledge transfer and training. Four research centres and 19 research groups conduct research addressing socially and industrially relevant topics.

The Institute for Applied Research on Ageing (IARA) bundles different research groups and departments of CUAS. IARA deals with the effects of demographic change on society and contributes to socio-technical competences in participatory development of (tele-) rehabilitation approaches, interdisciplinary development and evaluation in living lab settings, as well as economic process analysis.

2.3.3. NSB - NSBPROJECT Venice

NSB is an Italian consulting company focused on digital technology innovation and technology transfer. Its EU Department focuses on 4 domains, namely: smart industry, smart agriculture, biobased economy and digital health. Within the digital health domain, over the last 10 years it has been supporting public and private organizations in matching the demand side with promising supply side representatives. NSB also supports SMEs and large enterprises in exploring healthcare markets in Europe and in starting interactions with public and private healthcare providers, with the following services: innovation readiness analysis (to assess whether an innovative solution is ready for a specific market), target market analysis (demand and competitive landscape), identification of market entry points, connection and engagement of healthcare ecosystems, awareness raising activities about the potential of innovative healthcare technologies among healthcare ecosystem players.

3. Description of the Pilot Setup

PPs have jointly established the framework for the international pilot action, covering the definition of the available services, preparation and execution of the open call for SMEs (*D2.1.1 Open call preparation and service catalogue for rehabilitation solution developers*), the recruitment and selection of SMEs as testers (*D2.1.2 Onboarding and open call summary*), the implementation of services (*D2.1.3 Report on transnational pilot action*) and the evaluation process (*D2.3.1 Evaluation from A2.1 transnational pilot action*).

3.1. Timeline and Process

This report focuses on the implementation phase, during which services were delivered from May 2025 to January 2026. An overview of the full transnational pilot action is provided in Table 1.

Table 1: Timeline of the RehAllianCE transnational pilot action. The implementation phase (main part of this deliverable) is framed in green.

PREPARATION	SME ONBOARDING	IMPLEMENTATION	FINALISATION
01.05.24 - 24.11.24	25.11.24 - 02.05.25	05.05.25 - 31.01.26	14.01.26 - 30.04.26
☐ **Timeline set-up** ☐ **Definition of open call documents** ☐ **Definition of service description** ☐ **Open call documents creation** ☐ **Promotion material creation**	☐ Open call publication ☐ Promotion phase ☐ Information seminar ☐ SME evaluation ☐ Consensus meeting ☐ SME selection ☐ Cooperation agreements signed	☐ Kick-off: service provider and SME ☐ Product transfer ☐ PBN/ CUAS: product validation ☐ NSB: consultation ☐ Continuous/ final meetings	☐ Report and results delivery ☐ Service evaluation by SME ☐ Cooperation evaluation by PP

3.2. Services Defined in the Transnational Pilot

The services developed by PBN, CUAS and NSB address different stages of rehabilitation product development, including validation, user acceptance, regulatory readiness and market access (Figure 2). Detailed explanation for Figure 2 is described within *D2.3.3. Evaluation from A2.2 - Pilot Actions – regional living labs*. Services were grouped into three categories (Pilot Actions A, B and C) as defined in the *Manual for Applicants* part of *D2.1.1 Open call preparation and service catalogue for rehabilitation solution developers*.

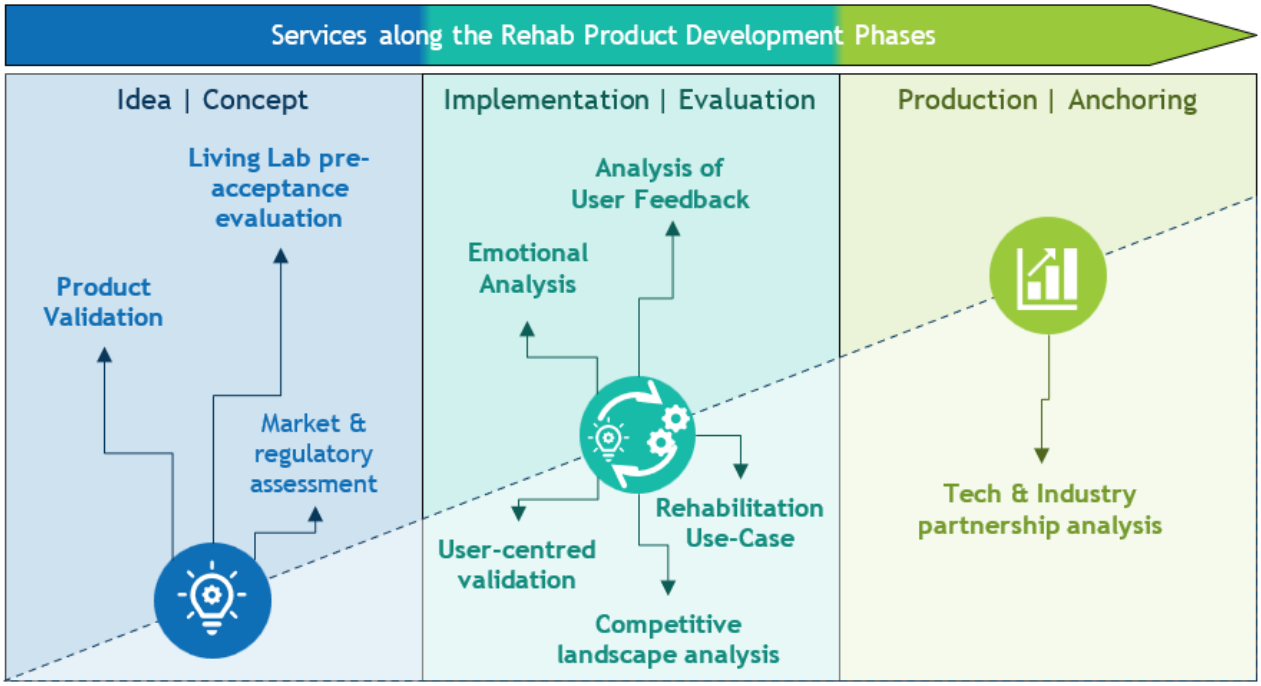


Figure 2: Services provided by RehAllianCE Service Providers along the development phases of rehab products. Scheme based on Oberzaucher 2023[1]

Within the chapters 3.2.1 - 3.2.3 a brief summary describes the offered services.

[1] Oberzaucher, Johannes. 2023. Umsetzung und Herausforderungen im Projektbereich „Digitalisierung von Pflegeprozessen". IARA-Forschungskolloquium. 13. 12. 2023. [online, 4. 4. 2024] https://www.iara.ac.at/forschungskolloquium-team-13122023/#

Pichler, C./Sidiropulu-Janku K./Ströckl D.-E./Hagendorfer-Jauk, G./Oberzaucher, J./Perchtaler M. (2023): Matchmaking Algorithm as a Tool to Tackle the Aging-Related Social Network Shrink: Results and Recommendations From the Transdisciplinary HannaH Technology Development. Official Conference Proceedings: The European Conference on Ageing & Gerontoloty Gerontology 2023. https://doi.org/10.22492/issn.2435-4937.2023.8

3.2.1. Pilot Action A - Service provided by PBN

The PBN validation service (Table 2) provides comprehensive, user-centred testing and refinement of innovative rehabilitation technologies in a real-life smart home environment. Through structured product validation, emotional and cognitive analysis (Electroencephalography (EEG), facial emotion recognition, respiratory monitoring) and detailed user experience (UX) assessment, the service evaluates usability, engagement and functional performance before market entry. By combining technical validation with human-centred insights, PBN supports SMEs in reducing development risks, improving product-market fit and accelerating the introduction of advanced rehabilitation solutions into clinical and home-care settings.

Table 2: Summary offered validation service from PBN.

