

Illinois State Board of Education

Restraint and Time Out

SIS School Year at a Glance

Submit data and verify accuracy of (Deadline - July 31):

- Prenatal data
- Birth to 3 data
- Caregiver Demographic data (Birth to 3)
- College Course Assignments
- College and Career Readiness Indicator
- Early Childhood Outcomes Entry and Progress Ratings for Pre-K Students with IEPs
- Early Childhood Program data
- Early Childhood Transition data
- EL Information
- EL Screener
- Gifted and Accelerated data
- Homeless data
- Immigrant data
- Outside Course Assignments (Grades 9-12 only)
- Restraint and Time Out data
- Regional Safe School Program (RSSP) data
- Service Provider data (Students with IDEA Services only)
- Student Address data (Students with IDEA Services only)
- Student Course Assignments (K-12)
- Teacher Course Assignments (K-12)





Search for Student by their SID

	State Board of Educa	tion Helpful Resources 👻 Contact Technical Support 👻
SIS		Search SID
🚨 IBN	I SIS Test User 4	SID 123456789
🕋 Ho	ome	
🍟 Stu	dent 👻	OR
	Search	Legal Last Name
	Request New SID	
	Multiple SID Merge	Date of Birth (mm/dd/yyyy) Gender
	Exit Enrollment	Search
🛱 As	sessment -	
音 Ac	ljusted Cohort	
🛃 Te	acher	
≓ Ea	rly Childhood Transition	
Log O	ut G>	Agency Information 💆 🕇 Accessibility Privacy Policy Careers at ISBE





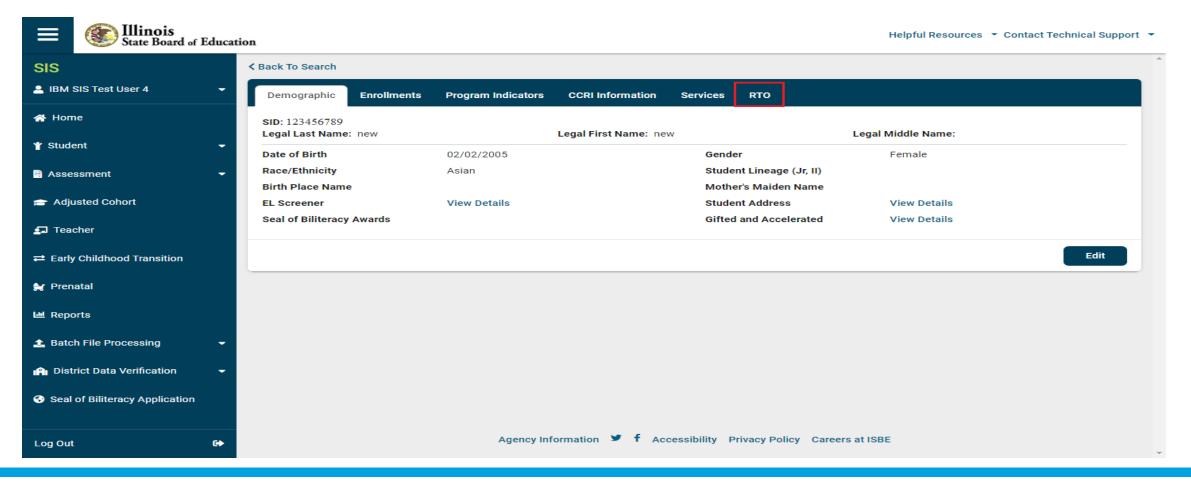
Click on 'Select' to select the student

≡	State Board of I	Educat	ion							Helpful Resou	rces 🝷 Contact Tech	nical Support 🝷
SIS			K Back To Search	h								<u></u>
🚨 ІВМ S	SIS Test User 4	-	Search SID) - Potential N	Aatch Summ	ary						
😭 Hom	ie		Search Criter	ia:								
🍟 Stude	ent	-	SID		Last	Name		First Name		DOB	Gender	
🖹 Asse	ssment	-	123456789									
🚘 Adju	isted Cohort											
🛃 Teac	cher		Search Resul	ts: 1 potential s	tudent matches	found.						
≓ Early	Childhood Transition		SID	Last Name	First Name	Middle Name	DOB	Gender	Race/Ethnicity	Birth Place Name	Native Language	Action
🚼 Pren	atal		123456789	new	new		02/02/2005	Female	Asian		English	Select
🔟 Repo	orts											
🔔 Batcl	h File Processing	-										
👔 Disti	rict Data Verification	-										
😚 Seal	of Biliteracy Application											
Log Out		6>				Agency Informatio	on 🎔 f Acce	essibility Pr	ivacy Policy Caree	rs at ISBE		-





Select 'RTO' Tab







Add RTO Event:

• Click on the '+' sign to add a RTO Event

E State Board of J	Educatio	on						Helpful F	Resources 🝷 Contac	t Technical Suppor
SIS BIM SIS Test User 4	-	Demographic	Enrollments	Program Indicators	CCRI Information	Services	RTO			
🛠 Home		SID: 123456789 Legal Last Name:	: new		Legal First Name: n	w		Legal Middle Na	ame:	
🕈 Student	-	RTO Events							Q Search	+
Assessment	-	Date	Nbr	Type Sta	art Time	Total Time	Enrolln	nent Pa	articipants	Actions
Adjusted Cohort										
Teacher					- N	o Results Found	-			
Early Childhood Transition		Items per pa	ge 10 🗸						0 of 0 Results	< >
g Prenatal										
≝ Reports		Show Deleted	Records							
Batch File Processing	-									
District Data Verification	-									
Seal of Biliteracy Application										
Log Out	€►			Agency In	formation 🎐 f A	ccessibility Pr	rivacy Policy Car	eers at ISBE		





