NEWS FROM BRUSSELS

European NURSING Council



Word From Senior Policy Advisor Dr. Theodoros Koutroubas

Dear Friends,

This issue opens with the 2026 European Drug Report from the Commission and the EU Drugs Agency, which points to a drug situation that is more available, more potent and increasingly tied to organised crime. We then turn to the Health Council (EPSCO) of 16 June, where ministers advanced the European Biotech Act, the reform of medical-device rules and the question of pharmaceutical resilience — a reminder of how strategic health policy has become for Europe.

From Italy, our member FNOPI takes up the Eurispes Report, which places nurses at the centre of the country's healthcare turnaround. And from Rome, we report on the 8th ESNO Congress, where the ENC brought its experience to the table to interrogate where European regulation is driving real change, and where the gap between Brussels and the bedside remains stubbornly wide

Do come back with questions and feedback.

Kind regards,

Theo

NEWSLETTER HIGHLIGHTS

Commission and EU Drugs Agency present the 2026 European Drug Report

Employment, Social Policy, Health and Consumer Affairs Council (Health), 16 June 2026

The turning point in healthcare passes through nurses: the Eurispes Report relaunches FNOPI's challenge

Strengthening the Nursing Profession in Europe: the 8th ESNO Congress in Rome

Commission and EU Drugs Agency present the 2026 European Drug Report

Today, C**ommissioner for Internal Affairs and Migration, Magnus Brunner, and the European Union Drugs Agency (EUDA)** are presenting the 2026 European Drug Report, with the latest evidence on the state of the drugs situation in Europe.

Based on data from 29 countries (EU-27, Norway and Türkiye), **the report shows that drugs have an increasingly negative impact on European health and security as they have become more available, more diverse, and more potent — while organised crime groups resort to violence more frequently.**

The report highlights that opioids, usually in combination with other substances, remain the leading cause of drug-induced deaths in Europe. The EUDA estimates that there were at least 7,600 overdose fatalities in the EU in 2024, mostly involving multiple substances. These drugs pose serious health dangers, especially novel substances with limited scientific and public understanding of the risks.

Illicit drugs, including cocaine and synthetic drugs as well as new psychoactive substances, are widely available. New cannabis products continue to appear, while the variety of opioids and stimulants sold is on the rise.

At the same time, drug trafficking constitutes a major threat to security in Europe. Organised crime networks are diversifying their trafficking routes and methods to evade detection, following intensified policing operations at major European ports. They exploit smaller ports and are developing more sophisticated concealment methods.

The report highlights that the volume of cocaine intercepted in Europe decreased by more than 20% in 2024, down from 419 tonnes in 2023. However, the number of seizures rose to 97,000 (from 95,000 in 2023), suggesting that traffickers may be moving towards smaller, more fragmented shipments.

Drug-related intimidation and violence also remain a concern, including the exploitation and recruitment of vulnerable young people by criminal groups.
The Commission has stepped up its support to Member States to respond to these challenges with a new EU Drugs Strategy and Action Plan against drug trafficking and new rules for monitoring and controlling drug precursors (2025). The Commission is also working with Member States, European ports, industry associations and EU agencies to counter drug trafficking in ports, in the context of the European Ports Alliance, and continues to work closely with partner countries to tackle drug production at its source and prevent trafficking routes from reaching the EU.

BACKGROUND
The European Drug Report provides an evidence base for the Commission's approach of prevention, treatment and security. The EU Drugs Strategy and Action Plan against drug trafficking, presented by the Commission in December 2025, set out a comprehensive EU response to the security, health, social and environmental challenges linked to the trafficking and use of illicit drugs. The Action Plan complements the Strategy, with 19 priority actions focused on strengthening security and disrupting the routes and business models of drug smugglers; they were endorsed by the Council in March and June 2026 respectively.

The EU Drugs Agency, with its new, stronger mandate, plays a key role in supporting Member States by identifying new psychoactive substances, issuing rapid alerts, and assessing the risks posed by highly potent synthetic opioids. It also supports Member States with their prevention efforts and awareness-raising activities on the impact of drug use and drug trafficking.
Read more: https://ec.europa.eu/commission/presscorner/detail/en/ip_26_1283

Quotes from Policy makers



“ The 2026 European Drug Report highlights the threats drugs pose to the health and security of the EU, with new and often-high potency drugs available, and organised crime networks constantly adapting to avoid detection by law enforcement. These networks exploit digital platforms and global supply chains, putting our youth and communities in danger. With the EU Drugs Strategy, the EU stepped up its support to Member States, with better intelligence-sharing, enforcement, and prevention to disrupt criminal operations and protect those most at risk. The findings in this report gives us the data we need to focus our efforts where they matter most. ”