Validation Service - PBN	
Service name	Product Validation & User-Centred Emotional and UX Analysis in Smart Home Environment
Service description / purpose	Comprehensive validation of rehabilitation technologies in a real-life smart home test environment ("at.home"). The service includes: (A.1) Product validation in real test environments; (A.2) Emotional analysis (EEG, facial emotion recognition, respiratory monitoring); and (A.3) User feedback analysis and UX improvement. The purpose is to assess usability, functionality, emotional-cognitive load and market readiness before clinical validation and commercialization.
Expected contribution to accelerating the introduction of new technologies in rehabilitation	Reduces development and market-entry risks through real-user testing; provides structured usability and emotional-cognitive validation; improves product refinement before clinical trials; strengthens credibility toward investors and healthcare stakeholders; supports higher technology readiness level (TRL) progression and faster commercialization.
Infrastructure used	PBN "at.home" smart senior demonstration laboratory; Augmented reality/ virtual reality (AR/VR) testing setup (Meta Quest headset); EEG headset; facial emotion recognition system; respiratory monitoring sensor; controlled smart home environment for user testing and observation.
Methods applied	Real-environment product validation; structured pre- and post-questionnaires; usability testing (Likert-scale surveys, open feedback); emotional analysis (EEG frequency band analysis, facial emotion detection, respiratory rate monitoring); strengths, weaknesses, opportunities and threats (SWOT) analysis; UX improvement recommendations.
No. of SMEs served	1
Target SME profile	SMEs developing technology-driven rehabilitation solutions (e.g., AR/VR tools, digital health applications, assistive technologies) at prototype or early validation stage (around TRL 4–6), seeking user-centred validation and market readiness support.
Expected contribution from SME	Provision of prototype/system and technical documentation; active participation in test planning; clarification of target user group and use cases; cooperation during testing sessions; openness to iterative improvements based on feedback; compliance with General Data Protection Regulation (GDPR) and ethical requirements.
Objectives for SMEs	Validate usability and emotional impact in real-life conditions; identify technical and UX improvement areas; collect structured user feedback; strengthen product-market fit; increase readiness for clinical validation and commercialization; progress toward higher TRL level.
Planned price per service	Max. €22,000

3.2.2. Pilot Action B - Service provided by CUAS

The CUAS validation (Table 3) service offers a comprehensive, user-focused approach to evaluating and refining innovative solutions. This service is built on three interconnected components. First, the Living Lab Pre-Acceptance Evaluation tests products and services in real-world environments with active user participation, providing early insights into usability and performance. Second, the User-Centered Validation Service collects detailed feedback from users through trials, surveys, and iterative testing, ensuring solutions are adapted to meet real needs effectively. Finally, the Rehabilitation Use-Case Validation examines how well solutions perform in actual rehabilitation settings, confirming their practical applicability and value for patients and professionals. Together, these components make the CUAS service a robust pathway for developing impactful, user-driven innovations.

Table 3: Summary offered validation service from CUAS.

Validation Service - CUAS	
Service name	Living Lab Pre-Acceptance Evaluation Service and Rehabilitation Use-Case Validation Service
Service description / purpose	The Living Lab Pre-Acceptance Evaluation and Rehabilitation Use-Case Validation test solutions in real-world and rehabilitation settings. They combine user feedback on usability with practical assessment in clinical workflows, ensuring solutions are both effective and ready for real-world impact.
Expected contribution to accelerating the introduction of new technologies in rehabilitation	It helps innovators identify issues early, refine solutions based on actual user needs, and demonstrate effectiveness in clinical settings. This reduces development risks, shortens the time from concept to implementation, and increases confidence among stakeholders—clinicians, patients, and organizations—that the technology is practical, effective and ready for adoption.
Infrastructure used	Clinical oximeter, Biopac device for reference measurement, smartphone camera, OptiTrack System, Electromyography (EMG) sensors, MATLAB software, Eye-tracking system
Methods applied	• Technical evaluation of the physiological parameters • Motion analysis • UX Evaluation (usability pre- and post-surveys, scenario-based use cases, Cognitive Walkthrough with Think Aloud method, Heuristic evaluation, Eye-tracking evaluation)
No. of SMEs served	2
Target SME profile	SMEs developing digital health, rehabilitation, or assistive technologies that need early validation and evidence of applicability Healthcare and rehabilitation providers interested in piloting and evaluating new technologies before large-scale deployment
Expected contribution from SME	SMEs engaging in these services are expected to contribute actively to the evaluation and refinement process. This includes providing access to their technologies, prototypes, or services and relevant technical documentation. SMEs should clearly define their intended use cases, target users, and development goals, and collaborate in planning and conducting validation activities. Active participation in feedback sessions, openness to adapt the solution based on user and rehabilitation insights, and support for data collection and analysis are also key contributions.
Objectives for SMEs	For SMEs, the main objectives and reasons for using the CUAS services are to reduce development and market-entry risks and to accelerate adoption in rehabilitation contexts. Through real-world and rehabilitation-specific validation, SMEs gain structured evidence on usability, acceptance, and applicability, enabling them to improve product quality and alignment with user and clinical needs. Additional objectives include strengthening credibility toward investors, healthcare providers, and CE partners, supporting regulatory or procurement processes, and refining business and deployment strategies.
Planned price per service	Max. €22.000

3.2.3. Pilot Action C - Service provided by NSB

NSB offers specialized consulting services (Table 4) tailored to the healthcare sector, helping SMEs, as well as public and private organizations, to understand the market needs and solutions/services required to meet them. The list of services is detailed below:

- Market and Regulatory Assessment: NSB analyses target markets (who are potential customers and market segments), helping solution providers to identify the most appropriate entry channels and identify possible regulatory constrains (e.g., medical devices regulations and standards, interoperability, rules to enter the market related to procurement procedures).
- Competitive Landscape Analysis: NSB evaluates the competitive dynamics (existing competitors, market barriers, etc.) within the healthcare industry, providing insights that help SMEs/organisations to position themselves strategically.
- Technology and Industry Partnership Analysis: NSB facilitates possible synergies with existing technologies and existing players in the identified markets to facilitate market entry. This service includes engaging healthcare ecosystems and raising awareness about innovative technologies among key players in the healthcare field.

Table 4: Summary offered consulting service from NSB.

Consulting Service - NSB	
Service name	Market and Regulatory Assessment, Competitive Landscape Analysis and Tech & Industry Partnership Analysis
Service description / purpose	The NSB consulting service focuses on analysing market conditions, regulatory frameworks and competitive dynamics relevant to the introduction of rehabilitation technologies. The service includes market and regulatory assessment, competitive landscape analysis, and technology and industry partnership analysis. It supports SMEs in exploring potential target markets and understanding the context in which their technologies may be introduced within the rehabilitation sector.
Expected contribution to accelerating the introduction of new technologies in rehabilitation	The service provides SMEs with structured information on healthcare markets, regulatory environments and competitive dynamics affecting the introduction of rehabilitation technologies. This contributes to a better understanding of the opportunities and challenges related to market entry and supports SMEs in exploring possible pathways for the introduction of their solutions.
Methods applied	Onboarding meetings with SMEs to understand the characteristics of the technologies and target markets Desk research and structured market analysis across selected European countries Assessment of regulatory frameworks, reimbursement conditions and market barriers Competitive landscape analysis focusing on comparable technologies and solutions Identification and mapping of relevant stakeholders within the rehabilitation and healthcare ecosystem Prioritisation of stakeholders by SMEs and outreach to selected contacts External expert evaluation providing an independent perspective on the analysed technologies
No. of SMEs served	5
Target SME profile	SMEs developing technology-driven rehabilitation products, services or solutions within the Interreg CE programme area. The service targets companies with relatively advanced maturity levels, typically around TRL 8, Manufacturing Readiness Level (MRL) 6 and Integration Readiness Level (IRL) 8. Companies are expected to have at least one recent positive reference in the rehabilitation domain, demonstrate potential social impact on quality of life or functional abilities, and show a good match with the technology-rehabilitation areas addressed within the NSB framework.
Expected contribution from SME	Participating SMEs are expected to actively engage in the consulting process by providing relevant information about their technologies, development stage and target markets. Companies participate in online meetings with the service provider, review the analytical reports prepared within the service, and contribute to the identification and prioritisation of relevant stakeholders related to their solutions. Active communication and timely exchange of information with the service provider are also expected throughout the pilot activities, together with the provision of feedback on the service.
Objectives for SMEs	To support informed decision-making regarding the potential introduction of their technologies into new healthcare markets. Through the insights generated by the service, SMEs are expected to explore potential market opportunities, assess possible entry pathways and identify relevant stakeholders within the rehabilitation ecosystem that may support future development or collaboration.
Planned price per service	Max. €20.000

3.3. Overview of SMEs participating in the Pilot

Eight SMEs from five CE countries were selected through the open call procedure. (Table 5). The participating companies represent a diverse range of technological solutions, including robotics, wearables, assistive devices, telemetric tools and digital health platforms, and span different maturity levels from prototype to near-market solutions.

Table 5: Selected SMEs trough the open call procedure to take part in the transnational pilot action.

SME Name	Country	Technological Focus	Service Provider (PBN/CUAS/NSB)	Service Used	Maturity Level of Solution (TRL)
GAMETHERAPY s.r.o.	Slovakia	Health app	PBN	Module A Validation Service	5
DIGITALREHAB SRL	Italy	Robotics	CUAS	B.2.1 Motion Analysis, B.3.2 Domain Specific Focus Group	5
ilogs smartwear GmbH	Austria	Health app	CUAS	B.1.2 Acceptance and Usage Analysis, B.3.1 UX Analysis, B.3.2 Domain Specific Focus Group	7
Pro-PLUS S.A.	Poland	Telemetric tools	NSB	Module C Consulting Services	9
imaginary srl	Italy	Telemetric tool	NSB	Module C Consulting Services	9
Gabel Tech S.r.l.	Italy	Assistive devices	NSB	Module C Consulting Services	9
Morecognition srl	Italy	Health app	NSB	Module C Consulting Services	8
ACTIMI GmbH	Germany	Wearable	NSB	Module C Consulting Services	8

4. Pilot Implementation and Results

During the implementation phase, the SMEs worked closely with a service provider through structured activities, including initial consultations, technical and usability assessments, validation processes, guidance on legislation and standards, and roadmap development. While the services were tailored to the specific objectives of each SME, they followed a common framework to ensure comparability of results.