Event Details Page

- Based on the Event Type selection, Additional Details will be required

E State Board of Educa	tion			Helpful Resources 👻 Contact Technical Support 👻
SIS	Demographic Enrollments Program Indicat	ors CCRI Information Services RTO		
🚨 IBM SIS Test User 4 🛛 👻				
A Home	SID:123456789 Legal Last Name: new	Legal First Name: new	Legal Middle Nam	e:
👕 Student 🗸 🚽	Summary			
📑 Assessment 🗸 🗸	RTO Event			
🗃 Adjusted Cohort	Event Type 🚯	· · · · · · · · · · · · · · · · · · ·	Imminent Danger To Self 🚯	⊖ Yes ⊖ No
Teacher	Home RCDTS	(Q	Imminent Danger To Staff 🚯	⊖ Yes ⊖ No
	Serving RCDTS	٩	Imminent Danger To Others 🚯	⊖ Yes ⊖ No
	Event Date 🚯	mm/dd/yyyy	Other Reason ()	⊖ Yes ⊖ No
🚼 Prenatal	Event Time Started ()	hh:mm:00 AM	Must be answered if no one is in Imminent Danger	
💾 Reports	Event Time Ended ()	hh:mm:00 AM		
▲ Batch File Processing -	Did student sustain an injury during RTO event? ()	○ Yes ○ No		10
P District Data Verification -	Participants			•
📀 Seal of Biliteracy Application	Title Trained	Туре	Check Time	Actions
	Show Deleted Records	By clicking Submit, I certify that accurately reflects the informatic	Its Found the information I have submitted is complete and on included in the ISBE form 11-01 that was e of restraint, time-out, and/or isolated time-out.	Cancel Submit
Log Out 🔂				,





Event Type: Physical Restraint

D:123456789 gal Last Name: new	Legal First Nam	ne: new	Legal Middle Name	a:
A Back To RTO Summary				
RTO Event				
Event Type 🚯	Physical Restraint	~	Imminent Danger To Self 🚯	🔿 Yes 🔿 No
Home RCDTS		٩	Imminent Danger To Staff 🚯	🔿 Yes 🔿 No
Serving RCDTS		٩	Imminent Danger To Others 🚯	⊖ Yes ⊖ No
Event Date 🚯	mm/dd/yyyy		Other Reason 🚯	⊖ Yes ⊖ No
Event Time Started 🚯	hh:mm:00 AM	-	Must be answered if no one is in Imminent Danger	
Event Time Ended 🚯	hh:mm:00 AM	•		
Did student sustain an injury during RTO event? 🚯	⊖ Yes	O No		
Participants				•
Title Train	ed Type		Check Time	Actions





Event Type: Supine Physical Restraint

D:123456789					
gal Last Name: new	Legal First Name:	new	Legal Middle Name:		
< Back To RTO Summary					
RTO Event					
Event Type 🚯	Supine Physical Restraint	~	Imminent Danger To Self 🚯	⊖ Yes	O No
Home RCDTS		٩	Imminent Danger To Staff 🚯	⊖ Yes	○ No
Serving RCDTS		٩	Imminent Danger To Others 🚯	⊖ Yes	O No
Event Date 🚯	mm/dd/yyyy		Other Reason 🚯	⊖ Yes	O No
Event Time Started 🚯	hh:mm:00 AM	-	Must be answered if no one is in Imminent Danger		
Event Time Ended 🚯	hh:mm:00 AM	•			
Did student sustain an injury during RTO event? 🚯	⊖ Yes ⊖	No			
Participants					đ
Title Traine	d Type		Check Time	Actions	





Event Type: Prone Physical Restraint

State Board of	of Education				Helpful Re	esources 🝷 Contact Technical Sup
emographic Enrollme	nts Program Indicato	ors CCRI Information S	Services	RTO		
D:123456789 gal Last Name: new		Legal First	Name: new	,	Legal Middle Name:	
K Back To RTO Summary						
RTO Event						
vent Type 🚯		Prone Physical Restraint		~	Imminent Danger To Self 🚯	🔿 Yes 🔿 No
ome RCDTS				٩	Imminent Danger To Staff 🚯	🔿 Yes 🔿 No
erving RCDTS				٩	Imminent Danger To Others 🚯	🔿 Yes 🔿 No
vent Date 🚯		mm/dd/yyyy			Other Reason 🚯	🔿 Yes 🔵 No
vent Time Started 🚯		hh:mm:00 AM		•	Must be answered if no one is in Imminent Danger	
vent Time Ended 🚯		hh:mm:00 AM		~		
id student sustain an inju	ry during RTO event?		⊖ Yes	O No		10
IP Allowed 🚯			⊖ Yes	O No	BIP Approved 1	🔿 Yes 🔿 No
e-escalation 🕕			⊖ Yes	O No		
Participants						Ð
Title	Trained		Туре		Check Time	Actions