Henna Virkkunen, Executive Vice-President for Tech Sovereignty,



“ The European Drug Report reveals the human cost of drug use, with the latest annual figures showing at least 7,600 overdose deaths. We must pull out all the stops to prevent dangerous new products from flooding the market and use the full force of the law to strip illegal traffickers of their business model. With the EU Early Warning System, we are identifying new trends early. Through our Action Plan against drug trafficking, we have given European authorities a clear playbook — and by stepping up international cooperation, we are building a global front to tackle this criminal trade. ”

Magnus Brunner, Commissioner for Internal Affairs and Migration

Employment, Social Policy, Health and Consumer Affairs Council (Health), 16 June 2026



At its meeting of 16 June 2026 in Luxembourg, **the Health configuration of the Employment, Social Policy, Health and Consumer Affairs Council (EPSCO), meeting under the Cypriot Presidency, focused on a series of legislative and strategic initiatives aimed at reinforcing the competitiveness, resilience and long-term sustainability of European healthcare systems. EU health ministers discussed biotechnology, the reform of medical-device rules, pharmaceutical security and environmental legislation affecting medicines.**

One of the central items was the European Biotech Act. Ministers reached a political agreement — a "general approach" — on the **Biotech Act I Directive, which makes targeted amendments to EU legislation on genetically modified micro-organisms (GMMs) and on the processing of organs (amending Directives 2001/18/EC and 2010/53/EU).** In its mandate, the Council replaces the notion of "low-risk GMMs" with "GMMs eligible for an expedited procedure," limits GMM market authorisations to ten years (renewable), and clarifies the rules on organs — including a clearer distinction between autologous use and transplantation to another person. **The Commission estimates the common rules on organs could enable 200–250 additional cross-border organ exchanges per year by 2035.** Several member states (such as Italy and Belgium) supported the balance between innovation and public-health protection, while others (Austria, Hungary, Slovakia) asked for the precautionary principle to remain central, and Germany abstained.

Separately, ministers held a first policy debate — without reaching agreement — on the broader Biotech Act I Regulation, which seeks to strengthen the sector's competitiveness, accelerate clinical-trial authorisations and improve patients' access to innovative treatments. Legislative work on the regulation will continue under the incoming Irish Presidency.

Health ministers also reviewed progress on the ongoing reform of the rules on medical devices and in vitro diagnostic medical devices. **The Presidency reported on technical work carried out during the first half of 2026 to simplify the framework and safeguard patient access to safe and effective technologies.** Member states broadly back simplification, though differences remain over more centralised roles for the Commission and the European Medicines Agency, the regulation of AI-enabled devices, fees for smaller manufacturers and international cooperation.

Another major theme was pharmaceutical resilience. **Over an informal lunch, ministers discussed how to strengthen Europe's pharmaceutical autonomy and reduce vulnerabilities in medicine supply chains, amid concern over shortages, external dependencies and the potential impact of US drug-pricing policies.** This work builds on the Critical Medicines Act, on which the Council and the European Parliament reached a provisional political agreement on 12 May 2026 and which now awaits formal endorsement.

Ministers also addressed the impact of environmental legislation on the supply and affordability of medicines, in connection with the Urban Wastewater Treatment Directive. Germany presented a paper criticising the Commission's updated assessment of the extended-producer-responsibility rules for medicinal products and calling for stronger cost safeguards and a more harmonised EU approach.

Under "Other Business", ministers reaffirmed EU coordination in response to the Ebola outbreak caused by the Bundibugyo virus in the Democratic Republic of the Congo and Uganda, which the World Health Organization declared a public health emergency of international concern on 17 May 2026.

Overall, the June EPSCO Health Council underlined the EU's determination to reinforce the resilience of its health systems while promoting innovation in biotechnology, medicines and medical technologies. The discussions confirmed that health policy has become an increasingly strategic component of Europe's competitiveness, security and preparedness agenda.