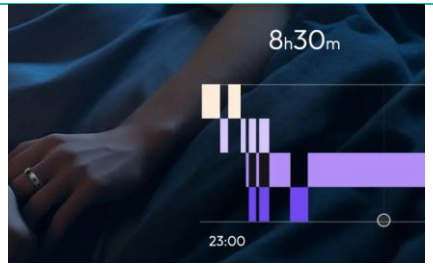
Through various use cases focused on validating new technologies or supporting market launch strategies, the pilot demonstrates that access to specialized expertise, advanced testing environments and structured cross-border collaboration can provide significant benefits to SMEs. The services helped participants gain a deeper understanding of validation methods, regulatory frameworks and potential market entry pathways.

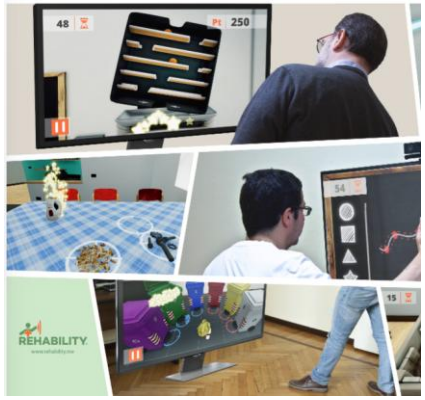
Although technical outcomes varied depending on the maturity and type of solution, the findings consistently highlighted improved clarity regarding product performance, usability and strategic positioning.

4.1. Use Cases Addressed

The pilot addressed a broad set of rehabilitation use cases, including neurological, orthopaedic and cardiac rehabilitation, home-based and remote therapy, and data-driven monitoring and personalisation of rehabilitation processes (Table 6). These use cases illustrate the diversity of challenges and opportunities faced by rehabilitation technology developers.

Table 6: SMEs profiles within the pilot action.

	SME	TECHNOLOGY FOCUS	TECHNOLOGY FOCUS	TECHNOLOGY DETAILS	SERVICE TYPE
PBN	**GAMETHERAPY s.r.o.** (SK)		**Augmented reality (AR)-based diagnostic tool for neurological conditions**	**Technology type:** ▪ Health: Orthopedy, mental, stroke ▪ ICT: Telemedicine, health app **AR Diagnostics for Neurology** ▪ Modular motor, cognitive & balance tests via AR/VR headset ▪ Targets Parkinson's, Alzheimer's & multiple sclerosis ▪ Improves diagnostics & rehab through gamification and personalization	Module A Validation Service
CUAS	**ilogs healthcare GmbH (AU)**		**Remote rehabilitation platform (tele-rehab / monitoring)**	**Technology type:** ▪ Robotics: Exoskeleton, wearable ▪ ICT: Telemedicine, health app **AuReha - Smart Home Rehab** ▪ Sensor-shirt & app with serious games for guided home training ▪ Virtual coach & personalized sessions increase engagement ▪ Web platform enables therapists to monitor & adapt therapy remotely	B.2.1 Motion Analysis B.3.2 Domain Specific Focus Group
CUAS	**DigitalRehab srl (IT)**		**Sensor-based rehabilitation system (movement tracking, serious games)**	**Technology type:** ▪ Health: Orthopedy, mental, stroke ▪ ICT: Telemedicine, health app **SmartRing - Daily Rehab Insights** ▪ Titanium ring tracks sleep, stress, heart rate (HR), Peripheral Capillary Oxygen Saturation (SpO2), heart rate variability (HRV), activity & temperature ▪ Real-time data supports personalized rehab & health management ▪ Integrated into JAMES platform to extend rehab into daily life	B.1.2 Acceptance and Usage Analysis B.3.1 UX Analysis B.3.2 Domain Specific Focus Group

	SME	TECHNOLOGY FOCUS	TECHNOLOGY FOCUS	TECHNOLOGY DETAILS	SERVICE TYPE
NSB	**Imaginary srl (IT)**		**Game-based rehabilitation (Health apps / digital rehab)**	**Technology type:** ▪ Uses hand-tracking AR for tests like 9-Hole Peg, Montreal Cognitive Assessment (MoCA), Reach Test ▪ Captures motion, reaction time & cognitive data with high precision **REHABILITY® - Gamified Neuro Rehab** ▪ Gamified motor & cognitive therapy via VR at home and clinics ▪ TV-connected home kit with camera-based body tracking ▪ Remote supervision boosts engagement, adherence, and outcomes	Module C Consulting Services
NSB	**Pro-PLUS S.A. (PL)**		**Tele-rehabilitation system cardiac rehab)** **Medical device (remote monitoring & therapy)**	**Technology type:** ▪ Telemetric tools **Pro-PLUS - Home Cardiac Rehab** ▪ Telerehab system for post-stroke patients, used in Poland since 2018 ▪ Enables safe, remote cardiac training with medical device-grade tech ▪ Allows 3x more patients to be treated through remote supervision	Module C Consulting Services
NSB	**Gabel Tech S.r.l. (IT)**		**Assistive / rehabilitation product (incl. physical activity support)** **Health-related services (distribution-focused)**	**Technology type:** ▪ Assistive devices ▪ Health apps ▪ Wearables **Smart Poles for Rehab & Monitoring** ▪ Digital walking poles track coordination & movement metrics ▪ App & web platform provide performance stats & evaluations ▪ Measures 30+ parameters incl. angles, speed, HR & kcal	Module C Consulting Services

	SME	TECHNOLOGY FOCUS	TECHNOLOGY FOCUS	TECHNOLOGY DETAILS	SERVICE TYPE
NSB	**Morecognition (IT)**		**Wearables (EMG, Inertial Measurement Unit (IMU))** **Rehabilitation monitoring system (biofeedback, motor assessment)**	**Technology type:** ▪ Health apps ▪ Wearables **REMO – Smart Motor Rehab** ▪ Combines EMG & Inertial Measurement Unit (IMU) sensors for real-time motion & muscle tracking ▪ Artificial intelligence (AI) powered biofeedback enables personalized neuro & ortho therapy ▪ Clinicians gain precise data to optimize recovery strategies	Module C Consulting Services
NSB	**ACTIMI GmbH (DE)**		**Digital health infrastructure** **Medical-certified backend / platform service**	**Technology type:** ▪ Health apps ▪ Telemetric tools ▪ Wearables **Backend for Digital Health** ▪ Application programming interface (API) first platform for integrating wearables, devices & health APIs ▪ Scalable infrastructure for remote patient monitoring (RPM) ▪ Medical device regulation (MDR) IIa, GDPR & Health Insurance Portability and Accountability Act (HIPAA) compliant – fast & secure health app development	Module C Consulting Services

4.2. Activities Conducted per Service Provider

This section summarizes the services provided to each company. Each service provider achieved specific technical, organizational and innovation-related outcomes tailored to their respective expertise and service portfolios.

Across all pilot activities, several common themes emerged. Early and continuous involvement of users and stakeholders proved crucial for identifying usability challenges, enhancing acceptance and ensuring relevance in real-world rehabilitation contexts. Structured feedback loops, combining qualitative, quantitative and, where applicable, physiological data, enabled iterative refinement of solutions and supported evidence-based development.

Furthermore, the pilot highlighted the importance of clearly defined coordination mechanisms, including roles, communication structures, and documentation processes, to ensure effective cross-border collaboration.

4.2.1. PBN – Validation services

Table 7: Service A.1: Product Validation of Different Maturity Levels Before Market Access, Service A.2: Emotional Analysis – qualitative analysis and Service A.3: Analysis of User Feedback & Improvement of UX tested by PBN with the participation of GAMETHERAPY s.r.o.