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Event Type: Time Out

	linois ate Board of Edu	cation						Helpful Resources 👻 Contact Tech	nnical Suppor
Demographic	Enrollments	Program Indicators	CCRI Information	Services	RTO				
SID:123456789 Legal Last Name	: new			Legal First N	ame: new		Legal Middle Name:		
K Back To RTO	Summary								
RTO Event									
Event Type 🚯			Time Out			~	Imminent Danger To Self 🕕	🔿 Yes	O No
Home RCDTS						٩	Imminent Danger To Staff 🕚	⊖ Yes	O No
Serving RCDTS	\$					٩	Imminent Danger To Others 🕄	⊖ Yes	O No
Event Date 🚯			mm/dd/yyyy				Other Reason 0	⊖ Yes	O No
Event Time Sta	irted 🕕		hh:mm:00 AM			•	Must be answered if no one is in Imminent Danger		
Event Time End	ded 🕕		hh:mm:00 AM			•			
Did student sus	stain an injury dur	ing RTO event? 🚯			⊖ Yes	O No			
Met Code Requ	uirements 🚯				O Yes	🔘 No	Food Drink Access ()	O Yes	O No
Room Construc	ction 🚯				○ Yes	○ No	Medication 3	⊖ Yes	⊖ No
Door Composit	tion / Lock / Block	: 1			O Yes	⊖ No	Restroom Access 🕚	⊖ Yes	O No
Space Large Er	nough 🕕				○ Yes	⊖ No	Clothing Removed 🚯	⊖ Yes	O No
Visual Monitor	0				○ Yes	⊖ No			
Participants	à								Ð
Title		Trained		1	Туре		Check Time	Actions	





Event Type: Isolated Time Out

	llinois tate Board of Edu	ucation					Helpful Resources 👻 Contact Technical Supp
Demographic	Enrollments	Program Indicators	CCRI Information	Services	RTO		
SID:123456789 .egal Last Name	e: new			Legal First N	lame: new	Legal Middle Name:	
< Back To RTC) Summary						
RTO Event							
Event Type 🚯			Isolated Time Out	t	~	Imminent Danger To Self 🕕	🔿 Yes 🔿 No
Home RCDTS					٩	Imminent Danger To Staff 🕚	🔿 Yes 🔿 No
Serving RCDTS	6				٩	Imminent Danger To Others 🕚	🔿 Yes 🔿 No
Event Date 🚯			mm/dd/yyyy			Other Reason 🕕	🔿 Yes 🔿 No
Event Time Sta	arted 🚯		hh:mm:00 AM		T	Must be answered if no one is in Imminent Danger	
Event Time En	ded 🚯		hh:mm:00 AM		Ţ		
Did student su	stain an injury du	ring RTO event? 🚯			🔿 Yes 🔷 No		
Met Code Req	uirements 🚯				Yes No	Food Drink Access ()	🔿 Yes 🔵 No
Room Constru	iction 🚯				🔿 Yes 🔿 No	Medication (1)	🔿 Yes 🔿 No
Door Composi	tion / Lock / Bloc	k 🚯			🔿 Yes 🔿 No	Restroom Access 1	🔿 Yes 🔿 No
Space Large E	nough 🚯				🔿 Yes 🔿 No	Clothing Removed 🚯	🔿 Yes 🔿 No
Visual Monitor	0				🔾 Yes 🔾 No		
Participants	S						•
Title		Trained			Туре	Check Time	Actions





Event Details Validations (Example Provided for Event Type: Time Out)

'Met Code Requirements' field is **View Only**

If Room Construction, Door Composition/Lock/Block, Space Large Enough, Visual Monitor is set as 'Yes'

Then

'Met Code Requirements' field will be automatically set as 'Yes'

Time Out					
		*	Imminent Danger To Self 🚺	⊖ Yes	O No
123456789012345		٩	Imminent Danger To Staff 🕄	⊖ Yes	O No
123456789012345		٩	Imminent Danger To Others 🚯	⊖ Yes	O No
01/25/2022			Other Reason 🕄	⊖ Yes	O No
Event Time Started 10:00:00 AM			Must be answered if no one is in Imminent Danger		
10:30:00 AM					
vent? 1	🔿 Yes 🏾	No			10
	🔘 Yes 🔘) No	Food Drink Access 🚯	⊖ Yes	O No
	🔘 Yes 🔘) No	Medication 🚯	⊖ Yes	O No
	🔘 Yes 🗌) No	Restroom Access 🚯	⊖ Yes	O No
	🔘 Yes 🗌) No	Clothing Removed 🚯	⊖ Yes	O No
	O Yes 🔿) No			
			-		Ð
	01/25/2022 10:00:00 AM 10:30:00 AM	01/25/2022 10:00:00 AM 10:30:00 AM Ves Ves Ves Ves Ves Ves Ves Ves	01/25/2022 10:00:00 AM 10:30:00 AM * 10:30:00 AM * • Yes No • Yes No	01/25/2022 Other Reason I 10:00:00 AM Imminent Danger 10:30:00 AM Imminent Danger Incomposition I Imminent Danger Inco	01/25/2022 Other Reason ① \Ves 10:00:00 AM * 10:30:00 AM * 0Yes No Yes No





Event Details Validations (Example Provided for Event Type: Time Out)

'Met Code Requirements' field is **View Only**

If at least one of the fields (Room Construction, Door Composition/Lock/Block, Space Large Enough, Visual Monitor) is selected as 'No'

Then

'Met Code Requirements' field will be automatically set as 'No'