> Overall, today's Council marks an important milestone for Europe's health agenda. The progress we achieved will strengthen the EU's competitiveness, resilience and capacity to act in the field of health. These achievements reflect the vision of the Cyprus presidency: 'An Autonomous Europe, Open to the World'. A Europe that invests in innovation, strengthens its resilience, secures its strategic interests, and delivers for its citizens while remaining open to cooperation.
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> — Neophytos Charalambides, Minister for Health, Republic of Cyprus

The turning point in healthcare passes through nurses: the Eurispes Report relaunches FNOPI's challenge



Editor's note — FNOPI (Federazione Nazionale degli Ordini delle Professioni Infermieristiche), the National Federation of the Orders of Nursing Professions in Italy, is one of ENC's member organisations. We are pleased to share our member's perspective on the 2026 Italy Report by EURISPES, an independent Italian socio-economic research institute, which places the nursing profession at the heart of the country's healthcare reform. The translation below follows FNOPI's original text in italian.

Staff shortages, retirements and Community Health Houses at risk of becoming "empty boxes": retaining professionals requires advanced careers, new skills and investment in community care.

Nursing is among the priorities highlighted in EURISPES' Italy Report 2026, now in its 38th edition. The dossier lines up the familiar figures on the absolute shortage, the imbalance in the doctor-to-nurse ratio compared with other countries, the imminent wave of retirements, the attractiveness of the university pathway and pay differentials.

Beyond the statistical overview, the EURISPES Report has the merit of considering proposals to improve the situation of the nursing profession and, starting from a figure from the United Kingdom, it reviews the experiences of several countries, focusing on a particularly interesting finding: "The introduction of advanced clinical career paths increases the retention rate in the profession by 15% compared with flatcareer models."

It is in this vein that the concept of task shifting comes in. **Looking at Europe, the dossier shows how this practice is already a well-established and successful reality: in the United Kingdom, around 26,800 nurses with Advanced Practice or Nurse Practitioner roles autonomously manage between 60% and 80% of minor cases in "See and Treat" services, and 65% of general practices employ at least one advanced nurse to manage minor acute conditions and chronic illness.** Virtuous models are also seen in the Nordic countries — as in Norway, where specialist community nurses manage post-discharge follow-up through shared digital platforms — and in Germany, with the AGnES project supporting doctors in rural areas. **According to OECD data, this reorganisation also generates a significant economic return: every euro invested in advanced community nursing produces an estimated saving of 2.4 euros through fewer emergency-room visits and avoided hospital stays.**

In the Italian context, EURISPES continues, the most relevant operational expression of this strategy is the Family and Community Nurse. Introduced by Decree-Law 34/2020 and reshaped by Ministerial Decree 77/2022**, this role provides for a standard of one Family and Community Nurse per 3,000 inhabitants, operating across the three levels of care — clinic, home and community — and differs from the Anglo-Saxon models in its strong inclination towards territorial coordination rather than individual diagnostic autonomy.** However, practical implementation is running well behind needs: the Family and Community Nurses actually operational are estimated at around 3,000, i.e. just 15% of the real requirement (about 20,000 professionals). The concrete risk, EURISPES writes, is that of opening "empty boxes": of 1,723 Community Health Houses (Case della Comunità) planned with around 2 billion euros of NRRP resources expiring on 31 December 2026, only 46 are today fully operational with doctors and nurses.

A strong signal of innovation, however, came from the so-called **"12 May" decrees which, alongside the specialisations in neonatal and paediatric care and in intensive and emergency care, introduced the Master's Degree in nursing for primary, family and community care, recognising prescriptive competence at university level for the first time.** A crucial turning point, for which the necessary contractual recognitions and national protocols on the boundaries of autonomy nevertheless remain to be defined.

The nursing profession therefore stands as a fundamental pillar in imagining the future of health and healthcare in Italy. As EURISPES President Gian Maria Fara writes in his concluding remarks: “A less healthy population is a less productive, more fearful and more vulnerable population. Total privatisation or maintaining the status quo cannot be the way out. What is expected is a courageous reform that puts the citizen back at the centre, that invests in healthcare staff, that redesigns community medicine, and that uses technology to break down inequalities of access.”

Read more: https://www.opicatanzaro.it/la-svolta-in-sanita-passa-dagli-infermieri-il-rapporto-eurispes-rilancia-la-sfida-della-fnopi/

Strengthening the Nursing Profession in Europe: the 8th ESNO Congress in Rome

From 4 to 6 June 2026, **Rome hosted the 8th Congress of the European Specialist Nurses Organisations (ESNO), held at Link University under the theme "Mutual Goals, Many Pathways: Unifying Specialist Nursing Education Across Europe"**. The congress promoted harmonised general nurse qualifications as a basis for specialist, advanced and leadership roles in a modern European and global health workforce.