Category	Description / Summary	Input (Partner Contribution)
Validation Process (Service A.1)	The VIRADIA AR-based neurological assessment tool (TRL 5) was validated in real-life pilot conditions prior to market entry. Group testing was conducted mainly with elderly Silver Club members, complemented by younger adults, to assess age-specific usability requirements. Standardized neurological tasks (9-Hole Peg Test, Functional Reach Test, Timed up and go test (TUG), Symbol Digit Modalities Test (SDMT), MoCA) were performed in AR format. Both qualitative (user perceptions) and quantitative (task difficulty, clarity, assistance need, usability ratings) data were collected to evaluate market readiness. The validation confirmed strong usability and engagement while identifying areas for refinement (e.g. instruction clarity, hand-tracking precision, and onboarding).	PBN provided the at.home smart senior demonstration laboratory, recruited and coordinated Silver Club members, designed pilot testing protocols, structured qualitative and quantitative data collection tools, supervised group testing sessions, ensured GDPR-compliant data handling, and compiled a structured validation report supporting market-readiness assessment
Key Achievements	Confirmation that the solution is suitable for elderly users and shows high acceptance across age groups. Successful validation of product-market readiness at prototype level (TRL 5). Identification of concrete improvement areas to increase accessibility and reduce onboarding friction before clinical validation and commercialization.	The structured group-testing approach with elderly participants, systematic feedback collection and controlled pilot environment enabled robust evidence generation supporting market readiness.
Emotional Analyses (Service A.2)	A comprehensive emotional response analysis was conducted through three modules: facial recognition (monitoring facial expressions to detect basic emotions), EEG analysis using the Enobio 8 wireless headset (brainwave frequency bands and cognitive load ratios), and respiratory monitoring (measuring breathing patterns as physiological arousal indicators). Results indicated predominantly neutral and calm emotional states, mild positive engagement, and no signs of excessive stress or cognitive overload. The findings confirmed emotional safety and cognitive appropriateness of the AR solution for elderly users.	PBN deployed and calibrated facial recognition software, the Enobio 8 wireless EEG headset and respiratory monitoring equipment; conducted signal processing and descriptive interpretation of emotional patterns; and integrated emotional findings with usability observations to provide a comprehensive emotional validation report.

Category	Description / Summary	Input (Partner Contribution)
Analysis of User Feedback & Improvement of UX (Service A.3)	A structured quantitative UX analysis was conducted using a 33-item questionnaire (Likert scales and open responses). Emotional data (A.2) were integrated with functional validation data (A.1). Results showed high visual appeal and strong gamification-driven engagement, but highlighted friction points such as unclear instructions in specific tasks, need for stronger in-app feedback and ergonomic issues for glasses-wearers. Concrete UX optimization recommendations were defined to increase autonomy and user satisfaction.	PBN designed and administered the questionnaire, anonymized and statistically processed data, performed qualitative content analysis of open feedback, integrated emotional and functional datasets, and formulated targeted UX optimization guidelines to improve engagement, clarity and ease of use
Unexpected Outcomes	Emotional responses were more neutral than anticipated; AR use did not generate elevated excitement or stress. Some task-related movement variability was linked to instructional ambiguity rather than motor limitations.	The inclusion of multimodal emotional monitoring revealed deeper behavioural patterns that would not have been detected through questionnaires alone.
Challenges in Service Implementation	Some elderly participants required initial onboarding assistance; occasional technical recognition issues in fine motor tasks; headset comfort challenges for glasses-wearers.	PBN provided real-time technical support, facilitated user assistance, adjusted setup procedures, provided iterative refinement recommendations based on observed friction points, and documented technical improvement needs for further development.
Coordination & Communication	Structured onboarding, regular coordination meetings and email exchanges, pilot scheduling, feedback validation sessions and result alignment between PBN and GAMETHERAPY.	PBN coordinated scheduling, participant management and communication, compliance procedures, reporting structure, and maintained continuous communication throughout preparation, implementation and evaluation phases to ensure smooth pilot execution.
Preparation 11/24 – 04/25	**Cooperation Agreement signed on:** 29.04.2025	**Date of initial consultation:** 05.05.2025
Implementation 05/25 – 01/26	**Start date:** 10.07.2025	**End date:** 10.09.2025	**Completed as planned** ☒ yes ☐ No
Evaluation 12/25 – 04/26	Completed ☒	Ongoing ☐	Not started ☐

TECHNICAL, ORGANISATIONAL & INNOVATION RESULTS

The pilot confirmed the technical feasibility of the VIRADIA AR-based neurological assessment tool in PBN's smart home validation environment. Starting from TRL 5, the prototype proved operational across all implemented modules (motor, balance, mobility and cognitive tasks), with stable system performance under structured testing conditions. No fundamental technical redesign was required; instead, the validation highlighted targeted improvements at interaction level. In addition to functional validation, multimodal emotional monitoring (EEG, facial recognition and respiratory analysis) was conducted to ensure that system use did not generate excessive cognitive load or stress, particularly among elderly participants. The results supported the overall technical suitability and safe interaction profile of the solution in a non-clinical environment.

The most relevant prototyping progress concerned usability refinement. Testing identified the need for clearer in-app instructions, stronger real-time feedback mechanisms, improved hand-tracking precision in fine motor tasks, and better ergonomic adaptation for glasses-wearers. Importantly, some observed performance variability was linked to instructional ambiguity rather than algorithmic or hardware limitations, indicating that interface optimization can directly improve task reliability. The pilot therefore generated concrete, development-ready recommendations supporting progression toward higher TRL and clinical validation readiness. User acceptance results represent a key innovation outcome; participants rated the system as engaging and visually appealing, with gamification elements positively influencing motivation and willingness for repeated use. A strong intention to recommend and regularly use the solution supports the viability of AR-based neurological assessment not only as a diagnostic tool, but also as a preventive and adherence-enhancing solution. This confirms the innovation potential of combining AR interaction with structured cognitive-motor testing in a home-like context.

From an organisational perspective, the pilot demonstrated that structured elderly group testing can be effectively integrated into a transnational validation workflow. The inclusion of both digitally experienced younger adults and older Silver Club members enabled age-comparative insights and highlighted the importance of structured onboarding for reducing perceived complexity. The integration of qualitative, quantitative and physiological data created a comprehensive validation framework. Clear testing protocols, GDPR-compliant data handling and predefined evaluation criteria ensured smooth execution. Regarding cross-border collaboration, the cooperation between PBN (Hungary) and GAMETHERAPY (Slovakia) benefited from clearly modularized service design, transparent role allocation, and regular coordination communication through meetings and email exchanges. Iterative feedback loops allowed rapid clarification of technical observations and prioritization of development actions. While synchronizing prototype updates with fixed pilot timelines posed a practical challenge, continuous communication and structured reporting mitigated delays. The pilot demonstrated that geographically distributed validation can effectively accelerate SME product development when expectations, documentation standards and communication channels are established from the outset.

Overall, the pilot strengthened the SME's technical positioning, provided actionable UX optimization pathways, and confirmed the added value of coordinated translational validation services in accelerating market readiness of advanced rehabilitation technologies.

4.2.2. CUAS Validation Services

Table 8: Service B.1: Living Lab pre-acceptance evaluation (Module B.2.1 Motion Analysis) and Service B.3: Rehabilitation Use-Case validation (Module B.3.2 Domain Specific Focus Group) tested by CUAS with the participation of DIGITALREHAB SRL.

Category	Description / Summary	Input (Partner Contribution)
Validation Process	The evaluation involved a combination of technical motion analysis and UX assessments of the AuReha system. Activities included controlled laboratory testing with healthy users to measure movement accuracy, system feedback, and usability through methods like Think Aloud sessions, heuristic evaluations, and post-surveys. The findings highlighted promising system performance but also identified certain challenges.	The SME provided the sensorized shirt and hardware components, and the partner provided the technical infrastructure necessary for data collection and testing. This includes providing access to the AuReha prototype, laboratory infrastructure, sensor equipment, software tools, and methodological guidance, as well as supporting structured evaluation protocols.
Key Achievements	The main results of the evaluation demonstrated that the AuReha system has strong potential as a wearable rehabilitation solution capable of accurately capturing upper-limb movements while fostering engaging interaction. Technically, the system showed acceptable movement pattern recognition and robust sensor data, and user feedback indicated a generally positive perception of system engagement.	Successes were made possible through the partner's laboratory and infrastructure, technical expertise, and support during testing, which facilitated comprehensive data collection and analysis.
User/Participant involvement	The technical participant group consisted of 10 healthy adult volunteers who participated in the Motion Analysis. The UX research participant group consisted of an additional five scientists from the field of physiotherapy, with relevant experience in rehabilitation topics. In addition, these participants participated in completing pre-prepared questionnaires.	The partner's role included recruiting participants by leveraging professional networks and ensuring they met criteria related to rehabilitation experience, familiarity with technology, and relevance to the system's intended use. This ensured that participants' insights were pertinent and informed system development.
User/Participant Feedback Collection	Feedback was gathered through a mixture of qualitative and quantitative methods. Qualitative evaluation included different UX methods during individual sessions and observations, collecting task success metrics, error counts, and post-survey responses. Data addressed usability barriers, trust, confidence, and system feedback. The quantitative evaluation included the collection of technical data during measurements with the AuReha Smart Shirt and EMG sensors, which were then processed and analyzed using the MATLAB system.	The partner conducted the usability sessions, documenting participant interactions, supporting recordings, and performing UX evaluations. Partner helped analyze qualitative feedback, identifying key usability issues and areas for improvement. On the technical side, the partner provided lab, Motion Analysis aquipment and sensor data acquisition hardware, enabling the collection of movement and EMG data during tests. Their technical support facilitated the processing and analysis of movement accuracy, sensor performance, and system robustness.
Rehabilitation Use-Case validation	The validation activities involved functional testing of the system's movement capture during simulated rehabilitation exercises performed by	The partner's support included supplying the equipment, providing technical resources, assisting with system calibration, and facilitating the testing