K Back To RTO Summary						
RTO Event 01/25/202	2					
Event Type 🚯	Time C	Dut	~	Imminent Danger To Self 🜖	⊖ Yes	O No
Home RCDTS	123450	5789012345	Q	Imminent Danger To Staff 🟮	⊖ Yes	O No
Serving RCDTS	123456	5789012345	٩	Imminent Danger To Others 🚯	⊖ Yes	O No
Event Date 🕄	01/25/	2022		Other Reason 🚯	⊖ Yes	⊖ No
Event Time Started 🟮	10:00:0	00 AM	v	Must be answered if no one is in Imminent Danger		
Event Time Ended 🚯	10:30:0	00 AM	v			
Did student sustain an injur	ry during RTO event? 🚯	⊖ Yes	O No			la la
Met Code Requirements 🚯)	O Yes	No	Food Drink Access 🚯	⊖ Yes	O No
Room Construction 🚯		Yes	O No	Medication ()	⊖ Yes	O No
Door Composition / Lock /	Block 🚯	Yes	O No	Restroom Access 🚯	⊖ Yes	O No
Space Large Enough 🚯		⊖ Yes	O No	Clothing Removed 1	⊖ Yes	O No
/isual Monitor 🚯		• Yes	⊖ No			
Participants				-		Ð
Title	Trained	Туре		Check Time	Actions	





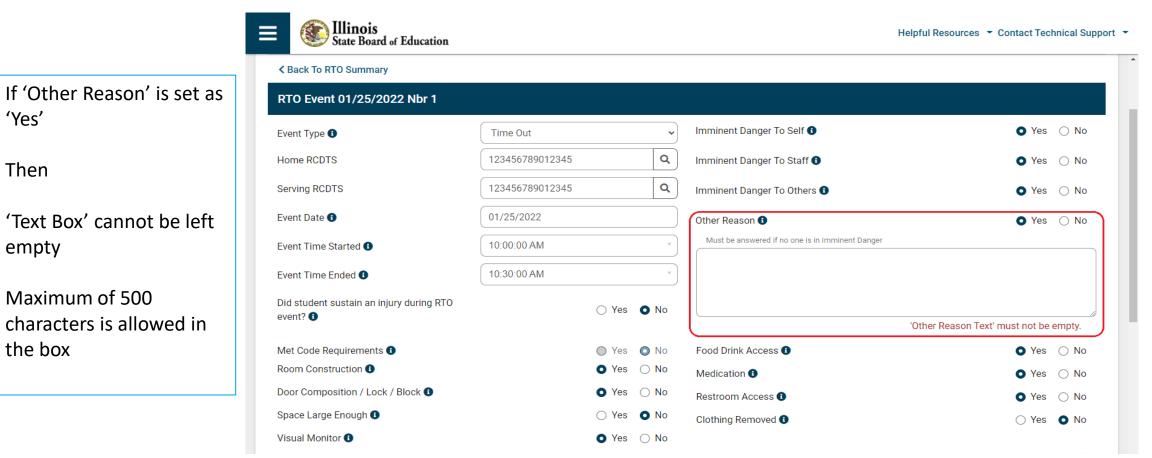
Event Details Validations (Example Provided for Event Type: Time Out)

(Illinois Helpful Resources
Contact Technical Support If all the Imminent Danger State Board of Education Options are set as 'No' K Back To RTO Summary RTO Event 01/25/2022 Nbr 1 Then Time Out Imminent Danger To Self 🕕 Yes O No Event Type 🚯 'Other Reason' should be set 123456789012345 Q Home RCDTS Imminent Danger To Staff 🚯 ○ Yes ○ No to 'Yes' 123456789012345 Q Serving RCDTS Imminent Danger To Others 📵 ○ Yes ○ No 01/25/2022 Event Date 🚯 Other Reason 🚯 ○ Yes ○ No Must be YES when no other reason is indicated 10:00:00 AM Event Time Started 🚯 If at least one of the Imminent Must be answered if no one is in Imminent Danger Danger Options is set as 'Yes' 10:30:00 AM Event Time Ended 1 Did student sustain an injury during RTO ○ Yes ○ No Then event? Met Code Requirements 1 Food Drink Access O Yes 🔿 No Ves 🔘 No 'Other Reason' can be set to Room Construction O Yes 🔿 No Medication 🚯 O Yes 🔿 No 'No', provided there are no Door Composition / Lock / Block () O Yes 🔿 No Restroom Access 1 O Yes O No other reasons to restrain the Space Large Enough 1 Yes O No Clothing Removed Yes O No student Visual Monitor 🚯 O Yes 🔿 No





Event Details Validations (Example Provided for Event Type: Time Out)





'Yes'

Then



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Add Event Details

K Back To RTO Summary					
RTO Event 01/25/2022	2				
event Type 🚯	Time Out		Imminent Danger To Self	• Yes) No
lome RCDTS	1234567890123	345	۹ Imminent Danger To Staff 🚯	• Yes) No
erving RCDTS	1234567890123	345	Imminent Danger To Others	• Yes) No
event Date 🖲	01/25/2022		Other Reason 1	⊖ Yes ●	No
vent Time Started 🚯	10:00:00 AM		Must be answered if no one is in Imminent Dange	r	
event Time Ended 🚯	10:30:00 AM				
Did student sustain an injury	during RTO event? 🚯	🔿 Yes 🏼 O	No		
Met Code Requirements 🚯		🔘 Yes 🔘 N	No Food Drink Access 🚯	• Yes) No
oom Construction 🚯		🖸 Yes 🔾 N	No Medication (1)	• Yes) No
oor Composition / Lock / B	lock 🚯	🖸 Yes 🔘 N	No Restroom Access ()	• Yes) No
pace Large Enough 🚯		💿 Yes 🔘 N	No Clothing Removed (3)	🔿 Yes 🖉	No
/isual Monitor 🚯		🖸 Yes 🔾 N	10		
Participants					Ð
Title	Trained	Туре	Check Time	Actions	



