The death of a child without background diseases due to an infection is a very rare and tragic event. There are a number of bacteria and viruses that can cause such an event, in this case bacterial infection:

Meningococcal bacterium -
This bacterium causes meningitis and an invasive disease in the blood. There are international guidelines concerning preventive antibiotic treatment concerning patients contacts, for cases of Meningococcal disease. Treatment is administered in cases of close contact: Family members who live in the same residence, and the group of children and staff at the child's kindergarten. Only cases close contacts are considered at high risk of infection with the bacterium. According to international guidelines, preventive treatment should not be given in cases of contacts and children who were in short contact with the patient.

Pneumococcal bacterium -
Causes meningitis, invasive disease in the blood and lung infections. Such vaccination can be administered within the framework of routine vaccinations.

Group A Streptococcal bacterium -
Usually causes mild tonsillitis illness and skin infections, but rarely can cause a serious disease, manifested as blood infection or tissue destruction (hence the nickname "flesh-eating bacteria").

For these bacteria (Pneumococcal and Streptococcal bacteria) there is no medical or scientific evidence indicating that individuals who come in contact at kindergarten environments are at increased risk of serious illness, hence the absence of any recommendations regarding the administration of preventive care in such situations.

In the tragic case that occurred in Givatayim, initially there was no clear indication about the identity of the bacterial pathogen and thus for the avoidance of doubt, preventive treatment...
was administered against the Meningococcal bacterium in cases of contact within the family and for the children of the deceased infant’s kindergarten.

Now it seems that the Group A streptococcal bacterium was the pathogen that caused the infant’s death. This bacterium is usually characterized by mild disease, but in rare cases, as mentioned above, can cause serious disease.

Serious disease risk factors as a result of Group A streptococcal infection: Background diseases of the immune system (such as: Malignant diseases or immune-suppressive therapies (as well as diabetes). Chickenpox also constitutes a risk factor for group A streptococcal invasive disease. Therefore it is very important to make sure that individuals are vaccinated against this disease as per vaccinations routine. Serious morbidity is very rare in healthy individuals.

Warning signs:
Appearance of fever accompanied by rash, a decrease in consciousness or child restlessness or nervousness, vomiting, inability to drink, cutaneous infection that spreads rapidly and causes severe pain in particular.
In these cases, please seek medical treatment as soon as possible.
In case of suspicion, it is recommended that you consult your physician.

In conclusion:
There is no risk of severe streptococcal bacterium disease in children who came into direct contact with the sick child.