Category	Description / Summary	Input (Partner Contribution)
	healthy users. The findings revealed that the system could reliably recognize and reproduce intended movement patterns, with some variability related to system setup and feedback clarity.	process. Their involvement was critical in enabling accurate movement measurement and interpretation, which highlighted the system's potential for effective rehabilitation support.
Unexpected Outcomes	An unexpected outcome was the extent to which usability and feedback issues directly influenced measured movement variability and muscle activation. Participants performed additional corrective movements not due to physical difficulty but due to uncertainty in system response and target recognition.	The partner's activities, such as focusing on early-stage system testing and deploying prototype features, may have contributed to these challenges by highlighting issues in user guidance and feedback mechanisms that require further development.
Challenges in Service Implementation	Common issues included uncertainties about system status (e.g., connection, charging), sensor placement, calibration procedures, and understanding feedback. These challenges affected user confidence and flow during interaction.	The partner played a key role by managing the technical troubleshooting, supporting users during system setup, and working on refining the system's guidance and feedback mechanisms to reduce uncertainty and improve usability.
Coordination & Communication	To ensure smooth collaboration, the CUAS team and AuReha team engaged in regular communication through meetings, emails, and shared documentation.	The partner actively contributed by coordinating the activities and participating in planning, providing technical support during testing, and collaborating on data analysis and evaluation. Partner's involvement helped align objectives, facilitated quick resolution of technical issues, and supported iterative improvements based on testing insights.
Preparation 11/24 – 04/25	**Cooperation Agreement signed on:** 13.06.2025	**Date of initial consultation:** 28.04.2025
Implementation 05/25 – 01/26	**Start date:** 11.07.2025	**End date:** 31.01.2026	**Completed as planned** ☒ yes ☐ No
Evaluation 12/25 – 04/26	Completed ☒	Ongoing ☐	Not started ☐

Table 9: Service B.1: Living Lab pre-acceptance evaluation (Module B.1.2 - Acceptance and Usage Analysis) and Service B.3: Rehabilitation Use-Case validation (Module B.3.1 UX Analysis, Module B.3.2 Domain Specific Focus Group) tested by CUAS with the participation of ilogs smartwear GmbH.

Category	Description / Summary	Input (Partner Contribution)
Living Lab pre-acceptance evaluation	A single-arm, prospective laboratory evaluation was conducted combining technical validation and UX assessment. Technical performance of NextRing was benchmarked against gold-standard reference systems (Biopac ECG, clinical pulse oximeter, thermistor, video-based step annotation). UX and product readiness were assessed using the meCUE questionnaire and scenario-based heuristic evaluation. HR and SpO_2 showed moderate to good agreement with reference systems, suitable for wellness and trend monitoring. Step counting was accurate during structured, rhythmic activities, but less reliable during irregular movement. Users rated usability positively, indicating high ease of use and learnability, supporting pre-acceptance readiness.	CUAS designed and executed the full evaluation protocol, provided laboratory infrastructure, reference devices, data analysis tools (MATLAB), and UX expertise. CUAS enabled synchronization of physiological signals and structured UX testing, making robust comparison and acceptance assessment possible.
User/Participant involvement	The pilot project included 12 healthy adult volunteers. The user group involved in the rehabilitation use-case validation served as proxies for future rehabilitation users in this early-stage evaluation. Participants completed structured laboratory sessions that simulated realistic usage conditions. A time schedule for participation in the laboratory was created, with one session lasting approximately 2 hours per participant.	CUAS recruited and screened participants to match inclusion criteria (healthy adults). CUAS ensured participants' scheduling, obtaining consent, standardized participation and consistent testing conditions.
User/Participant Feedback Collection	User and participant feedback was collected through a combination of quantitative physiological measurements, standardized UX questionnaires, and qualitative usability observations. Data included HR, oxygen saturation, temperature trends, and step counts, as well as structured feedback on usability, perceived usefulness, emotional response, and intention to use collected via the modular evaluation of key components of UX (meCUE) questionnaire. Additional feedback was gathered through scenario-based tasks that assessed real-world interaction, acceptance, usability risks, and validation of assumptions regarding everyday use.	CUAS was responsible for designing the feedback collection methodology, administering questionnaires, moderating use-case scenarios, and documenting usability issues. CUAS also processed and analyzed all quantitative and qualitative data, identified recurring issues and risks, and translated user feedback into structured findings and recommendations in the final report.
Rehabilitation Use-Case validation:	The rehabilitation use-case validation focused on assessing whether the NextRing system is suitable for rehabilitation and preventive care contexts, particularly for continuous, non-invasive monitoring in everyday environments. Evaluation activities combined technical performance analysis with UX assessment to determine whether the device supports meaningful monitoring, trend awareness, and user engagement relevant to rehabilitation scenarios.	CUAS enabled these results by providing laboratory infrastructure, clinical-grade reference equipment, methodological expertise, and analytical support. The partner also conducted all evaluations and interpreted findings specifically in relation to rehabilitation requirements and constraints.

Category	Description / Summary	Input (Partner Contribution)
	The main results showed that NextRing provides reliable trend monitoring for parameters such as HR, oxygen saturation, temperature, and activity levels, while maintaining a generally positive usability profile. These results support its potential role as a supportive tool in rehabilitation and wellness contexts rather than as a diagnostic device.	
Unexpected Outcomes	Some evaluation results differed from initial expectations. Step count accuracy was substantially lower during irregular or non-standard movements, revealing limitations in algorithm robustness. HRV could not be fully validated due to restricted access to raw inter-beat interval data from the device. Additionally, perceived usefulness ratings were lower than usability ratings, indicating a gap between ease of use and perceived value.	These unexpected outcomes were primarily driven by the partner's decision to include challenging real-world movement scenarios and to transparently report technical limitations and data-access constraints.
Challenges in Service Implementation	Several challenges were encountered during service implementation, including motion-related sensor artifacts, smartphone compatibility issues (particularly on Android devices), synchronization inconsistencies, and limited transparency of proprietary data processing algorithms.	CUAS played a key role in managing these challenges by documenting issues systematically, excluding unreliable data where necessary, and clearly distinguishing between technical limitations and user-related effects. The partner also formulated concrete recommendations to mitigate these challenges in future development iterations.
Coordination & Communication	Coordination and communication were ensured through a structured evaluation protocol that integrated technical validation and UX assessment into a single coherent study. Regular documentation, data alignment, and structured reporting supported smooth collaboration.	CUAS acted as the central coordinating partner, aligning evaluation design, execution, analysis, and reporting. The partner facilitated communication between SME and CUAS on one side, and the technical and UX evaluation streams on the other side and ensured that findings were consistently interpreted and clearly communicated to all stakeholders.
Preparation 11/24 – 04/25	**Cooperation Agreement signed on:** 26.06.2025	**Date of initial consultation:** 04.03.2025
Implementation 05/25 – 01/26	**Start date:** 13.05.2025	**End date:** 20.11.2025	**Completed as planned** ☒ yes ☐ No
Evaluation 12/25 – 04/26	Completed ☒	Ongoing ☐	Not started ☐

TECHNICAL, ORGANISATIONAL & INNOVATION RESULTS

The CUAS pilot activities confirmed the technical feasibility of the evaluated rehabilitation solutions while highlighting the importance of iterative refinement, particularly at the usability and interaction level. Both the AuReha system and the ilogs smartwear solution demonstrated stable core functionality and the ability to generate meaningful data in controlled environments. The technologies proved suitable for their intended purposes, movement tracking and physiological monitoring, without requiring fundamental redesign. However, the pilot revealed that performance is strongly influenced by user interaction factors such as clarity of feedback, system transparency, and guidance. In several cases, variability in results was linked not to technical limitations but to uncertainty in system use. As a result, the main prototyping progress focused on improving usability, feedback mechanisms, sensor robustness, and data accessibility, supporting further advancement toward real-world deployment and higher maturity levels.

Cross-country collaboration within the pilot proved both valuable and feasible, particularly due to structured coordination and clear methodological frameworks. A key enabler was the role of CUAS as a central coordinator, ensuring alignment between technical validation and UX evaluation. Standardized protocols, shared documentation, and regular communication enabled efficient collaboration across partners and countries. Access to specialized infrastructure and expertise further enhanced the value of the collaboration, allowing SMEs to benefit from advanced testing environments not available locally. At the same time, challenges emerged in synchronizing activities, managing technical complexity, and aligning expectations between partners. Issues such as system setup, calibration, and interpretation of results required close coordination and active support. These challenges were largely mitigated through continuous communication, iterative feedback loops, and transparent reporting, demonstrating that clearly defined roles and processes are critical for effective transnational cooperation.