Equity • Quality • Collaboration • Community



-

Add Event Participant Validation

• At least one Event Participant must be provided

E State Board of Ed	ducation				Helpful Resources - Contact Technical Suppor
RTO Event 01/25/2022					
Event Type 🚯	Time	e Out	<	Imminent Danger To Self 🚯	• Yes 🔿 No
Home RCDTS	1234	456789012345	۹)	Imminent Danger To Staff ①	• Yes 🔾 No
Serving RCDTS	1234	456789012345	٩	Imminent Danger To Others 🕚	• Yes 🔿 No
Event Date 🚯	01/25	5/2022		Other Reason 🕕	🔿 Yes 🍳 No
Event Time Started 🕕	10:00	0:00 AM	•	Must be answered if no one is in Imminent Danger	
Event Time Ended 🚯	10:16	6:00 AM	-		
Did student sustain an injury d	during RTO event? 🕚	🔿 Yes 💿 N	0		
Met Code Requirements 🕕		💿 Yes 🔘 N	0	Food Drink Access 0	🕒 Yes No
Room Construction 🕕		• Yes 🔿 N	•	Medication (1)	• Yes 🔿 No
Door Composition / Lock / Blo	ock 🚯	• Yes 🔿 N	•	Restroom Access 🚯	💿 Yes 🔾 No
Space Large Enough 🕕		• Yes 🔿 N	•	Clothing Removed 1	🔾 Yes 💿 No
Visual Monitor 🚯		• Yes 🔿 N	0	•	
· · ·	at least one Event Participant.				e
Title	Trained	Туре		Check Time	Actions
		– No	Resi	ilts Found –	
Show Deleted Records					Cancel Submit





Add Event Participant Details

• Click on '+' sign to add an Event Participant

State Board of Education	L				Helpful Resources Contact Tech	
Back To RTO Summary						
RTO Event 01/25/2022						
Event Type 🚯	Time Out		~	Imminent Danger To Self 🕕	• Yes	O No
Home RCDTS	123456789012345		٩	Imminent Danger To Staff 🚯	• Yes	O No
Serving RCDTS	123456789012345		٩	Imminent Danger To Others 🚯	• Yes	O No
Event Date 🚯	01/25/2022			Other Reason 🚯	⊖ Yes	O No
Event Time Started 🜖	10:00:00 AM	10:00:00 AM		Must be answered if no one is in Imminent Danger		
Event Time Ended 🚯	10:30:00 AM		~			
Did student sustain an injury during RT(0 event? 🚯	⊖ Yes	O No			
Met Code Requirements 🚯		O Yes	O No	Food Drink Access 🚯	• Yes	O No
Room Construction 🚯		Yes	O No	Medication (1)	• Yes	O No
Door Composition / Lock / Block 🚯		Yes	O No	Restroom Access 🚯	• Yes	O No
Space Large Enough 🚯		• Yes	O No	Clothing Removed 🚯	🔾 Yes	O No
/isual Monitor 🚯		Yes	O No			_
Participants						Ð
Title	Trained	Туре		Check Time	Actions	





Add Event Participant Details – Pop Up

Illinois State Board	of Education			Helpful Resources 🔻 Cor	tact Technical Support
K Back To RTO Summary	,				
RTO Event 01/25/20)22				
Event Type 🚯	Time C	Participant	×		• Yes · No
Home RCDTS	123456	890123			• Yes · No
Serving RCDTS	123456	7890123. Type © Event			• Yes O No
Event Date 🚯	01/25/				🔿 Yes 🧿 No
Event Time Started 🚯	10:00:0		w nt D	Danger	
Event Time Ended 🚯	10:30:0	AM Was Participant Trained? 3			
Did student sustain an in	jury during RTO event? 🚯	⊖ Yes O No			
Met Code Requirements	0				• Yes · No
Room Construction ()			Close Save		🗿 Yes 🔘 No
Door Composition / Lock	/ Block 🚯	O Yes 🔘 No	Restroom Access 3		• Yes 🔿 No
Space Large Enough 🚯		🔿 Yes 💿 No	Clothing Removed 1		🔿 Yes 💿 No
Visual Monitor 🚯		🕒 Yes 🔘 No			
Participants					Đ
Title	Trained	Туре	Check Time	Actions	





Add Event Participant Details and click on 'Save'

State Board	of Education			Helpful Resources 🝷 Contact Technical Suppo
C Back To RTO Summary				
RTO Event 01/25/20	122			
event Type 🚯	Time C	ut Participant	×	• Yes 🔿 No
ome RCDTS	123450	7890123		🕒 Yes 🔘 No
erving RCDTS	123450	7890123 Type		O Yes 🔿 No
vent Date 🚯	01/25/	2022		🔿 Yes 🕒 No
vent Time Started 🚯	10:00:0	0 AM Special Education Teach	nt Danger	
ent Time Ended 🚯	10:30:0	0 AM Was Participant Trained?		
id student sustain an inj	ury during RTO event? 🚯	• Yes O No		
let Code Requirements (D			🕒 Yes 🔘 No
oom Construction 🚯			Close Save	🗢 Yes 🔘 No
oor Composition / Lock	/ Block 🕄	O Yes 🔿 No	Restroom Access	O Yes 🔘 No
pace Large Enough 🚯		🔿 Yes 💿 No	Clothing Removed ()	🔿 Yes 🗿 No
isual Monitor 🚯		🕤 Yes 🔘 No		
Participants				Đ
Title	Trained	Туре	Check Time	Actions





