

**S3 Table. Influencing elements of a successful therapeutic alliance based on the literature search.**

Main elements	Secondary elements	Statements	References
<b>Relationship between the patient and therapist</b>	Emotional and professional relationship	<ul style="list-style-type: none"> <li>• The personal, emotional, and professional relationship represent the core components of the therapeutic alliance (TA).</li> <li>• The therapist's empathy and responsiveness play an important role.</li> <li>• Mutual sharing of emotions and self-revelation is a foundation of personal relationship</li> <li>• Common focus between all involved</li> </ul>	[1, 2]
		<ul style="list-style-type: none"> <li>• The patient should be valued with his/her individual physical, psychological, cultural, and social characteristics and needs in relation to personal goals and therapy contents.</li> <li>• The patient is in the foreground, not the disease.</li> </ul>	[3-6]
		<ul style="list-style-type: none"> <li>• For the transmission of knowledge at a professional level</li> </ul>	[7]
		<ul style="list-style-type: none"> <li>• Shared responsibility</li> </ul>	[8]

	Roles and responsibilities	<ul style="list-style-type: none"> <li>• Client-centred approach, which means active participation of the patient.</li> <li>• Defined distribution of roles to avoid conflict</li> </ul>	[9, 10]	
		<ul style="list-style-type: none"> <li>• Balance between patient autonomy and therapist support is a challenge</li> </ul>	[11]	
	Humor	<ul style="list-style-type: none"> <li>• Humor puts the illness in the background and improves mood.</li> </ul>	[1]	
	Congruence of the therapist	<ul style="list-style-type: none"> <li>• Being genuine, open, and authentic during the interactions with the patient is a significant factor of the TA at a professional level</li> </ul>	[1]	
	Physical presence of a therapist	<ul style="list-style-type: none"> <li>• Challenge to ensure safety in telerehabilitation</li> </ul>	[12]	
		<ul style="list-style-type: none"> <li>• Psychological and physical support by the therapist is relevant and can be guaranteed by his/her presence.</li> </ul>	[8, 13]	
		<ul style="list-style-type: none"> <li>• To enable a comprehensive physical examination</li> </ul>	[12, 14]	
		<ul style="list-style-type: none"> <li>• Lack of physical presence is a barrier to TA in telerehabilitation</li> </ul>	[15]	
	<b>Trust</b>	Aspects of trust	<ul style="list-style-type: none"> <li>• Exchange of information is important to develop mutual trust.</li> </ul>	[3, 16]
			<ul style="list-style-type: none"> <li>• Positive feedback, empathy and respect promote trust building</li> </ul>	[3]

		<ul style="list-style-type: none"> <li>• A sense of safety strengthens trust</li> </ul>	[12]
		<ul style="list-style-type: none"> <li>• Safety is not directly guaranteed in telerehabilitation and thus a challenge for trust</li> </ul>	[17]
<b>Communi- cation</b>	Exchange of information	<ul style="list-style-type: none"> <li>• Exchange of information is essential for the development of TA</li> </ul>	[8]
		<ul style="list-style-type: none"> <li>• Significant for interaction, satisfaction, and therapy success</li> </ul>	[18]
	Effective communication	<ul style="list-style-type: none"> <li>• Effective communication improves the rehabilitation process</li> <li>• Getting to know each other: shared decision-making, congruence between patient and therapist, person-centred communication, respect, active listening, understanding, sympathy and the recognition of the patient as a person with individual needs.</li> <li>• Effective sharing of information, and education of patients: understanding is essential and should be ensured</li> <li>• Joint goal setting and treatment planning is relevant and promoting self-awareness on both sides</li> </ul>	[19]
	Communication channels	<ul style="list-style-type: none"> <li>• Through the body (non-verbal): Facial expression, posture, gestures and / or movements</li> </ul>	[20]

		<ul style="list-style-type: none"> <li>• Verbal and para-verbal: Voice, intonation, flow of speech</li> </ul>	[21]
		<ul style="list-style-type: none"> <li>• General: (1) words and speech, (2) facial expressions and gestures, (3) eyes and gaze, (4) ears and sound of voice, (5) skin and touch, and (6) posture and movement.</li> </ul>	[22]
	Communication in telerehabilitation	<ul style="list-style-type: none"> <li>• In telerehabilitation, non-verbal communication is limited due to the distance</li> </ul>	[23]
		<ul style="list-style-type: none"> <li>• In telerehabilitation, non-verbal communication is limited due to technical aspects</li> </ul>	[24]
		<ul style="list-style-type: none"> <li>• Importance of face-to-face communication for non-verbal aspects of communication</li> </ul>	[25]
Technical aspects	<ul style="list-style-type: none"> <li>• Time-delay has a negative impact on communication</li> </ul>	[25, 26]	
<b>Agreement on tasks and goals</b>	Agreement on goals	<ul style="list-style-type: none"> <li>• Agreement between therapist and patient plays an important role in goal setting and decision making in therapy.</li> </ul>	[9]
		<ul style="list-style-type: none"> <li>• Important for the development of TA and thus also for the implementation of therapy</li> </ul>	[20]

	Motivation	<ul style="list-style-type: none"> <li>• Goal setting and consideration of needs increases motivation</li> </ul>	[27]
		<ul style="list-style-type: none"> <li>• The patient's expectation of success and achievement of goals strengthen motivation</li> </ul>	[7, 28]
	Autonomy	<ul style="list-style-type: none"> <li>• Self-management leads to long-term therapy success</li> </ul>	[29]
		<ul style="list-style-type: none"> <li>• Patient engagement is an important aspect especially in telerehabilitation</li> </ul>	[30-32]
<b>External influencing factors</b>	Relatives and/or caregivers as part of the TA	<ul style="list-style-type: none"> <li>• Relatives and/or caregivers are part of the TA; it is spoken of as a triad</li> </ul>	[33]
		<ul style="list-style-type: none"> <li>• Relatives and/or caregivers support patients and thus promote the rehabilitation process</li> </ul>	[1]
		<ul style="list-style-type: none"> <li>• Shared relationship between therapist, child and parents</li> </ul>	[3]
	Relatives and/or caregivers provide technical support	<ul style="list-style-type: none"> <li>• Support during the therapy preparation, such as switching on the device or the software programme.</li> <li>• Support during the therapy procedure to position the camera correctly and/or ensure safety.</li> </ul>	[10]
		<ul style="list-style-type: none"> <li>• Clinical environment counteracts development of deep TA</li> </ul>	[15, 33]

	Preferred surroundings for developing TA	<ul style="list-style-type: none"> <li>• Home environment is perceived as a relaxed atmosphere and promotes the building of TA</li> </ul>	
		<ul style="list-style-type: none"> <li>• Some patients want a separation between home and the rehabilitation environment.</li> <li>• Some patients find exercising in the home environment enjoyable.</li> </ul>	[15]
	Time as a resource	<ul style="list-style-type: none"> <li>• Time is a significant factor in building trust.</li> </ul>	[34]
		<ul style="list-style-type: none"> <li>• Time is essential for getting to know each other and for communication.</li> <li>• A sufficient exchange of information makes it easier to take needs into account.</li> </ul>	[35]
		<ul style="list-style-type: none"> <li>• In telerehabilitation, more time is spent with the patient, which promotes TA.</li> </ul>	[12]

### References for S3 Table

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