The pilot generated several important insights for the development of rehabilitation technologies. Most notably, it highlighted the strong interdependence between technical performance and UX: usability issues directly affected measurable outcomes and user behaviour, emphasizing the need for integrated, user-centred design approaches. The value of early-stage validation in realistic settings also became evident, as it enabled the identification of key issues before clinical deployment and reduced development risks. Furthermore, combining quantitative technical data with qualitative user feedback proved essential for obtaining a comprehensive understanding of system performance and acceptance. Finally, the pilot underlined that high usability alone is not sufficient, solutions must also demonstrate clear perceived value and fit within real-world rehabilitation contexts to achieve adoption. Overall, the CUAS activities demonstrated that structured validation, combined with cross-border collaboration, can significantly strengthen both the technical robustness and market readiness of innovative rehabilitation solutions.

4.2.3. NSB Consulting Services

Table 10: Service C Consulting Services) tested by NSB with the participation of Pro-PLUS S.A.

Category	Description / Summary	Input (Partner Contribution)
Consulting Activities Conducted	The consulting activities covered the assessment of selected European markets relevant to the Pro-PLUS cardiac telerehabilitation solution. Based on the countries indicated by the SME, NSB carried out market analysis, regulatory and barrier assessment, competitor analysis, stakeholder mapping and comparative country prioritisation. The activities were complemented by an external expert evaluation of the solution.	NSB prepared the market readiness profile, market and regulatory analysis, competitor analysis, stakeholder mapping and comparative country fit assessment for the selected countries, including Germany, Italy and Austria. NSB also coordinated the external expert evaluation and shared intermediate and final analytical outputs with the SME.
Key Achievements	The pilot generated a structured overview of the selected target markets and supported the identification of the most promising countries for potential market entry. It also clarified key conditions affecting the transferability of the solution from the Polish context to other European healthcare systems.	NSB consolidated the results of the analytical activities into comparative outputs supporting country prioritisation and highlighting the main market access considerations for the selected countries.
Market Analysis Results	The market analysis highlighted Germany, Italy and Austria as the main countries assessed for potential expansion. The comparison showed differences in rehabilitation infrastructure, digital readiness, healthcare organisation and conditions for adoption of telecardiology and home-based rehabilitation solutions.	NSB conducted structured market research on the selected countries and produced comparative summaries of healthcare system characteristics, rehabilitation pathways and market conditions relevant to the SME's solution.
Regulatory Support Outcomes	The regulatory analysis clarified the main regulatory and reimbursement-related aspects relevant to the introduction of the solution in the analysed countries. It also highlighted that market entry conditions differ significantly across countries and require adaptation to local healthcare and procurement frameworks.	NSB analysed regulatory frameworks, reimbursement conditions and market barriers related to digital rehabilitation and telemonitoring solutions in the selected countries.
Competitor Analysis Insights	The competitor analysis identified comparable telecardiology and remote rehabilitation solutions and provided a clearer view of their positioning in the analysed markets. This supported a better understanding of the competitive environment surrounding the SME's offer.	NSB mapped and reviewed competing solutions with similar telemonitoring or rehabilitation functions and summarised the main competitive insights in the dedicated report.
Partnership / Synergy Facilitation	Relevant stakeholders connected to cardiac rehabilitation, telemedicine and digital health were identified and shared with the SME for prioritisation and possible follow-up.	NSB prepared the stakeholder list, discussed priorities with the SME and supported follow-up towards selected organisations.

Category	Description / Summary	Input (Partner Contribution)
Unexpected Outcomes	The comparative analysis further highlighted how strongly the organisation of cardiac rehabilitation and related financing models differs across countries. This underlined the need to consider not only market potential but also the adaptability of the solution to local clinical and organisational frameworks.	NSB integrated findings from the market, regulatory and comparative country analysis to highlight structural differences relevant to future market entry decisions.
Challenges in Service Implementation	A key challenge was the heterogeneity of healthcare systems, reimbursement schemes and implementation conditions across the analysed countries. This made cross-country comparison useful, but also showed that future entry steps would require country-specific adaptation.	NSB addressed this through comparative analysis of the selected markets and by structuring the outputs to support interpretation of country-specific differences.
Coordination & Communication	Coordination with the SME was maintained through meetings and exchanges linked to the preparation, review and discussion of the analytical outputs during the pilot.	NSB organised the coordination meetings, managed communication with the SME and followed up on the different reporting phases of the consulting activities.
Preparation 11/24 – 04/25	**Cooperation Agreement signed on:** 04.04.2025	**Date of initial consultation:** 10.04.2025
Implementation 05/25 – 01/26	**Start date:** 10.04.2025	**End date:** 09.01.2026	**Completed as planned** ☒ yes ☐ No
Evaluation 12/25 – 04/26	Completed ☒	Ongoing ☐	Not started ☐

Table 11: Service C Consulting Services) tested by NSB with the participation of imaginary srl.

Category	Description / Summary	Input (Partner Contribution)
Consulting Activities Conducted	The consulting activities supported the assessment of potential international opportunities for the REHABILITY game-based telerehabilitation solution. Based on the countries indicated by the SME, NSB conducted market analysis, regulatory and barrier assessment, competitor analysis and stakeholder identification across selected European markets. The analysis covered Italy, Germany, Austria, Poland, Spain, Sweden, Norway and Denmark. A comparative country assessment was also conducted through a scoring framework to evaluate the relative attractiveness of the analysed markets, providing insights into potential opportunities and constraints for the deployment of digital rehabilitation solutions and supporting strategic market prioritisation. The activities were further complemented by an external expert evaluation of the solution.	NSB prepared the Market Readiness Profile, Market Analysis, Regulatory and Barriers Analysis, Competitor Analysis, stakeholder/contact scouting and the External Expert Analysis. These outputs were developed using a structured analytical framework allowing cross-country comparison and country prioritisation. Meetings with the SME were organised to discuss the results and align the analysis with the characteristics of the REHABILITY solution.
Key Achievements	The pilot produced a structured overview of digital rehabilitation ecosystems across the analysed countries and supported a comparative assessment of their relative attractiveness for game-based rehabilitation solutions. The analysis also identified relevant stakeholders and organisations active in digital rehabilitation and highlighted key factors influencing potential international expansion.	NSB consolidated the results of the market, regulatory and competitor analyses into comparative outputs and country summaries, supporting the interpretation of the analysed markets and their potential relevance for the SME's solution.
Market Analysis Results	The market analysis highlighted differences between the analysed countries in terms of demographic trends, healthcare investment, digital readiness and rehabilitation infrastructure. Germany and Italy emerged as particularly relevant markets from the demographic and healthcare system perspective, while Spain and the Nordic countries showed favourable conditions for the adoption of digital rehabilitation technologies. The comparative country scoring further supported the prioritisation of the analysed markets.	NSB conducted structured market research covering demographic-health context, economic and healthcare investment indicators, digital adoption and rehabilitation ecosystem characteristics across the analysed countries. The findings were consolidated into comparative summaries and country prioritisation outputs.
Regulatory Support Outcomes	The regulatory analysis highlighted differences in governance structures, digital health frameworks and implementation conditions affecting the deployment of digital rehabilitation solutions across the analysed countries. These findings emphasised the importance of adapting implementation strategies to national healthcare and regulatory environments.	NSB analysed governance models, digital health frameworks, reimbursement structures and regulatory considerations affecting rehabilitation technologies across the analysed countries.