Event Participant Details Summary

A 'To Be Added' tag is displayed on the participants which are saved The Participants will be added once we submit the form

Click on '+' sign again to provide additional Event Participants

TO Event 01/25/2022						
ent Type 🚯	Time Out		~	Imminent Danger To Self 🕕		• Yes 🔿 No
ome RCDTS	123456789012345		٩	Imminent Danger To Staff 🟮		• Yes 🔿 No
rving RCDTS	123456789012345		Q	Imminent Danger To Others 🚯		• Yes 🔿 No
ent Date 🟮	01/25/2022			Other Reason 🕕		🔿 Yes 🏾 O No
ent Time Started 🕚	10:00:00 AM		•	Must be answered if no one is in Imminent Danger		
ent Time Ended 🕚	10:30:00 AM		•			
d student sustain an injury during RTO event? 🟮		⊖ Yes	O No			
et Code Requirements 0		Ves	O No	Food Drink Access 0		• Yes 🔿 No
oom Construction 🕕		Yes	O No	Medication ()		💿 Yes 🔿 No
oor Composition / Lock / Block 🕚		Yes	O No	Restroom Access 🕔		💿 Yes No
ace Large Enough 🕕		○ Yes	O No	Clothing Removed 1		🔿 Yes 🛛 No
sual Monitor 🚯		Yes	O No			
articipants						
Title		Trained	I	Туре	Check Time	Actions
To Be Added Special Education Teacher		Yes		Event Participant	-	☞ 💼





Safety Check Participant Validation (Example Provided for Event Type: Time Out)

At least one Safety Check Participant is required if:

Event Type is one of the following:

- Physical Restraint
- Prone Physical Restraint
- Supine Physical Restraint

AND

Event Duration >= 15 minutes

OR

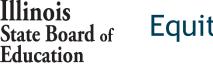
Event Type is one of the following:

- Time Out
- Isolated Time Out

AND

Event Duration >= 30 minutes

State Board of Education				Helpful Reso	urces 👻 Contact Technical St
Back To RTO Summary					
RTO Event 01/25/2022					
ivent Type 🚺	Time Out	~	Imminent Danger To Self 🜒		💿 Yes 🔵 No
ome RCDTS	123456789012345	٩	Imminent Danger To Staff 🚺		• Yes 🔿 No
erving RCDTS	123456789012345	٩	Imminent Danger To Others 🚯		• Yes 🔿 No
vent Date 🕕	01/25/2022		Other Reason 🟮		🔿 Yes 🍳 No
vent Time Started	10:00:00 AM	*	Must be answered if no one is in Imminent Danger		
vent Time Ended	10:30:00 AM	v			
id student sustain an injury during RTO event? (0	🔿 Yes 💿 No			
let Code Requirements 🜒		💿 Yes 🔘 No	Food Drink Access ()		• Yes 🔿 No
oom Construction 🕚		🖸 Yes 🔘 No	Medication ()		💿 Yes 🔿 No
oor Composition / Lock / Block 🟮		🕒 Yes 🔘 No	Restroom Access 🚯		💿 Yes 🔿 No
pace Large Enough 🚯		🖸 Yes 🔘 No	Clothing Removed 🚯		🔿 Yes 💿 No
isual Monitor 🕕		🔍 Yes 🔾 No			
Participants Please add at least one Safety	/ Check Participant.				e
Title		Trained	Туре	Check Time	Actions
To Be Added Special Education Teacher		Yes	Event Participant		2 💼





Add Safety Check Participant Details

Safety Check option is displayed only after at least one Event Participant is provided, and then you can add a Safety Check Participant

Select the Safety Check option and provide the Safety Check Participant Details and click on 'Save'

If 'Performed Safety Check' is set to 'Yes' then 'Safety Check Time' is Mandatory

State Board of Education				Helpful Resource	s 🝷 Contact Technical Suppor
RTO Event 01/25/2022					
Event Type	Time Out	Participant	×		O Yes 🔿 No
Home RCDTS	1234567890123	Туре			• Yes O No
Serving RCDTS	1234567890123	O Event O Safe	ty Check		🔿 Yes 🔿 No
Event Date	01/25/2022	Safety Check Participant Title			🔿 Yes 💿 No
Event Time Started 0	10:00:00 AM	Administrator (Principal etc)	~	nt Danger	
Event Time Ended 🕕	10:30:00 AM	Was Safety Check Participant Tr Ves O No	ained? 🚯		
Did student sustain an injury during RTO event? 0		Performed Safety Check			
Met Code Requirements 🗿		• Yes O No			• Yes 🔿 No
Room Construction 🕕		Safety Check Time			🔘 Yes 🔘 No
Door Composition / Lock / Block 🕄		10:06:00 AM ×			🔘 Yes 🔘 No
Space Large Enough 🚯					🔿 Yes 🕥 No
Visual Monitor 🕄			Close Save		
Participants					Đ
Title		Trained	Туре	Check Time	Actions
To Be Added Special Education Teacher		Yes	Event Participant	** 3	C 🔋





