Trust Standard for the Assessment and Management of Physical Health Policy, Practice Guidance Note
Oral Motor Device / Chewy Tube - V02

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1 INTRODUCTION

1.1 The Oral Motor Device, also known as Chewy Tube, Chewy Stix, Chewys are FDA (Food and Drug Administration) approved rubber devices designed for the reasons listed in 1.2 below. Originally designed to be used with the Jaw Rehabilitation Program (a patented step-by-step series of goals and objectives designed to develop biting and chewing skills.) they offer a safe, non-toxic surface and are latex and lead free. There are a number of different shapes, strengths and designs available on the clinical market.

1.2 Oral motor devices / chewy tubes can be used for three clinical reasons:
• To provide resilient, non-food chewable surface for practicing biting and chewing skills.
• As an alternative to inappropriate biting, chewing of non-foods and persons.
• As oral tactile stimulation, modulation and proprioceptive input as part of a sensory programme.

1.3 This practice guidelines detailed in this note (PGN) refers to the use of Oral Motor Device / Chewy Tubes for the purpose of all clinical reasons mentioned in 1.2.

2. AIM

2.1 This protocol is set out to guide Northumberland, Tyne and Wear NHS Foundation Trust (the Trust/NTW) staff in the safe and therapeutic use of the Oral Motor Device/Chewy Tube throughout the Trust. The practice guidelines detailed in this PGN must be used in accordance with manufacturers’ guidelines.

3. OBJECTIVES

3.1 Guidance and recording for the use of the Oral Motor Device/Chewy Tube should always be followed, as such:
• Oral Motor Devices / Chewy Tubes should always be used as described in care planning and the risk assessment process.
• Twice daily observation and recording of the Oral Motor Device / Chewy Tubes should be made to monitor the state and hygiene of the Chewy. (Cleaning should follow advice from Trust policy NTW(C)23, Infection, prevention and control policy, practice guidance note - IPC-PGN-10 – Medical Devices and Equipment – Cleaning and Decontamination. The use of detergent wipes/hot soapy water followed by a rinse should be used to clean the device). See example Monitoring Form in ‘Appendices’, all information must be documented in RiO accordingly.
• Single patient use of the Oral Motor Device/Chewy Tube should always be followed.
• Parental/Carer discussion should support all interventions prior to any use of an Oral Motor Device / Chewy Tube. Discussion needs to include cost, sustainability and replacements, use, benefits and risks.
• Contra-indications should be considered as below:
• Oral Motor Devices should not be used by individuals with loose teeth, mouth sores, who hyper-salivate or have increased choking risks.
• Any object that is placed in the mouth can lead to the production of both salivary and digestive juices and this should be borne in mind when prescribing.
4. **CLINICAL USE OF EQUIPMENT**

4.1 **Practice of Biting and Chewing Skills**

4.1.1 For individuals who require oral exercise and practice to assist eating and desensitisation, the Oral Motor Device / Chewy Tube can be used to support sessional practice.

4.2 **An Alternative to Inappropriate Biting and Chewing**

4.2.1 Where individuals seek objects to bite, chew or ingest that are inappropriate it may be clinically advisable to provide an Oral Motor Device / Chewy Tube as a safer alternative. This is a multi-disciplinary team decision based on the need for a safer objective of use that can be monitored.

4.3 **Sensory and Proprioceptive Purpose**

4.3.1 **Clinical evidence is still in its infancy around** the use of oral motor devices for tactile stimulation or proprioceptive input. However, **there is published evidence of** the use of Oral Motor Devices / Chewy Tubes being used in a number of clinical settings and sensory integration programmes – for the purpose of sensory- tactile, gustatory and proprioceptive feedback.

4.3.2 **The NTW Sensory Integration Clinical Interest or Reference Group would not routinely** advocate the prescription of Oral Motor Devices/Chewy Tubes for tactile stimulation or proprioceptive input. However, in the situation of an individual being reviewed or referred into Inpatient Services, already prescribed with an Oral Motor Device/Chewy Tube, where it is deemed appropriate that the device should continue to be used for sensory purposes, the following aspects will need to be addressed:

- Agreement of continued use by the Multi-disciplinary Team which would consider both clinical and financial viability of the use of the Oral Motor Device/Chewy Tube.
- Alternative tools and strategies are considered to replace the use of the oral motor devices.
- Care Plan and guidance for use of the Oral Motor Device / Chewy Tube.
- Appropriate risk assessment.
- Recorded as discussion in Clinical Supervision covering aspects of this PGN.

5. **ACKNOWLEDGEMENTS**

5.1 This guidance has been compiled and agreed by the NTW Sensory Integration Reference Group.
6. REFERENCES

- Scheerer C.R. Perspectives on an oral motor activity: the use of rubber tubing as a ‘chewy’. American Journal of Occupational Therapy; Apr 1992; vol.46 (no.4)

- Favell, Judith E.; McGimsey, James F.; Schell, Robert M Treatment of self-injury by providing alternate sensory activities Analysis & Intervention in Developmental Disabilities; 1982; vol 2 (no.1); 1982


- Jaw Rehab Program - Speech Pathology Association. The Jaw Rehab Program offers a sequenced progression of treatment exercises to initiate and strengthen mandibular function needed for successful mastication skill.

- NTW NHS Trust Position Statement.

7 DEFINITION OF TERMS

- The gustatory system is the sensory system for the sense of taste.

- The proprioceptive system is the body position sense. Where our body parts are in space, perceived touch and pressure, the position of a specific body part.
## Example Monitoring Form

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