Category	Description / Summary	Input (Partner Contribution)
Competitor Analysis Insights	The competitor analysis provided an overview of digital rehabilitation and immersive rehabilitation solutions operating in the analysed markets. It highlighted the diversity of technological approaches, organisational maturity and market positioning among competitors.	NSB conducted a structured competitor analysis including comparative evaluation and in-depth profiling of identified competitors, examining technological features, business models, market positioning and geographic presence.
Partnership / Synergy Facilitation	Relevant stakeholders and organisations active in rehabilitation and digital health ecosystems were identified and shared with the SME for potential follow-up engagement. These stakeholders included clinical actors, research organisations and industry players involved in rehabilitation innovation.	NSB conducted stakeholder scouting, validation and classification activities and consolidated the results into SME-specific contact files.
Unexpected Outcomes	During the pilot it became evident that the SME's main expectation was related to expanding visibility and establishing direct contacts with potential partners in international rehabilitation ecosystems. The consulting service, however, primarily focused on analytical activities related to market, regulatory and competitive assessment.	NSB maintained communication with the SME during the pilot and complemented the analytical activities with stakeholder identification and contact scouting within the project framework.
Challenges in Service Implementation	A challenge during the pilot was aligning the analytical scope of the consulting service with the SME's expectations regarding visibility and networking opportunities. In addition, the digital rehabilitation field proved heterogeneous across countries, requiring careful interpretation of market conditions and ecosystem structures.	NSB addressed these challenges through comparative country analysis, stakeholder identification and continuous exchange with the SME during the pilot activities.
Coordination & Communication	Coordination between the SME and the service provider was maintained through meetings and exchanges during the preparation and discussion of the analytical outputs	NSB organised meetings, shared intermediate and final reports and maintained communication with the SME throughout the different phases of the consulting activities.
Preparation 11/24 – 04/25	**Cooperation Agreement signed on:** 02.04.2025	**Date of initial consultation:** 07.04.2025
Implementation 05/25 – 01/26	**Start date:** 07.04.2025	**End date:** 09.01.2026	**Completed as planned** ☒ yes ☐ No
Evaluation 12/25 – 04/26	Completed ☒	Ongoing ☐	Not started ☐

Table 12: Service C Consulting Services) tested by NSB with the participation of Gabel Tech S.r.l.

Category	Description / Summary	Input (Partner Contribution)
Consulting Activities Conducted	The pilot activities focused on supporting the SME in exploring potential market entry conditions and distribution opportunities for the e-Poles technology within selected European rehabilitation markets. The analysis covered market context, regulatory and reimbursement conditions, competitor landscape and identification of potential stakeholders and distributors. The assessment focused on countries identified during the pilot as potentially relevant markets, including Italy, Germany, Austria, Poland and Spain, where rehabilitation demand, healthcare investment and ecosystem maturity were analysed. The activities were complemented by an external expert evaluation of the solution.	NSB conducted structured market analysis, competitor mapping, regulatory and barriers analysis, as well as stakeholder identification and distributor scouting in the selected countries.
Key Achievements	The pilot provided the SME with an overview of the rehabilitation ecosystem and market conditions in the analysed countries, highlighting potential opportunities and constraints for the positioning of the technology. The analysis helped contextualise the solution within the existing rehabilitation and movement-monitoring landscape and supported the SME in evaluating possible commercialization pathways and partnership opportunities.	NSB delivered analytical reports covering market context, competitor landscape and regulatory considerations, as well as stakeholder and distributor mapping in the selected countries.
Market Analysis Results	The market assessment analysed demographic trends, healthcare investment and rehabilitation demand across the selected countries. The analysis highlighted structural drivers such as population ageing, increasing demand for neurological and musculoskeletal rehabilitation and the growing relevance of digital monitoring technologies in rehabilitation pathways. These elements indicate potential opportunities for solutions supporting movement monitoring and rehabilitation training, although market entry may require adaptation to local clinical practices and distribution structures.	NSB carried out country-level analysis of healthcare systems, rehabilitation demand indicators and digital health context, complemented by a comparative country scoring and summarising assessment to support identification of potentially promising markets.
Regulatory Support Outcomes	The regulatory and barriers analysis provided an overview of the governance structures and regulatory environments affecting rehabilitation technologies in the analysed countries. The assessment highlighted differences in regulatory frameworks, healthcare organisation and certification requirements that may influence the introduction of new rehabilitation technologies. The results underline the importance of further clarification of device certification and regulatory pathways in the target markets before full market entry.	NSB conducted regulatory and barriers analysis across the selected countries, examining healthcare governance structures, regulatory environments and potential market access constraints.
Competitor Analysis Insights	The competitor analysis examined companies operating in areas related to movement monitoring, gait analysis and rehabilitation technologies. The review highlighted a diverse landscape including wearable monitoring systems, motion-tracking technologies and	NSB performed a structured competitor analysis, identifying and profiling relevant companies and technologies operating in the rehabilitation and movement monitoring domain.

Category	Description / Summary	Input (Partner Contribution)
	rehabilitation support tools, situating the SME's solution within a broader ecosystem of technologies addressing rehabilitation training and performance monitoring.	
Partnership / Synergy Facilitation	Stakeholder mapping activities were carried out to explore potential collaboration opportunities and possible distribution channels within the rehabilitation ecosystem. Potential distributors and relevant actors were identified in the analysed countries, providing initial insight into possible partnership pathways that could support the commercialization of the solution.	NSB conducted stakeholder scouting and preparation of distributor databases covering actors potentially relevant for rehabilitation technology distribution and collaboration.
Unexpected Outcomes	The pilot generated additional reflections regarding the positioning of the e-Poles technology within rehabilitation contexts. The activities also provided insights related to usability aspects and the potential interaction of the solution with rehabilitation environments.	NSB shared analytical insights derived from the market and ecosystem analysis, supporting reflections on potential positioning of the solution in rehabilitation contexts.
Challenges in Service Implementation	The pilot highlighted aspects that may influence the future adoption of the technology, particularly the positioning of the solution between sports performance and rehabilitation applications. In addition, the analysis underlined the importance of further clarification of regulatory and certification requirements for rehabilitation technologies in the analysed countries.	NSB supported the SME through market, regulatory and ecosystem analysis across the selected countries, identifying potential opportunities and constraints relevant for future market entry.
Coordination & Communication	The activities were carried out through exchanges between the SME and the service provider during the preparation and discussion of the analytical outputs.	NSB coordinated the pilot activities and shared the analytical results with the SME during the implementation of the pilot.
Preparation 11/24 – 04/25	**Cooperation Agreement signed on:** 01.04.2025	**Date of initial consultation:** 02.04.2025
Implementation 05/25 – 01/26	**Start date:** 02.04.2025	**End date:** 09.01.2026	**Completed as planned** ☒ yes ☐ No
Evaluation 12/25 – 04/26	Completed ☒	Ongoing ☐	Not started ☐

Table 13: Service C Consulting Services tested by NSB with the participation of Morecognition srl.

Category	Description / Summary	Input (Partner Contribution)
Consulting Activities Conducted	The consulting activities supported the assessment of potential market entry and commercialization opportunities for the REMO solution in selected European rehabilitation markets. Based on the countries indicated during the pilot, NSB conducted market analysis, regulatory and barrier assessment, competitor analysis and stakeholder identification across Italy, Germany, France, Finland, the Netherlands, Ireland and Belgium. The activities also included comparative country assessment, preparation of analytical reports and an external expert evaluation of the solution.	NSB prepared the Market Readiness Profile, Final Market Report, Regulatory and Barriers Analysis, Competitor Analysis, stakeholder mapping/contact scouting and External Expert Analysis. These outputs were developed through a structured analytical framework enabling cross-country comparison and prioritisation of potentially relevant markets.
Key Achievements	The pilot produced a structured overview of the market, regulatory and competitive conditions relevant to the REMO solution and clarified its positioning within the European neurorehabilitation landscape. The activities supported the identification of priority countries and highlighted key requirements for future commercialization, including evidence generation, reimbursement preparedness and market access strategy	NSB consolidated the results of the market, regulatory and competitor analyses into comparative outputs and country summaries, and complemented them with external expert input to support interpretation of the solution's market potential and commercialization needs.
Market Analysis Results	The market analysis highlighted Germany, France and Italy as strong markets due to their large populations and relevant ageing segments, while Finland and the Netherlands emerged as promising environments for stroke- and Parkinson-related interventions and digitally enabled rehabilitation. Ireland and Belgium, although smaller, showed potential as focused rollout or pilot markets. The comparative assessment supported prioritisation of countries according to demographic, economic, digital and rehabilitation-related indicators.	NSB conducted structured market research on the selected countries, comparing demographic-health context, healthcare investment, digital health adoption, clinical demand potential and rehabilitation capacity through a harmonised framework, including country scoring and summarising outputs.
Regulatory Support Outcomes	The regulatory analysis provided an overview of governance structures, reimbursement conditions, certification requirements and market access barriers affecting digital rehabilitation technologies in the analysed countries. The results highlighted the importance of device/software classification, reimbursement pathways, data protection requirements and integration with clinical workflows as key factors for future market entry.	NSB analysed healthcare governance models, reimbursement frameworks, medical device and digital health requirements, and relevant regulatory barriers in the selected countries, integrating these findings into country-specific and comparative outputs.
Competitor Analysis Insights	The competitor analysis provided a structured overview of companies active in upper-limb rehabilitation, digital neurorehabilitation and sensor-based therapy solutions. It highlighted different technological approaches, levels of organizational maturity and commercialization models, helping position REMO within a competitive landscape that includes both established clinical players and emerging digital rehabilitation companies.	NSB carried out a structured competitor analysis combining comparative review and profiling of identified competitors, examining technology characteristics, market presence, business models and positioning in the rehabilitation sector.
Partnership / Synergy Facilitation	Relevant stakeholders and potential pilot or collaboration actors were identified across the analysed countries to support possible future partnerships and ecosystem engagement. The	NSB conducted stakeholder scouting, validation and consolidation of contacts relevant to rehabilitation