Participant Details Summary

A 'To Be Added' tag is displayed on the safety participants which are saved

Verify all details then click on 'Submit' to save the data

State Board of Education				Helpful Resou	rces 👻 Contact Technical Sup
Event Type 🜒	Time Out	~	Imminent Danger To Self 🚯		💿 Yes ု No
Home RCDTS	123456789012345	٩	Imminent Danger To Staff 🕕		• Yes 🔿 No
Serving RCDTS	123456789012345	٩	Imminent Danger To Others 🚺		• Yes 🔿 No
Event Date 🕕	01/25/2022		Other Reason ()		🔿 Yes 🍳 No
Event Time Started 🚺	10:00:00 AM	Ţ	Must be answered if no one is in Imminent Danger]
Event Time Ended 🕕	10:30:00 AM	Ţ			
Did student sustain an injury during RTO event? 🚺		🔿 Yes 💿 No			
Net Code Requirements 🚯		🔘 Yes 🕥 No	Food Drink Access 🚯		💿 Yes No
toom Construction 🚯		🔍 Yes 🔿 No	Medication 🚯		💿 Yes No
Door Composition / Lock / Block 🕚		💿 Yes No	Restroom Access ()		💿 Yes No
Space Large Enough 🕚		🔿 Yes 🔹 No	Clothing Removed ()		🔿 Yes 💿 No
Visual Monitor 🕕		• Yes 🔿 No	•		
Participants					•
Title		Trained	Туре	Check Time	Actions
To Be Added Special Education Teacher		Yes	Event Participant	-	e î
To Be Added Administrator (Principal etc)		Yes	Safety Check Participant	10:16:00 AM	c i
Show Deleted Records	reflect		information I have submitted is complete and ac he ISBE form 11-01 that was completed followir r isolated time-out.		Cancel Submit





Event Summary Page



After Successfully submitting the data, it will be directed to the Summary Page where you can see the summary of all the submitted events

emographic	Enrollments	Program Indicators	CCRI Information	Services RTC				
:123456789 jal Last Name:	: new		Legal First Nar	ne: new	L	egal Middle Name:		
TO Events						(Q Search	+
Date	Ν	lbr Type	Start T	ime To	otal Time Enrol	lment Pa	rticipants	Actions
01/25/2022	1	Time Ou	t 10:00 A	AM 30) min)	2	2 1
ltems per paç	ge 10 🗸						1-1 of 1 Results	< >
Show Deleted	l Records							



Equity • Quality • Collaboration • Community



Helpful Resources

Contact Technical Support

Event Summary Page – Matched/Unmatched Enrollment

If the record matches with an enrollment in SIS a GREEN signal appears on the 'Enrollment' field

If the record does not match with an enrollment in SIS a RED signal appears on the 'Enrollment' field

nographic Enro	ollments Prog	gram Indicators CCRI Inform	ation Services	RTO			
123456789 al Last Name: new		Legal F	irst Name: new		Legal Middle Na	ime:	
TO Events						Q Search	+
Date	Nbr	Туре	Start Time	Total Time	Enrollment	Participants	Actions
01/25/2022	1	Time Out	10:00 AM	30 min	0	2	e 1
08/09/2021	1	Physical Restraint	02:00 PM	20 min	•	1	ľ i





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RTO Event - Edit

nographic Enro	ollments Prog	gram Indicators CCRI Inform	nation Services	RTO			
123456789 I I Last Name: new		Legal F	irst Name: new		Legal Middle Na	me:	
TO Events						Q Search	+
Date	Nbr	Туре	Start Time	Total Time	Enrollment	Participants	Actions
01/25/2022	1	Time Out	10:00 AM	30 min	•	2	2
08/09/2021	1	Physical Restraint	02:00 PM	20 min	•	1	e i
_						1-2 of 2 Resul	ts < >





RTO Event Details – Edit/Submit

State Board of Education

Helpful Resources	-	Contact	Technical	Support	-
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Event Type 1	Time Out		~	Imminent Danger To Self 🚯		💿 Yes No
Home RCDTS	123456789012345		٩	Imminent Danger To Staff 🚯		• Yes 🔿 No
Serving RCDTS	123456789012345		Q	Imminent Danger To Others 🕚		💿 Yes 🔵 No
Event Date 0	01/25/2022			Other Reason 🚯		🔿 Yes 🛛 No
Event Time Started 🕚	10:00:00 AM		•	Must be answered if no one is in Imminent Danger		
Event Time Ended 1	10:30:00 AM		•			
Did student sustain an injury during RTO event? 🕚		⊖ Yes	O No			
Met Code Requirements 🚯		O Yes	O No	Food Drink Access ()		💿 Yes 🔘 No
Room Construction 🚯		Yes	() No	Medication 🕕		💿 Yes 🔿 No
Door Composition / Lock / Block 🕚		Yes	O No	Restroom Access 🕚		💿 Yes 🔿 No
Space Large Enough 🚯		Yes	O No	Clothing Removed 🕕		🔾 Yes 💿 No
Visual Monitor 🚯		Yes	○ No			
Participants						G
Title	Trained		Туре		Check Time	Actions
Special Education Teacher	Yes		Event	Participant		2 1
Administrator (Principal etc)	Yes		Safety	y Check Participant	10:16:00 AM	2 1
Show Deleted Records	reflects the	e information in	ncluded in t	information I have submitted is complete and accurately the ISBE form 11-01 that was completed following the or isolated time-out.		Cancel Submit