A pan-European gathering

The congress drew together professional leaders, experts and researchers alongside representatives of the European institutions and health policymakers, all focused on how nursing can respond to a period of rapid demographic, technological and social change. Its work unfolded across five parallel strands spanning the whole arc of the profession — from plenary debate in the Agora to education and competencies in Building, specialist and advanced practice in Clinical, policy, leadership and digital health in Dialogue, and innovation on display in Exposition. Proceedings opened on a deliberately unconventional note, with an international hackathon — a hands-on, time-boxed session in which teams work together to develop and pitch practical ideas rather than sit through lectures. Held under the title "Mobilising Nursing Intelligence in Digital Health Transformation" and led by **Siobhan O'Connor, Global Director of the AI Nurses Network, Peter Preziosi, President and CEO of TruMerit and Arthur Olesch, Founder of aboutDigitalHealth.com**, it made the case that nurses belong at the heart of how artificial intelligence, robotics and data are governed, rather than on the margins.

The plenary "state of the profession" sessions worked through the forces reshaping European nursing. Among other subjects, they notably examined:

1) the EU policy environment for specialist nurses and how the profession can help shape it (**Ber Oomen, Executive Director of the European Specialist Nurses Organisation (ESNO)**);
2) the mounting strain on Europe's health workforce and what that turning point means for nursing, seen from the European Parliament (**MEP Andras Kulja, shadow rapporteur on the European Parliament's own-initiative (INI) report on the Health Workforce,**).
3) how the EU's life-sciences strategy and its approach to rare diseases intersect with nursing care (**Milena Angelova, Member of the European Economic and Social Committee (EESC)**);
4) the path that runs from nursing education to genuine professional autonomy and leadership (**Susan Gennaro, Professor at Connell School of Nursing**);
5) and the growing role of artificial intelligence in producing and applying clinical evidence (**Siobhan O'Connor**).

A high-profile international panel, with voices from China, the United States and Europe, drew these threads together around a single idea, that clinical leadership and policy leadership are one and the same competence, exercised in different arenas.

The closing day turned to how nursing competence is recognised and led. One session presented professional certification as a portable "currency of competence", a recognised standard that can ease nurses' mobility and the recognition of their skills across borders (**Peter Preziosi**), while another argued that today's complex, fast-moving health challenges call for specialist nurses to step into genuine leadership roles rather than remain in a supporting one **(Wendy Budin, Professor at the Rutgers University School of Nursing)**.

Regulation at the centre of European health policy

In the Dialogue stream, **Mircea Timofte — President of the European Nursing Council (ENC) and of Romania's Regulatory Body of Nurses, Midwives and Medical Assistants (OAMGMAMR) — and Prof. Dr. Theodoros Koutroubas, Executive Director of the ENC,** delivered the presentation "The European Nursing Council: regulation at the centre of European health policies", underlining the role of effective professional leadership in advancing regulation, public health, patient safety and patients' rights in EU decision-making. Prof. Koutroubas also joined as a panellist the session "Regulation of the nursing profession in Europe — from Brussels to national realities", alongside professional bodies from Germany, Ireland, Italy, Kosovo and Albania and other European organisations. The Regulatory Body of General Nurses, Midwives and Medical Assistants of Romania (OAMGMAMR), was further represented by Roxana Hainagiu and Vlad Radulian (International Relations) and Mariana Zazu (Research).



From left to right: Mr Timofte, President of ENC; Pr. Thomas Kearns; Beatrice Mazzoleni, Vice President of ENC; ENC's Senior Policy Advisor, Pr Theodoros Koutroubas; ESNO's Vice-President, Dr. Alessandro Stievano; Blerina Duka, President of the Albanese Regulatory Body of Nurses.

Key themes

Discussions focused on advanced clinical competencies, the harmonisation of professional education, nursing leadership, workforce mobility and the recognition of qualifications, uniform standards of practice, and the contribution of nurses to health policy — set against the backdrop of workforce shortages affecting many European states. Particular attention was given to digital health and the use of artificial intelligence in clinical practice, patient safety and nursing research.

Reflecting on the congress, **ENC Senior Policy Advisor, Prof. Theodoros Koutroubas noted:**

"*It was a pleasure to participate in the ESNO – European Specialist Nurses Organisation – Congress 2026 in Rome. The Congress' theme included the sustainability of the nursing workforce in the context of education, and the speakers succeeded in pointing out how essential a sustainable and empowered nursing workforce is for quality assurance within healthcare systems. I have presented the work of the ENC – European Nursing Council and argued for quality nursing regulation as a key prerequisite for public health and safety.*"