Category	Description / Summary	Input (Partner Contribution)
	pilot generated an initial contact base for potential follow-up in rehabilitation and digital health environments, although the prioritisation and follow-up phase remained limited during the later stages of the pilot.	ecosystems and potential pilot sites, and shared these outputs with the SME as part of the partnership facilitation activities.
Unexpected Outcomes	The pilot further highlighted the relevance of the REMO solution not only from a market perspective, but also from a clinical positioning perspective, particularly regarding target indications, responder profiles and evidence needs for scale-up. The external expert input provided additional clarity on commercialization priorities and market-readiness gaps beyond the initial analytical scope.	NSB complemented the market, regulatory and competitor analyses with an external expert evaluation, which provided additional reflections on value proposition, clinical positioning and next steps for market readiness and scale-up.
Challenges in Service Implementation	One challenge during the pilot was the complexity of translating initial market and stakeholder mapping into more advanced follow-up actions across multiple countries. In addition, the pilot confirmed that broader market uptake of the solution depends on several factors beyond initial market attractiveness, including stronger clinical evidence, reimbursement preparedness and alignment with country-specific healthcare workflows.	NSB addressed these challenges through comparative market analysis, regulatory mapping, competitor benchmarking and contact scouting, providing the SME with a structured basis for future prioritisation and follow-up activities.
Coordination & Communication	Coordination between the SME and the service provider was maintained through meetings and exchanges linked to the preparation, review and discussion of the analytical outputs during the pilot. Communication was smooth during the active phases of the service, while later follow-up on stakeholder prioritisation remained limited.	NSB organised the coordination meetings, shared intermediate and final deliverables and maintained communication with the SME throughout the implementation of the consulting activities.
Preparation 11/24 – 04/25	**Cooperation Agreement signed on:** 02.04.2025	**Date of initial consultation:** 09.04.2025
Implementation 05/25 – 01/26	**Start date:** 09.04.2025	**End date:** 09.01.2026	**Completed as planned** ☒ yes ☐ No
Evaluation 12/25 – 04/26	Completed ☒	Ongoing ☐	Not started ☐

Table 14: Service C Consulting Services) tested by NSB with the participation of ACTIMI GmbH.

Category	Description / Summary	Input (Partner Contribution)
Consulting Activities Conducted	The consulting activities focused on assessing potential deployment opportunities for ACTIMI's digital health platform in selected European rehabilitation and digital care markets. The analysis covered Italy, France, the Netherlands and Belgium, combining market assessment, regulatory mapping, competitor analysis and stakeholder identification relevant to RPM and digital care infrastructure. The activities were complemented by an external expert evaluation of the solution.	NSB conducted the Market Readiness Profile, Final Market Report, Regulatory and Barriers Analysis, Competitor Analysis, stakeholder scouting and External Expert Analysis to support the evaluation of market potential and commercialization pathways.
Key Achievements	The pilot provided a structured overview of the market conditions and regulatory environment relevant to digital health platforms supporting rehabilitation and remote monitoring. The results helped clarify potential entry pathways, particularly in markets with strong digital health ecosystems and growing demand for remote care solutions.	NSB compiled comparative country analyses and supporting documentation that enabled the SME to better understand the regulatory landscape, market opportunities and potential integration pathways within healthcare ecosystems.
Market Analysis Results	The analysis highlighted France and Italy as large healthcare markets with strong demand potential due to ageing populations and high rehabilitation needs. The Netherlands and Belgium emerged as promising environments due to their high levels of digital health adoption and advanced healthcare infrastructures.	NSB conducted structured market research covering demographic health context, healthcare investment levels, digital health adoption indicators and clinical demand potential to identify opportunities for digital health platforms.
Regulatory Support Outcomes	The regulatory assessment provided an overview of healthcare governance models, reimbursement structures and compliance requirements affecting digital health platforms and remote monitoring solutions. The analysis emphasized the importance of MDR certification, GDPR compliance and integration with national healthcare systems.	NSB analysed national regulatory frameworks, telehealth regulations, reimbursement conditions and digital health policies across the selected countries to support market entry considerations.
Competitor Analysis Insights	The competitor analysis identified companies active in RPM, telehealth platforms and digital rehabilitation services. The comparison highlighted different market positioning strategies, ranging from infrastructure providers to clinical service platforms supporting chronic care management.	NSB carried out a structured competitor benchmarking to analyse technology positioning, service models and market presence within the digital health and rehabilitation ecosystem.
Partnership / Synergy Facilitation	Stakeholder identification activities mapped relevant actors such as hospitals, digital health initiatives, research centres and potential implementation partners across the analysed countries. These contacts	NSB performed stakeholder scouting and contact identification to support potential collaboration opportunities with actors active in rehabilitation, digital health and clinical research ecosystems.

Category	Description / Summary	Input (Partner Contribution)
	could support future collaborations or pilot initiatives related to remote monitoring and digital care solutions.	
Unexpected Outcomes	The pilot reinforced the relevance of certified digital infrastructure platforms in enabling integration between medical devices, clinical data and digital care pathways. The external expert evaluation also highlighted the strategic importance of interoperability and regulatory readiness when scaling digital health platforms.	NSB complemented the analytical work with an external expert assessment to provide additional reflections on the solution's technological positioning and potential role in digital health ecosystems.
Challenges in Service Implementation	One limitation during the pilot was the restricted engagement from the SME during later stages of the validation activities, which limited the possibility to further prioritise stakeholders and explore follow-up collaboration opportunities.	NSB nonetheless completed the analytical activities and deliverables, providing the SME with structured documentation on market conditions, regulatory frameworks and potential ecosystem actors.
Coordination & Communication	Coordination took place through the exchange of deliverables and communication during the preparation and validation phases of the consulting activities. Interaction with the SME remained limited during the final stages of the pilot.	NSB prepared and shared the analytical outputs and maintained communication with the SME throughout the development of the consulting services.
Preparation 11/24 – 04/25	**Cooperation Agreement signed on:** 12.04.2025	**Date of initial consultation:** 14.04.2025
Implementation 05/25 – 01/26	**Start date:** 14.04.2025	**End date:** 09.01.2026	**Completed as planned** ☒ yes ☐ No
Evaluation 12/25 – 04/26	Completed ☒	Ongoing ☐	Not started ☐

TECHNICAL, ORGANISATIONAL & INNOVATION RESULTS

The pilot activities provided evidence on the technical feasibility and market readiness of the participating SMEs' solutions in the context of European rehabilitation ecosystems. The analyses confirmed that the tested technologies, ranging from digital rehabilitation tools and wearable monitoring systems to RPM platforms, can support rehabilitation and chronic care pathways, particularly in areas such as neurological recovery, remote monitoring and hybrid care models. The pilot also highlighted that further progress towards full implementation will require stronger clinical validation, clearer reimbursement pathways and integration with hospital IT systems and clinical workflows.

On the other side, the pilot revealed both challenges and enabling factors for cross-country collaboration. Differences in healthcare governance, reimbursement mechanisms and regulatory implementation across countries such as Italy, France, the Netherlands and Belgium influence the speed and feasibility of technology adoption. At the same time, the pilot demonstrated that collaboration with hospitals, research institutions and rehabilitation centres can act as a key enabler for validation, testing and potential scaling of rehabilitation technologies across different European healthcare systems.

From an organisational perspective, the activities reflected the diversity of participating SMEs in terms of level of readiness, internal structure and stage of development, which influenced the depth and evolution of the validation process. These observations highlight how SMEs may require different levels of guidance, support and engagement throughout the validation process.

These observations also provide relevant insights for the design and implementation of similar support services, highlighting the importance of adapting the approach to the specific characteristics, needs and level of maturity of the SMEs involved, as well as ensuring flexibility in engagement and follow-up activities.

Overall, the pilot generated important strategic insights for SMEs developing rehabilitation technologies. In particular, the results highlighted the need for early alignment between technological development, regulatory compliance and market access strategies. Finally, the pilot confirmed the value of structured market intelligence, regulatory mapping and stakeholder identification in supporting tailored approaches, taking into account the specific characteristics, needs and maturity of each SME. This reinforces the importance of flexible and adaptive service models capable of addressing diverse starting points and supporting companies in refining their commercialization pathways within the European rehabilitation technology market.

5. Conclusions and Outlook

The pilot action provided valuable practical and strategic insights and demonstrated the feasibility and effectiveness of coordinated cross-border support services for rehabilitation innovation. The results highlight the importance of integrating technical validation, user-centred development and market-oriented consulting to support the development and commercialisation of rehabilitation technologies. These insights will inform the evaluation activities within A2.3, supporting improved access to innovation infrastructures and the uptake of rehabilitation technologies in CE.