COGs have logically assumed a central role in the oversight and direction of risk management in respect of vulnerability and public protection during the Covid-19 national response. In doing so, COGs now regularly review and monitor current and emerging risk and vulnerability across their communities. The critical relationships with Education and the Third and Independent Sectors are being utilised to support this. The COG structure enables a swift overview to be established of both known and new risks as well as resilience and the effectiveness of existing procedures and practices to address/mitigate them.

**COVID-19 – Changes Required to Governance Structures, Guidance and Practice**

During the Covid19 pandemic, the COG structure is meeting much more frequently. This is complemented by Local Resilience Partnership co-ordination across geographic areas and LA approaches to humanitarian aid centres to distribute food, medicines and supplies to those most vulnerable and at risk. This includes Foodshare, third sector /community, local volunteering initiatives and those involved in community planning partnerships

The loss of more usual forms of risk identification or monitoring, from the closure of many traditional services or supports for people (such as attendance at schools and nurseries, day and drop-in centres, community hubs, libraries, banks etc.) has created the need to find new ways of identifying and managing risk. This includes routine situation reports from services, including commissioned providers, detailing an overview of staffing, capacity and pressure points. All existing public protection processes have required changes and adaptations made to incorporate national contingencies. COGs require to be satisfied that these changes to usual practices are robust and do not diminish the rigour of the actions to protect vulnerable people and children at risk of abuse, neglect or exploitation. COGs also have a key role in identifying new and emerging risks, and to make informed, collective judgements about the most appropriate approaches, attuned to the local context, that are required to mitigate current and new risks.

COGs have responded quickly. Across Scotland there are numerous local examples of where teams have quickly utilised existing public protection governance structures and COGs have mandated the adaptation of local guidance in relation to COVID-19. These include as examples although not an exhaustive list:

- Identification of those who are vulnerable and most at risk. Examples include: local authorities and partners cross -referencing people known to social work, alcohol and drugs partnerships, housing, education, ELC and those on the People At Risk Distribution and Shielding lists.

- Humanitarian Aid Centres are established, linking to national distributors and delivering food to those in the shielding category. Arrangements are in place to support the national campaign and helpline to distribute food to those in the non-shielding category.

- Multi-agency partnership approaches to increasing support to those at risk of domestic violence; asylum seekers; migrants; and, gypsy travellers.

- Strengthening of unborn baby and newborn protocols for midwifery, health visiting and social work practitioners.

- Mental health services for children, young people and adults provided through online, virtual and telephone support.