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RTO Event - Delete

nographic Enro	llments Prog	gram Indicators CCRI Inform	ation Services	RTO			
123456789 Il Last Name: new		Legal F	irst Name: new		Legal Middle Na	me:	
TO Events						Q Search	+
Date	Nbr	Туре	Start Time	Total Time	Enrollment	Participants	Actions
01/25/2022	1	Time Out	10:00 AM	30 min	•	2	e i
08/09/2021	1	Physical Restraint	02:00 PM	20 min		1	2
	~					1-2 of 2 Results	< >





RTO Event – Delete Confirmation

123456789 al Last Name: new		1	Delete Event Record		agal Middle Na	me:	
TO Events			This event and any related	data will be removed.		Q Search	•
Date	Nbr	Туре	Event Date: Event Number:	08/09/2021 1	rollment	Participants	Actions
01/25/2022	1	Time Out	Event Type:	Physical Restraint	0	2	e i
08/09/2021	1	Physical Restra	Event Start Time: Participant Count:	02:00 PM 1	•	1	2 1
Items per page 10				Cancel Confir		1-2 of 2 Results	< >
Show Deleted Reco	rds						





RTO Event – Show Deleted Records

E State Board	d of Education				Help	ful Resources 🝷 Contact	Technical Support
Demographic Enrollr	nents Progra	am Indicators CCR	I Information Services	RTO			
SID:123456789 Legal Last Name: new			Legal First Name: new		Legal Middle Nam	e:	
RTO Events						Q Search	+
Date	Nbr	Туре	Start Time	Total Time	Enrollment	Participants	Actions
01/25/2022	1	Time Out	10:00 AM	30 min	•	2	e 1
Items per page 10	•					1-1 of 1 Results	< >
Show Deleted Records	5						





RTO Event – Deleted Records List (View Only)

emographic Enro	ollments Pro	ogram Indicators CCRI Inform	nation Services	RTO			
:123456789 jal Last Name: new		Legal	First Name: new		Legal Middle Na	me:	
RTO Events						Q Search	+
Date	Nbr	Туре	Start Time	Total Time	Enrollment	Participants	Actions
01/25/2022	1	Time Out	10:00 AM	30 min	•	2	c i
01/25/2022	2	Time Out	10:00 AM	30 min	•	-	0
08/09/2021	1	Physical Restraint	02:00 PM	20 min	•	-	0
Items per page 10						1-3 of 3 Results	< >





RTO Event – Deleted Event (View Only)

State Board of Education				neipiui kes	ources 👻 Contact Technical Su
Back To RTO Summary					
RTO Event 01/25/2022 Nbr 2					
Event Type 🚯	Time Out	~	Imminent Danger To Self 🚯		🔘 Yes 🕥 No
Home RCDTS	500821890220043	٩	Imminent Danger To Staff 🚯		🔘 Yes 💿 No
Serving RCDTS	500821890220043	٩	Imminent Danger To Others 🚯		🔘 Yes 🔘 No
Event Date 🚯	01/25/2022		Other Reason 🚯		🔘 Yes 🔘 No
Event Time Started 🚯	10:00:00 AM	~	Must be answered if no one is in Imminent Danger Please mention		
Event Time Ended 🚯	10:30:00 AM	~	Flease mention		
Did student sustain an injury during RTO event? 🚯		🔘 Yes 🕥 No			
Met Code Requirements 🚯		🔘 Yes 🔕 No	Food Drink Access 🚯		💿 Yes 🔘 No
Room Construction 3		🕥 Yes 🔘 No	Medication (1)		🔘 Yes 🔘 No
Door Composition / Lock / Block 🚯		🔘 Yes 🔘 No	Restroom Access 🚯		🔘 Yes 🔘 No
Space Large Enough 🚯		🔘 Yes 🕥 No	Clothing Removed 🚯		🔘 Yes 💿 No
/isual Monitor 🚯		🔘 Yes 🔘 No			
Participants					G
Title	Trained	Туре		Check Time	Actions
Special Education Teacher	Yes	Even	t Participant		
Social Worker	No	Safe	ty Check Participant		







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- Data Elements and Validations document for Restraint and Time Out is readily available in ISBE SIS
 - Navigate to SIS Webpage >> Data Elements and Validations >> Restraint and Time Out
 (Link: <u>https://www.isbe.net/Pages/SIS-Data-Elements-approved-codes-and-indicators.aspx</u>)

← → C 🔒 isbe.ne	t/Pages/SIS-Data-Elements-approved	d-codes-and-indicators.aspx			ⓒ ☆ 😝	S 🛯 🕈 😩 :	For additional support
HOME	ADMINISTRATORS	TEACHERS Gifted and Accelerated Homeless	FAMILIES & STUDENTS	COMMUNITY & PARTNERS	■ NEWS & MEDIA ✓	TOPICS	regarding data entry, please contact the SIS helpdesk at 217-558-3600 Option 3 or emailing <u>help@isbe.net</u>
		Immigrant Multiple SID			* *		For policy questions or questions about the data please contact the Student
		Restraint and Time Out Restraint and Time 	e Out 🎴		*		Care Department by emailing <u>restrainttimeout@isbe.net</u> .



