

Online Supplement 3. Summary of themes and subthemes

Key theme	Definition	Subtheme	Supporting quotes
Implementation: Practical experiences	This code accounts for statements in the participants' practical experiences with MHSVC and its integration into daily practice.	Perception of integration into daily practice	The medical assistants were happy to start the device for them [patients] and they [patients] simply did their sessions and afterwards they friendly said their goodbyes, hence it is a good concept once it is in progress. It works. It also did not disturb the practice workflows in any way. (PCP#2)
		Related to MHS	Another advantage that I experienced was that I had the freedom to choose: Am I doing it [MHSVC] at home at my desk or am I doing it here, where it fits my schedule. I see this as an advantage. (MHS#2)
		Related to PCP practice	My medical assistants undertook that [organization of MHSVC] and this operated in the background for me. It was a relief since the patients did not show up twice a week or every second week. (PCP#4)
		Related to MHSVC	That the screen went black, freezed or that, in some cases, there was no visual or audio transmission till the end (...), this means that the contact between the two of us was indeed more fragile. (MHS#1)
		Related to study procedures	I do think it would be better if it [screening questionnaire] would be less and if one would elaborate further via phone. (Medical assistant#3)
		Related to patients	The patients readily accept it. (...) The expectation before they start is 'oh this is strange, then I sit here and there is no real person', but there is a real person. (PCP#4)

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Implementation: Suggestions for improvement	This code refers to the participants' suggestions for improving the MHSVC model, focusing of aspects related to the usage of the intervention.	Related to study procedures	So [the] status of recruitment would perhaps be really interesting. Who made it to the control group. (Medical assistant#1)
		Collaboration	I need to know at least whether he [the patient] attended it [MHSVC], where the problem is, where the focus is, especially for me so I know what the colleague talks about or does not talk about and how the procedure is done, what he does or what he thinks of. (PCP#5)
Mechanisms of impact: advantage/benefit	This code contributes to an understanding of the benefit of MHSVC for patients.	For patients	I really think that they [the patients] could profit and that (...) they could talk a little bit longer than just five minutes. (PCP#5)
Mechanisms of impact: comparison to f2f-setting	This code relates to any comparison of MHSVC and the f2f setting (positive and negative).	Therapeutic alliance	I may image that the establishment of the relationship might take a little bit longer compared to when you really see each other live, but I don't know, I don't think that the video plays a role here. (MHS#2)
Mechanisms of impact: disadvantages	This code is used when the participants mention any disadvantages related to MHSVC or more specifically regarding psychotherapy via video (i.e. lack of personal interactions).	Lack of personal interaction (general)	I am not specialized in psychotherapeutic conversations of course, but I think, (...) that not all emotions can be delivered in a picture, it starts with cold sweat (...). (PCP#1)
		For patients	So, disadvantages in this sense, I think some would like to have a therapist in front of them, I think some would prefer a personal relation, yes. (Medical assistant#3)
		For MHS	I think, this little picture, it's what people constantly say regarding Skype and so on, it is really stressful. (...) It is rather a camera or lens feeling, and patients might probably feel the same. (MHS#1)

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Context: shorter travel distances	This code includes statements that refer to shorter travel distances as advantage for the delivery of MHSVC.	n/a	(...) this is great, to go to the primary care physician and to get a separate room, via video, it is somehow comfortable for the patients. (Medical assistant#4)
Context: suggestions for improvement	This refers to the suggestions for improving the context factors of MHSVC, such as environmental or technical factors.	Environmental/technical issues	Well I think that the technology works troublefree, this is the major point. (MHS#3)